
Appropriations Committee

SB 6308

Brief Description: Extending timelines for implementation of the 988 system.

Sponsors: Senators Dhingra, Robinson, Kuderer, Nobles and Trudeau.

<p>Brief Summary of Bill</p> <ul style="list-style-type: none">• Extends timelines related to the development of platforms for an integrated 988 crisis response system and for integrated diversion data.

Hearing Date: 2/15/24

Staff: Lily Smith (786-7175).

Background:

In 2020, Congress passed the National Suicide Hotline Designation Act of 2020 which designates the number 988 as the universal telephone number within the United States for the purpose of accessing the National Suicide Prevention and Mental Health Crisis Hotline system that is maintained by the National Suicide Prevention Lifeline and the Veterans Crisis Line.

In 2021, legislation was enacted which established several changes to the behavioral health crisis system in response to the adoption of 988 as the new phone number for the National Suicide Prevention and Mental Health Crisis Hotline. Among other changes, the legislation:

- established hubs to provide crisis intervention services, case management, referrals, and connection to crisis system participants;
- required the Department of Health (DOH) to fully fund a new technologically advanced crisis call center platform for use in hubs that is interoperable with other crisis and emergency response systems statewide by July 1, 2024;
- required the Health Care Authority (HCA) to develop a behavioral health integrated client

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referral system that coordinates system information with the crisis call center hubs and behavioral health entities; and

- established the Crisis Response Improvement Strategy Committee and the related steering committee to review and report on several items related to the behavioral health crisis system, with a final report to the Legislature due January 1, 2025.

The DOH and the HCA must coordinate to develop the technology and platforms needed to manage and operate the behavioral health crisis response and suicide prevention system. The agencies must designate a primary technology system that provides access to coordination, tracking, and transition information, deployment of appropriate services, and tribal consultation and dedicated services.

In 2023, legislation was enacted which required the HCA to develop and implement a diversion data integration platform by June 30, 2025. This platform must serve as a common database for diversion efforts across the state and provide certain data collection, standardization, and tracking information. If possible, the HCA must leverage and interact with existing HCA platforms.

Summary of Bill:

The following dates are extended:

- The advanced technology platform developed by the DOH must be funded by January 1, 2026, rather than July 1, 2024.
- The diversion data integration platform developed by the HCA must be developed and implemented by December 31, 2026, rather than June 30, 2025.
- The steering committee's final report to the Legislature is due July 1, 2026, rather than January 1, 2025.

Appropriation: None.

Fiscal Note: Preliminary fiscal note available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.