

SENATE BILL REPORT

SB 5488

As Reported by Senate Committee On:
Health & Long-Term Care, February 16, 2011
Ways & Means, February 24, 2011

Title: An act relating to facilitating integration of behavioral health care into primary care by reducing regulatory barriers.

Brief Description: Facilitating integration of behavioral health care and primary care.

Sponsors: Senators Hatfield and Keiser.

Brief History:

Committee Activity: Health & Long-Term Care: 2/02/11, 2/16/11 [DP-WM].
Ways & Means: 2/24/11 [DP].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

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

Signed by Senators Keiser, Chair; Conway, Vice Chair; Becker, Ranking Minority Member; Carrell, Kline, Murray, Parlette, Pflug and Pridemore.

Staff: Rhoda Donkin (786-7465)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: Do pass.

Signed by Senators Murray, Chair; Kilmer, Vice Chair, Capital Budget Chair; Zarelli, Ranking Minority Member; Parlette, Ranking Minority Member Capital; Baumgartner, Baxter, Brown, Conway, Fraser, Hatfield, Hewitt, Holmquist Newbry, Honeyford, Kastama, Keiser, Kohl-Welles, Pflug, Pridemore, Regala, Rockefeller, Schoesler and Tom.

Staff: Tim Yowell (786-7435)

Background: Cowlitz Comprehensive Healthcare is a collaborative effort of Cowlitz County Guidance Association, Drug Abuse Prevention Center, and Cowlitz Family Health Center. The partnership was officially established in 2004 to try to improve primary care, mental health, and substance abuse treatment to over half of the low-income individuals in Cowlitz County. The collaborative effort has sought to remove the separate administrative,

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funding, and practice silos that make health care inefficient, redundant, inaccessible, and not patient-centered. There is continued interest in finding solutions to the regulations, systems, funding sources, and other administrative practices that prevent the smooth integration of primary care and behavioral health for thousands of Cowlitz residents.

Summary of Bill: The Department of Health and the Department of Social and Health Services (DSHS) must examine the best regulatory practices to facilitate and support the integration of primary care and behavioral health care in a county in southwest Washington. A committee is authorized consisting of representatives of a public health agency, a mental health treatment agency, and a drug abuse prevention agency to study regulatory impacts of integrating care at mental health, chemical dependency, and federally qualified health centers.

The review includes streamlined electronic data management and reporting, consolidating licensing procedures, flexible funding opportunities, and simplified administrative procedures. The committee must submit a preliminary report to the Governor and the Legislature by December 1, 2011, with information on current regulatory barriers and timetables for taking action on the best regulatory practices to support integration. A final report is due December 1, 2012.

DSHS must complete the process it has undertaken for developing integrated rules or legislation for chemical dependency, problem gambling, and community mental health agencies by December 1, 2011, and to expand its process to include an analysis of the barriers to integration at federally qualified health centers seeking to offer integrated primary and behavioral care by December 1, 2012.

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 (Health & Long-Term Care): PRO: Cowlitz Comprehensive Healthcare has worked collaboratively for years, and we have proven success in our practice of referrals between our health clinics and our mental health services. A huge number of our primary care visits involve depression, for example, which means we need to closely interact with our mental health and chemical dependency partners, but we constantly hit barriers with integrating care for our low income population. If we could address these unnecessary obstacles we would achieve much better patient effectiveness. We need help with licensing issues, use of electronic information that can communicate between providers, flexible funding structure, and other administrative barriers. We are doing the work; we just need some relief so we can do it better.

Persons Testifying (Health & Long-Term Care): PRO: Floyd Gus Nolte, Drug Abuse Prevention Center; Dian Cooper Cowlitz Family Health Center; Eric Yakovich, Cowlitz County Guidance Association.

Staff Summary of Public Testimony (Ways & Means): PRO: The proposals for better integration of medical and behavioral health care that have been brought forward by agencies in Cowlitz County are cutting edge, and should actually save the state money. It is surprising and discouraging to learn that all of these DSHS programs use different electronic reporting systems that are unable to talk with each other.

Persons Testifying (Ways & Means): PRO: Senator Hatfield, prime sponsor; Senator Keiser.