
SUBSTITUTE HOUSE BILL 2408

State of Washington

68th Legislature

2024 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Lekanoff, Orwall, Davis, Ramel, and Nance)

READ FIRST TIME 01/29/24.

1 AN ACT Relating to methods of communication used by the
2 technology platform designed for the behavioral health crisis
3 response and suicide prevention system; and reenacting and amending
4 RCW 71.24.890.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 **Sec. 1.** RCW 71.24.890 and 2023 c 454 s 5 and 2023 c 433 s 16 are
7 each reenacted and amended to read as follows:

8 (1) Establishing the state designated 988 contact hubs and
9 enhancing the crisis response system will require collaborative work
10 between the department and the authority within their respective
11 roles. The department shall have primary responsibility for
12 establishing and designating the designated 988 contact hubs. The
13 authority shall have primary responsibility for developing and
14 implementing the crisis response system and services to support the
15 work of the designated 988 contact hubs. In any instance in which one
16 agency is identified as the lead, the expectation is that agency will
17 be communicating and collaborating with the other to ensure seamless,
18 continuous, and effective service delivery within the statewide
19 crisis response system.

20 (2) The department shall provide adequate funding for the state's
21 crisis call centers to meet an expected increase in the use of the

1 call centers based on the implementation of the 988 crisis hotline.
2 The funding level shall be established at a level anticipated to
3 achieve an in-state call response rate of at least 90 percent by July
4 22, 2022. The funding level shall be determined by considering
5 standards and cost per call predictions provided by the administrator
6 of the national suicide prevention lifeline, call volume predictions,
7 guidance on crisis call center performance metrics, and necessary
8 technology upgrades. In contracting with the crisis call centers, the
9 department:

10 (a) May provide funding to support crisis call centers and
11 designated 988 contact hubs to enter into limited on-site
12 partnerships with the public safety answering point to increase the
13 coordination and transfer of behavioral health calls received by
14 certified public safety telecommunicators that are better addressed
15 by clinic interventions provided by the 988 system. Tax revenue may
16 be used to support on-site partnerships;

17 (b) Shall require that crisis call centers enter into data-
18 sharing agreements, when appropriate, with the department, the
19 authority, and applicable regional behavioral health administrative
20 services organizations to provide reports and client level data
21 regarding 988 crisis hotline calls, as allowed by and in compliance
22 with existing federal and state law governing the sharing and use of
23 protected health information, including dispatch time, arrival time,
24 and disposition of the outreach for each call referred for outreach
25 by each region. The department and the authority shall establish
26 requirements that the crisis call centers report the data identified
27 in this subsection (2)(b) to regional behavioral health
28 administrative services organizations for the purposes of maximizing
29 medicaid reimbursement, as appropriate, and implementing this chapter
30 and chapters 71.05 and 71.34 RCW including, but not limited to,
31 administering crisis services for the assigned regional service area,
32 contracting with a sufficient number of licensed or certified
33 providers for crisis services, establishing and maintaining quality
34 assurance processes, maintaining patient tracking, and developing and
35 implementing strategies to coordinate care for individuals with a
36 history of frequent crisis system utilization.

37 (3) The department shall adopt rules by January 1, 2025, to
38 establish standards for designation of crisis call centers as
39 designated 988 contact hubs. The department shall collaborate with
40 the authority and other agencies to assure coordination and

1 availability of services, and shall consider national guidelines for
2 behavioral health crisis care as determined by the federal substance
3 abuse and mental health services administration, national behavioral
4 health accrediting bodies, and national behavioral health provider
5 associations to the extent they are appropriate, and recommendations
6 from the crisis response improvement strategy committee created in
7 RCW 71.24.892.

8 (4) The department shall designate designated 988 contact hubs by
9 January 1, 2026. The designated 988 contact hubs shall provide crisis
10 intervention services, triage, care coordination, referrals, and
11 connections to individuals contacting the 988 crisis hotline from any
12 jurisdiction within Washington 24 hours a day, seven days a week,
13 using the system platform developed under subsection (5) of this
14 section.

15 (a) To be designated as a designated 988 contact hub, the
16 applicant must demonstrate to the department the ability to comply
17 with the requirements of this section and to contract to provide
18 designated 988 contact hub services. The department may revoke the
19 designation of any designated 988 contact hub that fails to
20 substantially comply with the contract.

21 (b) The contracts entered shall require designated 988 contact
22 hubs to:

23 (i) Have an active agreement with the administrator of the
24 national suicide prevention lifeline for participation within its
25 network;

26 (ii) Meet the requirements for operational and clinical standards
27 established by the department and based upon the national suicide
28 prevention lifeline best practices guidelines and other recognized
29 best practices;

30 (iii) Employ highly qualified, skilled, and trained clinical
31 staff who have sufficient training and resources to provide empathy
32 to callers in acute distress, de-escalate crises, assess behavioral
33 health disorders and suicide risk, triage to system partners for
34 callers that need additional clinical interventions, and provide case
35 management and documentation. Call center staff shall be trained to
36 make every effort to resolve cases in the least restrictive
37 environment and without law enforcement involvement whenever
38 possible. Call center staff shall coordinate with certified peer
39 counselors to provide follow-up and outreach to callers in distress
40 as available. It is intended for transition planning to include a

1 pathway for continued employment and skill advancement as needed for
2 experienced crisis call center employees;

3 (iv) Train employees on agricultural community cultural
4 competencies for suicide prevention, which may include sharing
5 resources with callers that are specific to members from the
6 agricultural community. The training must prepare staff to provide
7 appropriate assessments, interventions, and resources to members of
8 the agricultural community. Employees may make warm transfers and
9 referrals to a crisis hotline that specializes in working with
10 members from the agricultural community, provided that no person
11 contacting 988 shall be transferred or referred to another service if
12 they are currently in crisis and in need of emotional support;

13 (v) Prominently display 988 crisis hotline information on their
14 websites and social media, including a description of what the caller
15 should expect when contacting the crisis call center and a
16 description of the various options available to the caller, including
17 call lines specialized in the behavioral health needs of veterans,
18 American Indian and Alaska Native persons, Spanish-speaking persons,
19 and LGBTQ populations. The website may also include resources for
20 programs and services related to suicide prevention for the
21 agricultural community;

22 (vi) Collaborate with the authority, the national suicide
23 prevention lifeline, and veterans crisis line networks to assure
24 consistency of public messaging about the 988 crisis hotline;

25 (vii) Develop and submit to the department protocols between the
26 designated 988 contact hub and 911 call centers within the region in
27 which the designated crisis call center operates and receive approval
28 of the protocols by the department and the state 911 coordination
29 office;

30 (viii) Develop, in collaboration with the region's behavioral
31 health administrative services organizations, and jointly submit to
32 the authority protocols related to the dispatching of mobile rapid
33 response crisis teams and community-based crisis teams endorsed under
34 RCW 71.24.903 and receive approval of the protocols by the authority;

35 (ix) Provide data and reports and participate in evaluations and
36 related quality improvement activities, according to standards
37 established by the department in collaboration with the authority;
38 and

39 (x) Enter into data-sharing agreements with the department, the
40 authority, and applicable regional behavioral health administrative

1 services organizations to provide reports and client level data
2 regarding 988 crisis hotline calls, as allowed by and in compliance
3 with existing federal and state law governing the sharing and use of
4 protected health information, including dispatch time, arrival time,
5 and disposition of the outreach for each call referred for outreach
6 by each region. The department and the authority shall establish
7 requirements that the designated 988 contact hubs report the data
8 identified in this subsection (4)(b)(x) to regional behavioral health
9 administrative services organizations for the purposes of maximizing
10 medicaid reimbursement, as appropriate, and implementing this chapter
11 and chapters 71.05 and 71.34 RCW including, but not limited to,
12 administering crisis services for the assigned regional service area,
13 contracting with a sufficient number of licensed or certified
14 providers for crisis services, establishing and maintaining quality
15 assurance processes, maintaining patient tracking, and developing and
16 implementing strategies to coordinate care for individuals with a
17 history of frequent crisis system utilization.

18 (c) The department and the authority shall incorporate
19 recommendations from the crisis response improvement strategy
20 committee created under RCW 71.24.892 in its agreements with
21 designated 988 contact hubs, as appropriate.

22 (5) The department and authority must coordinate to develop the
23 technology and platforms necessary to manage and operate the
24 behavioral health crisis response and suicide prevention system. The
25 department and the authority must include the crisis call centers and
26 designated 988 contact hubs in the decision-making process for
27 selecting any technology platforms that will be used to operate the
28 system. No decisions made by the department or the authority shall
29 interfere with the routing of the 988 crisis hotline calls, texts, or
30 chat as part of Washington's active agreement with the administrator
31 of the national suicide prevention lifeline or 988 administrator that
32 routes 988 contacts into Washington's system. The technologies
33 developed must include:

34 (a) A new technologically advanced behavioral health and suicide
35 prevention crisis call center system platform for use in designated
36 988 contact hubs designated by the department under subsection (4) of
37 this section. This platform, which shall be fully funded by July 1,
38 2024, shall be developed by the department and must include the
39 capacity to receive crisis assistance requests through phone calls,
40 texts, chats, and other similar methods of communication that may be

1 developed in the future that promote access to the behavioral health
2 crisis system; and

3 (b) A behavioral health integrated client referral system capable
4 of providing system coordination information to designated 988
5 contact hubs and the other entities involved in behavioral health
6 care. This system shall be developed by the authority.

7 (6) In developing the new technologies under subsection (5) of
8 this section, the department and the authority must coordinate to
9 designate a primary technology system to provide each of the
10 following:

11 (a) Access to real-time information relevant to the coordination
12 of behavioral health crisis response and suicide prevention services,
13 including:

14 (i) Real-time bed availability for all behavioral health bed
15 types and recliner chairs, including but not limited to crisis
16 stabilization services, 23-hour crisis relief centers, psychiatric
17 inpatient, substance use disorder inpatient, withdrawal management,
18 peer-run respite centers, and crisis respite services, inclusive of
19 both voluntary and involuntary beds, for use by crisis response
20 workers, first responders, health care providers, emergency
21 departments, and individuals in crisis; and

22 (ii) Real-time information relevant to the coordination of
23 behavioral health crisis response and suicide prevention services for
24 a person, including the means to access:

25 (A) Information about any less restrictive alternative treatment
26 orders or mental health advance directives related to the person; and

27 (B) Information necessary to enable the designated 988 contact
28 hub to actively collaborate with emergency departments, primary care
29 providers and behavioral health providers within managed care
30 organizations, behavioral health administrative services
31 organizations, and other health care payers to establish a safety
32 plan for the person in accordance with best practices and provide the
33 next steps for the person's transition to follow-up noncrisis care.
34 To establish information-sharing guidelines that fulfill the intent
35 of this section the authority shall consider input from the
36 confidential information compliance and coordination subcommittee
37 established under RCW 71.24.892;

38 (~~(b)~~) (b) The means to track the outcome of the 988 call to
39 enable appropriate follow-up, cross-system coordination, and
40 accountability, including as appropriate: (i) Any immediate services

1 dispatched and reports generated from the encounter; (ii) the
2 validation of a safety plan established for the caller in accordance
3 with best practices; (iii) the next steps for the caller to follow in
4 transition to noncrisis follow-up care, including a next-day
5 appointment for callers experiencing urgent, symptomatic behavioral
6 health care needs; and (iv) the means to verify and document whether
7 the caller was successful in making the transition to appropriate
8 noncrisis follow-up care indicated in the safety plan for the person,
9 to be completed either by the care coordinator provided through the
10 person's managed care organization, health plan, or behavioral health
11 administrative services organization, or if such a care coordinator
12 is not available or does not follow through, by the staff of the
13 designated 988 contact hub;

14 (c) A means to facilitate actions to verify and document whether
15 the person's transition to follow-up noncrisis care was completed and
16 services offered, to be performed by a care coordinator provided
17 through the person's managed care organization, health plan, or
18 behavioral health administrative services organization, or if such a
19 care coordinator is not available or does not follow through, by the
20 staff of the designated 988 contact hub;

21 (d) The means to provide geographically, culturally, and
22 linguistically appropriate services to persons who are part of high-
23 risk populations or otherwise have need of specialized services or
24 accommodations, and to document these services or accommodations; and

25 (e) When appropriate, consultation with tribal governments to
26 ensure coordinated care in government-to-government relationships,
27 and access to dedicated services to tribal members.

28 (7) The authority shall:

29 (a) Collaborate with county authorities and behavioral health
30 administrative services organizations to develop procedures to
31 dispatch behavioral health crisis services in coordination with
32 designated 988 contact hubs to effectuate the intent of this section;

33 (b) Establish formal agreements with managed care organizations
34 and behavioral health administrative services organizations by
35 January 1, 2023, to provide for the services, capacities, and
36 coordination necessary to effectuate the intent of this section,
37 which shall include a requirement to arrange next-day appointments
38 for persons contacting the 988 crisis hotline experiencing urgent,
39 symptomatic behavioral health care needs with geographically,
40 culturally, and linguistically appropriate primary care or behavioral

1 health providers within the person's provider network, or, if
2 uninsured, through the person's behavioral health administrative
3 services organization;

4 (c) Create best practices guidelines by July 1, 2023, for
5 deployment of appropriate and available crisis response services by
6 designated 988 contact hubs to assist 988 hotline callers to minimize
7 nonessential reliance on emergency room services and the use of law
8 enforcement, considering input from relevant stakeholders and
9 recommendations made by the crisis response improvement strategy
10 committee created under RCW 71.24.892;

11 (d) Develop procedures to allow appropriate information sharing
12 and communication between and across crisis and emergency response
13 systems for the purpose of real-time crisis care coordination
14 including, but not limited to, deployment of crisis and outgoing
15 services, follow-up care, and linked, flexible services specific to
16 crisis response; and

17 (e) Establish guidelines to appropriately serve high-risk
18 populations who request crisis services. The authority shall design
19 these guidelines to promote behavioral health equity for all
20 populations with attention to circumstances of race, ethnicity,
21 gender, socioeconomic status, sexual orientation, and geographic
22 location, and include components such as training requirements for
23 call response workers, policies for transferring such callers to an
24 appropriate specialized center or subnetwork within or external to
25 the national suicide prevention lifeline network, and procedures for
26 referring persons who access the 988 crisis hotline to linguistically
27 and culturally competent care.

28 (8) The department shall monitor trends in 988 crisis hotline
29 caller data, as reported by designated 988 contact hubs under
30 subsection (4)(b)(x) of this section, and submit an annual report to
31 the governor and the appropriate committees of the legislature
32 summarizing the data and trends beginning December 1, 2027.

33 (9) Subject to authorization by the national 988 administrator
34 and the availability of amounts appropriated for this specific
35 purpose, any Washington state subnetwork of the 988 crisis hotline
36 dedicated to the crisis assistance needs of American Indian and
37 Alaska Native persons shall offer services by text, chat, and other
38 similar methods of communication to the same extent as does the
39 general 988 crisis hotline. The department must coordinate with the

1 substance abuse and mental health services administration for the
2 authorization.

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