

SENATE BILL REPORT

2SHB 1929

As Passed Senate, February 29, 2024

Title: An act relating to supporting young adults following inpatient behavioral health treatment.

Brief Description: Supporting young adults following inpatient behavioral health treatment.

Sponsors: House Committee on Appropriations (originally sponsored by Representatives Cortes, Eslick, Ortiz-Self, Leavitt, Duerr, Ramel, Slatter, Taylor, Orwall, Ryu, Reed, Simmons, Ormsby, Fey, Callan, Peterson, Timmons, Kloba, Macri, Street, Gregerson, Doglio, Paul, Chopp, Mena, Goodman, Lekanoff, Reeves, Fosse, Pollet and Davis).

Brief History: Passed House: 2/10/24, 97-0.

Committee Activity: Human Services: 2/15/24, 2/20/24 [DP-WM].

Ways & Means: 2/23/24, 2/26/24 [DP].

Floor Activity: Passed Senate: 2/29/24, 46-0.

Brief Summary of Bill

- Creates the Post-Inpatient Housing Program for Young Adults to provide supportive transitional housing with behavioral health supports for persons 18 to 24 years old who are exiting inpatient behavioral health treatment.
- Requires the Health Care Authority provide funding for community-based organizations to operate at least two residential programs with six to ten beds each to serve participants for up to 90 days.

SENATE COMMITTEE ON HUMAN SERVICES

Majority Report: Do pass and be referred to Committee on Ways & Means.

Signed by Senators Wilson, C., Chair; Kauffman, Vice Chair; Boehnke, Ranking Member; Frame, Nguyen, Warnick and Wilson, J..

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Staff: Kelsey-anne Fung (786-7479)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: Do pass.

Signed by Senators Robinson, Chair; Mullet, Vice Chair, Capital; Nguyen, Vice Chair, Operating; Wilson, L., Ranking Member, Operating; Gildon, Assistant Ranking Member, Operating; Schoesler, Ranking Member, Capital; Rivers, Assistant Ranking Member, Capital; Billig, Boehnke, Braun, Conway, Dhingra, Hasegawa, Hunt, Keiser, Muzzall, Pedersen, Randall, Saldaña, Torres, Van De Wege, Wagoner and Wellman.

Staff: Corban Nemeth (786-7736)

Background: Medicaid Managed Care. The Health Care Authority (HCA) provides medical care services to eligible low-income state residents and their families, primarily through the state Medicaid program. HCA administers the Medicaid program through contracts with managed care organizations under the name Washington Apple Health. The managed care organizations provide a prepaid, comprehensive system of medical and health care delivery, including preventive, primary, specialty, and ancillary health services.

Foundational Community Supports. Foundational Community Supports (FCS) provides supported employment and supported housing services to enable Medicaid clients to lead independent and self-directed lives in their own homes. Supported employment services help individuals with employment assessments, employer outreach, assistance with job applications, connections with community resources, and education, training, and coaching necessary to maintain employment. Supported housing services help individuals with housing assessment and planning, connection with community resources, assistance with housing applications, and outreach to landlords.

FCS do not provide subsidies for wages or room and board. To be eligible for FCS, the person must be enrolled in Medicaid, be at least 18 years old for supported housing or 16 years old for supported employment services, and have a medical necessity and specific risk factors that prevent the person from finding or keeping a job or a safe home.

Apple Health and Homes Initiative. Legislation from 2022 created the Office of Apple Health and Homes at the Department of Commerce. Apple Health and Homes is a multi-agency effort that pairs healthcare services with housing resources for the most vulnerable state residents. This program aligns housing resources with supportive services through HCA's FCS program. Apple Health and Homes coordinate resources, technical assistance, rent assistance, and capacity building efforts to help match eligible individuals with community support services, health care, and stable housing.

Office of Homeless Youth Prevention and Protection Programs. The Legislature created the Office of Homeless Youth Prevention and Protection Programs (OHY) within the

Department of Commerce in 2015. OHY is responsible for leading efforts to coordinate a spectrum of funding, policy, and practice efforts related to homeless youth and improving the safety, health, and welfare of homeless youth in the state. In 2018, OHY and the Department of Children, Youth, & Families were required to jointly develop a plan to ensure that, by December 31, 2020, no unaccompanied youth is discharged from a publicly funded system of care into homelessness. Publicly funded system of care means the child welfare system, behavioral health system and juvenile justice system, and OHY programs.

Summary of Bill: Subject to appropriations, the Post-Inpatient Housing Program for Young Adults (program) is created. The purpose of the program is to provide supportive transitional housing with behavioral health support focused on securing long-term housing for young adults exiting inpatient health treatment.

To be eligible for the program, the person must be between 18 and 24 years old, either exiting or have exited inpatient behavioral health treatment within the last month and be engaged in a recovery plan, and not have secured long-term housing.

Subject to appropriations, HCA must select and provide funding to at least one community-based organization, tribe, or tribal organization with specified expertise to operate at least two residential programs, one on each side of the state, with six to ten beds to serve eligible individuals for up to 90 days. The residential program must establish a developmentally and culturally responsive environment that values healing and recovery, engage peers with behavioral health experience, and support and strengthen ongoing healing and learning. The residential program must be voluntary for participants and may not be a secure facility, a facility that limits residents' ingress or egress, or a facility where individuals may be detained. The community-based organization selected to operate a residential program may choose which eligible individuals to serve.

HCA must also provide flexible funding to support the immediate needs of individuals in the residential programs. Flexible funding may be used for:

- car repair or other transportation assistance;
- rental application fees, a security deposit, or short-term rental assistance; or
- other uses that will help support the person's housing stability, education, or employment, or meet immediate basic needs.

HCA must also provide funding to contract with individuals or entities that provide behavioral health support to eligible individuals in the program, including on-site and community-based behavioral health supports, peer supports, and medication management.

HCA must consult with a transition support provider when soliciting and selecting a community-based organization to operate the residential programs. HCA must also provide funding to the transition support provider for consultation and training services, return-to-community planning for the participants, and staying in contact with former participants in the program. Transition support providers is defined as a community-based organization

selected by HCA that:

- provides information and support services related to safe housing and support services for youth exiting inpatient behavioral health treatment; and
- organize a coalition of community housing providers, inpatient behavioral health discharge planners, and young people with lived experience of behavioral health conditions or unaccompanied homelessness.

Appropriation: The bill contains a null and void clause requiring specific funding be provided in an omnibus appropriation act.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony (Human Services): PRO: This bill recognizes the alarming trend of seeing youth experience homelessness following their exit from inpatient behavioral health treatment. Nearly 80% of young adults ages 18 to 24 who are exiting inpatient care are ending up on their own on the streets in 12 months. This bill provides a proactive solution with six to ten beds on both sides of the state for youth exiting behavioral health treatment and bridges the gap in services they need by providing temporary 90-day housing while they work on longer-term housing opportunities. This bill will prevent youth homelessness and make sure communities do not lose their investments in youth mental health up to the person's 18th birthday and continue to support them on their path to recovery.

Of the youth entering homelessness, 70 percent are coming from inpatient behavioral health treatment. The youth received treatment for mental health or substance use disorder and upon exit from treatment, their only option is to go to a drop-in bed or emergency shelter. This has a chilling effect on young people considering entering behavioral health treatment. There is a need for stable housing and continuing mental health support for these individuals to have a brighter future. This bill will provide transitional housing and resources to help the person secure long-term housing and employment and behavioral support like medication management.

Persons Testifying (Human Services): PRO: Representative Julio Cortes, Prime Sponsor; Jim Theofelis, NorthStar Advocates; Jason McGill, Northwest Youth Services ; Vy Vu, NorthStar Advocates & The Mockingbird Society; Anna Nepomuceno, NAMI Washington.

Persons Signed In To Testify But Not Testifying (Human Services): No one.

Staff Summary of Public Testimony (Ways & Means): PRO: As a behavioral health advocate, I have heard stories from far too many parents whose adult children have been

discharged onto the street coming out of inpatient care. They lose track of their child and don't know if they are getting the treatment and medication that they need. Young people discharged from inpatient care need stable housing and continued mental health support. This bill is an investment in our future that will reduce youth homelessness. We have a crisis with the intersection of mental illness, homelessness, and addiction. Young adults aged 18-24 who are homeless entering inpatient treatment, are the most likely to return to homelessness in the 12 months after receiving treatment. Recovery homes provide a safe and nurturing environment where residents receive the care and guidance they need to overcome their challenges. Please support this intervention to prevent young people from exiting inpatient systems to the streets.

Persons Testifying (Ways & Means): PRO: Jim Theofelis, NorthStar Advocates; Jason McGill, Northwest Youth Services; Anna Nepomuceno, NAMI Washington and Patients Coalition of Washington.

Persons Signed In To Testify But Not Testifying (Ways & Means): No one.