

HOUSE BILL REPORT

HB 2437

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to establishing fee authority for accreditation services provided to opioid treatment programs by the department of health.

Brief Description: Establishing fee authority for accreditation services provided to opioid treatment programs by the department of health.

Sponsors: Representatives Lekanoff, Parshley, Ryu, Peterson, Simmons, Ramel, Davis, Macri and Nance; by request of Department of Health.

Brief History:

Committee Activity:

Health Care & Wellness: 1/20/26, 1/30/26 [DP].

Brief Summary of Bill

- Authorizes the Department of Health (Department) to become an accrediting body for opioid treatment programs.
- Directs the Department to establish accreditation fees to cover the costs associated with accreditation activities.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 14 members: Representatives Bronoske, Chair; Lekanoff, Vice Chair; Rule, Vice Chair; Schmick, Ranking Minority Member; Valdez, Assistant Ranking Minority Member; Davis, Macri, Obras, Parshley, Shavers, Simmons, Stonier, Stuebe and Thai.

Minority Report: Without recommendation. Signed by 3 members: Representatives Marshall, Assistant Ranking Minority Member; Engell and Manjarrez.

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: Chris Blake (786-7392).

Background:

Opioid Treatment Programs.

Opioid treatment programs (OTPs) are programs that engage in the treatment of opioid use disorder with medications approved for the treatment of opioid use disorder and reversal of opioid overdose and provide a comprehensive range of medical and rehabilitative services. An OTP may order, possess, dispense, and administer medications approved for the treatment of opioid use disorder, alcohol use disorder, tobacco use disorder, and reversal of opioid overdose.

An OTP must be licensed as a behavioral health agency by the Department of Health (Department) and meet other regulatory requirements specific to operating as an OTP. Among the requirements, an OTP must meet accreditation standards set by the federal Substance Abuse and Mental Health Services Administration (SAMHSA). The Department has been approved by the SAMHSA as an accrediting body for OTPs in Washington. The Department does not charge a fee to applicants for its accreditation services.

Opioid Abatement Settlement Account.

The Opioid Abatement Settlement Account (Account) is an appropriated account that includes settlement money designated to be used by the state to abate the opioid epidemic. Expenditures from the Account may only be used for future opioid remediation. The activities include the care, treatment, and other programs and expenditures to address the use and abuse of opioid products, treat or mitigate opioid use or related disorders, or mitigate other alleged effects of the opioid epidemic. In addition, the State Treasurer must make annual transfers from the Account into the Tribal Opioid Prevention and Treatment Account.

Summary of Bill:

The Department of Health (Department) is authorized to apply to the federal Department of Health and Human Services (DHHS) to become an accrediting body for opioid treatment programs. If the Department is approved, it must perform its accrediting-body responsibilities according to policies and procedures approved by the DHHS. In addition, the Department must establish accreditation fees in rule, at levels sufficient to cover the costs associated with the accreditation activities. The Department may use appropriations from the Opioid Abatement Settlement Account to offset the cost of providing accreditation services.

Appropriation: None.

Fiscal Note: Available.

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

Staff Summary of Public Testimony:

(In support) Opioid treatment programs highly value the Department of Health's (Department's) accreditation services and have expressed concern that removing these services would result in diminishing access to care, especially in rural and other underserved areas. Working with other accrediting bodies often involves burdensome requirements that are not associated with patient care, nor are they specific to Washington. If the Department were to not provide this service, opioid treatment programs would have to turn to third-party accrediting bodies, which may have overly burdensome requirements and have different priorities and structures than the Department.

(Opposed) None.

Persons Testifying: Representative Debra Lekanoff, prime sponsor; and Ian Corbridge, Washington State Department of Health.

Persons Signed In To Testify But Not Testifying: None.