

SENATE BILL REPORT

2SHB 1373

As of April 3, 2009

Title: An act relating to equitable access to appropriate and effective children's mental health services.

Brief Description: Concerning children's mental health services.

Sponsors: House Committee on Health & Human Services Appropriations (originally sponsored by Representatives Dickerson, Kagi, Green, Cody, Darneille, Dunshee, Roberts, Goodman, Appleton, Kenney, Orwall, Hurst, Moeller, Takko, Chase, Rolfes, Carlyle, Simpson, Nelson, Conway and Ormsby).

Brief History: Passed House: 3/09/09, 66-29.

Committee Activity: Human Services & Corrections: 3/24/09, 3/26/09 [DPA-WM, w/oRec].

Ways & Means: 4/03/09.

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Majority Report: Do pass as amended and be referred to Committee on Ways & Means. Signed by Senators Hargrove, Chair; Regala, Vice Chair; Kauffman and McAuliffe.

Minority Report: That it be referred without recommendation.

Signed by Senators Stevens, Ranking Minority Member; Brandland and Carrell.

Staff: Kevin Black (786-7747)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Tim Yowell (786-7435)

Background: The state purchases mental health services for low-income children primarily through Regional Support Networks (RSNs). In addition, children who are covered by state medical assistance programs may also receive a defined amount of mental health outpatient services through the Healthy Options medical managed care program, and through certain private providers on a fee-for-service basis. The state limits the number of hours of outpatient therapy sessions for which it will pay under the fee-for-service and medical managed care programs. Children and families who require more than that defined number

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are covered by the more comprehensive RSN Medicaid mental health managed care program.

In 2007, Second Substitute House Bill 1088 increased the number of outpatient therapy visits for which the state will pay under the Medicaid fee-for-service and Healthy Options programs from 12 visits per calendar year to 20. The 2007 statutory change also provided for the state Medicaid program to pay for any licensed mental health professional to deliver children's mental health therapy. These increased benefits are scheduled to expire on July 1, 2010.

Second Substitute House Bill 1088 also created the Children's Mental Health Evidence Based Practice Institute (EBP Institute) at the University of Washington. One of the functions of the EBP Institute is to collaborate with the Department of Social and Health Services (DSHS) to develop and implement policies to improve prescribing practices for treatment of emotional or behavioral disturbances in children.

Summary of Bill (Recommended Amendments): The July 1, 2010 expiration date for the expanded outpatient therapy benefit is removed. Therapy may also be provided by persons regulated under Title 18 RCW who are under the direct supervision of licensed mental health professionals. Therapy must be made available when a need is identified through a developmental screening, consistent with federal standards.

DSHS and the EBP Institute must collaborate to encourage and develop incentives for the use of recommended prescribing practices for treatment of emotional or behavioral disturbances in children.

EFFECT OF CHANGES MADE BY HUMAN SERVICES & CORRECTIONS COMMITTEE (Recommended Amendments): Persons delivering therapy under the supervision of a licensed mental health professional must be regulated under Title 18 RCW.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

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

Staff Summary of Public Testimony on Second Substitute House Bill (Human Services & Corrections): PRO: This state has taken great steps over the past several years to improve the delivery of mental health services to children. The goal is to increase coping skills for children and families through the use of evidence-based practices. Measures already adopted have increased the numbers of children receiving services and reduced reliance on psychotropic medication. The changes in this bill will expand upon this work. It will be helpful to be able to have services delivered by a person under the supervision of a therapist.

Persons Testifying (Human Services & Corrections): PRO: Representative Dickerson, prime sponsor; Eric Trupin, University of Washington; Pete Peterson, Washington Association of Juvenile Court Administrators; Laurie Lippold, Children's Home Society.

Staff Summary of Public Testimony on HSC Recommended Amended Bill (Ways & Means): PRO: It is important to diagnose and treat mental illness as early as possible. Doing so avoids suffering and saves money down the road. Research shows that emotional disturbances are the leading cause of school drop-out, and suicide the third leading cause of death among children. Early mental health treatment is particularly important in avoiding juvenile delinquency.

Persons Testifying (Ways & Means): PRO: Representative Dickerson, prime sponsor; Jim Adams, National Alliance for the Mentally Ill, Washington; Eric Trupin, University of Washington School of Medicine; Laurie Lippold, Children's Home Society.