

ESHB 1713 - S AMD TO WM COMM AMD (S2974.1) **440**
By Senators Darneille, Parlette

ADOPTED 4/15/2015

1 On page 1, after line 34 of the amendment, insert the following:

2 "Sec. 2. RCW 71.24.025 and 2014 c 225 s 10 are each reenacted
3 and amended to read as follows:

4 Unless the context clearly requires otherwise, the definitions in
5 this section apply throughout this chapter.

6 (1) "Acutely mentally ill" means a condition which is limited to
7 a short-term severe crisis episode of:

8 (a) A mental disorder as defined in RCW 71.05.020 or, in the case
9 of a child, as defined in RCW 71.34.020;

10 (b) Being gravely disabled as defined in RCW 71.05.020 or, in the
11 case of a child, a gravely disabled minor as defined in RCW
12 71.34.020; or

13 (c) Presenting a likelihood of serious harm as defined in RCW
14 71.05.020 or, in the case of a child, as defined in RCW 71.34.020.

15 (2) "Available resources" means funds appropriated for the
16 purpose of providing community mental health programs, federal funds,
17 except those provided according to Title XIX of the Social Security
18 Act, and state funds appropriated under this chapter or chapter 71.05
19 RCW by the legislature during any biennium for the purpose of
20 providing residential services, resource management services,
21 community support services, and other mental health services. This
22 does not include funds appropriated for the purpose of operating and
23 administering the state psychiatric hospitals.

24 (3) "Behavioral health organization" means any county authority
25 or group of county authorities or other entity recognized by the
26 secretary in contract in a defined region.

27 (4) "Behavioral health services" means mental health services as
28 described in this chapter and chapter 71.36 RCW and (~~chemical~~
29 ~~dependency~~) substance use disorder treatment services as described
30 in this chapter and chapter 70.96A RCW.

31 (5) "Child" means a person under the age of eighteen years.

1 (6) "Chronically mentally ill adult" or "adult who is chronically
2 mentally ill" means an adult who has a mental disorder and meets at
3 least one of the following criteria:

4 (a) Has undergone two or more episodes of hospital care for a
5 mental disorder within the preceding two years; or

6 (b) Has experienced a continuous psychiatric hospitalization or
7 residential treatment exceeding six months' duration within the
8 preceding year; or

9 (c) Has been unable to engage in any substantial gainful activity
10 by reason of any mental disorder which has lasted for a continuous
11 period of not less than twelve months. "Substantial gainful activity"
12 shall be defined by the department by rule consistent with Public Law
13 92-603, as amended.

14 (7) "Clubhouse" means a community-based program that provides
15 rehabilitation services and is certified by the department of social
16 and health services.

17 ~~((("Community mental health program" means all mental health
18 services, activities, or programs using available resources.~~

19 ~~(+9+))~~ "Community mental health service delivery system" means
20 public, private, or tribal agencies that provide services
21 specifically to persons with mental disorders as defined under RCW
22 71.05.020 and receive funding from public sources.

23 ~~((+10+))~~ (9) "Community support services" means services
24 authorized, planned, and coordinated through resource management
25 services including, at a minimum, assessment, diagnosis, emergency
26 crisis intervention available twenty-four hours, seven days a week,
27 prescreening determinations for persons who are mentally ill being
28 considered for placement in nursing homes as required by federal law,
29 screening for patients being considered for admission to residential
30 services, diagnosis and treatment for children who are acutely
31 mentally ill or severely emotionally disturbed discovered under
32 screening through the federal Title XIX early and periodic screening,
33 diagnosis, and treatment program, investigation, legal, and other
34 nonresidential services under chapter 71.05 RCW, case management
35 services, psychiatric treatment including medication supervision,
36 counseling, psychotherapy, assuring transfer of relevant patient
37 information between service providers, recovery services, and other
38 services determined by behavioral health organizations.

39 ~~((+11+))~~ (10) "Consensus-based" means a program or practice that
40 has general support among treatment providers and experts, based on

1 experience or professional literature, and may have anecdotal or case
2 study support, or that is agreed but not possible to perform studies
3 with random assignment and controlled groups.

4 ~~((12))~~ (11) "County authority" means the board of county
5 commissioners, county council, or county executive having authority
6 to establish a community mental health program, or two or more of the
7 county authorities specified in this subsection which have entered
8 into an agreement to provide a community mental health program.

9 ~~((13))~~ (12) "Department" means the department of social and
10 health services.

11 ~~((14))~~ (13) "Designated mental health professional" means a
12 mental health professional designated by the county or other
13 authority authorized in rule to perform the duties specified in this
14 chapter.

15 ~~((15))~~ (14) "Emerging best practice" or "promising practice"
16 means a program or practice that, based on statistical analyses or a
17 well established theory of change, shows potential for meeting the
18 evidence-based or research-based criteria, which may include the use
19 of a program that is evidence-based for outcomes other than those
20 listed in subsection ~~((16))~~ (15) of this section.

21 ~~((16))~~ (15) "Evidence-based" means a program or practice that
22 has been tested in heterogeneous or intended populations with
23 multiple randomized, or statistically controlled evaluations, or
24 both; or one large multiple site randomized, or statistically
25 controlled evaluation, or both, where the weight of the evidence from
26 a systemic review demonstrates sustained improvements in at least one
27 outcome. "Evidence-based" also means a program or practice that can
28 be implemented with a set of procedures to allow successful
29 replication in Washington and, when possible, is determined to be
30 cost-beneficial.

31 ~~((17))~~ (16) "Licensed service provider" means an entity
32 licensed according to this chapter or chapter 71.05 or 70.96A RCW or
33 an entity deemed to meet state minimum standards as a result of
34 accreditation by a recognized behavioral health accrediting body
35 recognized and having a current agreement with the department, or
36 tribal attestation that meets state minimum standards, or persons
37 licensed under chapter 18.57, 18.71, 18.83, or 18.79 RCW, as it
38 applies to registered nurses and advanced registered nurse
39 practitioners.

1 ~~((18))~~ (17) "Long-term inpatient care" means inpatient services
2 for persons committed for, or voluntarily receiving intensive
3 treatment for, periods of ninety days or greater under chapter 71.05
4 RCW. "Long-term inpatient care" as used in this chapter does not
5 include: (a) Services for individuals committed under chapter 71.05
6 RCW who are receiving services pursuant to a conditional release or a
7 court-ordered less restrictive alternative to detention; or (b)
8 services for individuals voluntarily receiving less restrictive
9 alternative treatment on the grounds of the state hospital.

10 ~~((19))~~ (18) "Mental health services" means all services
11 provided by behavioral health organizations and other services
12 provided by the state for persons who are mentally ill.

13 ~~((20))~~ (19) "Mentally ill persons," "persons who are mentally
14 ill," and "the mentally ill" mean persons and conditions defined in
15 subsections (1), (6), (27), and (28) ~~(, and (29))~~ of this section.

16 ~~((21))~~ (20) "Recovery" means the process in which people are
17 able to live, work, learn, and participate fully in their
18 communities.

19 ~~((22))~~ (21) "Registration records" include all the records of
20 the department, behavioral health organizations, treatment
21 facilities, and other persons providing services to the department,
22 county departments, or facilities which identify persons who are
23 receiving or who at any time have received services for mental
24 illness.

25 ~~((23))~~ (22) "Research-based" means a program or practice that
26 has been tested with a single randomized, or statistically controlled
27 evaluation, or both, demonstrating sustained desirable outcomes; or
28 where the weight of the evidence from a systemic review supports
29 sustained outcomes as described in subsection ~~((16))~~ (15) of this
30 section but does not meet the full criteria for evidence-based.

31 ~~((24))~~ (23) "Residential services" means a complete range of
32 residences and supports authorized by resource management services
33 and which may involve a facility, a distinct part thereof, or
34 services which support community living, for persons who are acutely
35 mentally ill, adults who are chronically mentally ill, children who
36 are severely emotionally disturbed, or adults who are seriously
37 disturbed and determined by the behavioral health organization to be
38 at risk of becoming acutely or chronically mentally ill. The services
39 shall include at least evaluation and treatment services as defined
40 in chapter 71.05 RCW, acute crisis respite care, long-term adaptive

1 and rehabilitative care, and supervised and supported living
2 services, and shall also include any residential services developed
3 to service persons who are mentally ill in nursing homes, assisted
4 living facilities, and adult family homes, and may include outpatient
5 services provided as an element in a package of services in a
6 supported housing model. Residential services for children in out-of-
7 home placements related to their mental disorder shall not include
8 the costs of food and shelter, except for children's long-term
9 residential facilities existing prior to January 1, 1991.

10 ~~((+25))~~ (24) "Resilience" means the personal and community
11 qualities that enable individuals to rebound from adversity, trauma,
12 tragedy, threats, or other stresses, and to live productive lives.

13 ~~((+26))~~ (25) "Resource management services" mean the planning,
14 coordination, and authorization of residential services and community
15 support services administered pursuant to an individual service plan
16 for: (a) Adults and children who are acutely mentally ill; (b) adults
17 who are chronically mentally ill; (c) children who are severely
18 emotionally disturbed; or (d) adults who are seriously disturbed and
19 determined solely by a behavioral health organization to be at risk
20 of becoming acutely or chronically mentally ill. Such planning,
21 coordination, and authorization shall include mental health screening
22 for children eligible under the federal Title XIX early and periodic
23 screening, diagnosis, and treatment program. Resource management
24 services include seven day a week, twenty-four hour a day
25 availability of information regarding enrollment of adults and
26 children who are mentally ill in services and their individual
27 service plan to designated mental health professionals, evaluation
28 and treatment facilities, and others as determined by the behavioral
29 health organization.

30 ~~((+27))~~ (26) "Secretary" means the secretary of social and
31 health services.

32 ~~((+28))~~ (27) "Seriously disturbed person" means a person who:

33 (a) Is gravely disabled or presents a likelihood of serious harm
34 to himself or herself or others, or to the property of others, as a
35 result of a mental disorder as defined in chapter 71.05 RCW;

36 (b) Has been on conditional release status, or under a less
37 restrictive alternative order, at some time during the preceding two
38 years from an evaluation and treatment facility or a state mental
39 health hospital;

1 (c) Has a mental disorder which causes major impairment in
2 several areas of daily living;

3 (d) Exhibits suicidal preoccupation or attempts; or

4 (e) Is a child diagnosed by a mental health professional, as
5 defined in chapter 71.34 RCW, as experiencing a mental disorder which
6 is clearly interfering with the child's functioning in family or
7 school or with peers or is clearly interfering with the child's
8 personality development and learning.

9 ~~((+29))~~ (28) "Severely emotionally disturbed child" or "child
10 who is severely emotionally disturbed" means a child who has been
11 determined by the behavioral health organization to be experiencing a
12 mental disorder as defined in chapter 71.34 RCW, including those
13 mental disorders that result in a behavioral or conduct disorder,
14 that is clearly interfering with the child's functioning in family or
15 school or with peers and who meets at least one of the following
16 criteria:

17 (a) Has undergone inpatient treatment or placement outside of the
18 home related to a mental disorder within the last two years;

19 (b) Has undergone involuntary treatment under chapter 71.34 RCW
20 within the last two years;

21 (c) Is currently served by at least one of the following child-
22 serving systems: Juvenile justice, child-protection/welfare, special
23 education, or developmental disabilities;

24 (d) Is at risk of escalating maladjustment due to:

25 (i) Chronic family dysfunction involving a caretaker who is
26 mentally ill or inadequate;

27 (ii) Changes in custodial adult;

28 (iii) Going to, residing in, or returning from any placement
29 outside of the home, for example, psychiatric hospital, short-term
30 inpatient, residential treatment, group or foster home, or a
31 correctional facility;

32 (iv) Subject to repeated physical abuse or neglect;

33 (v) Drug or alcohol abuse; or

34 (vi) Homelessness.

35 ~~((+30))~~ (29) "State minimum standards" means minimum
36 requirements established by rules adopted by the secretary and
37 necessary to implement this chapter for: (a) Delivery of mental
38 health services; (b) licensed service providers for the provision of
39 mental health services; (c) residential services; and (d) community
40 support services and resource management services.

1 (~~(31)~~) (30) Mental health "treatment records" include
2 registration and all other records concerning persons who are
3 receiving or who at any time have received services for mental
4 illness, which are maintained by the department, by behavioral health
5 organizations and their staffs, and by treatment facilities.
6 Treatment records do not include notes or records maintained for
7 personal use by a person providing treatment services for the
8 department, behavioral health organizations, or a treatment facility
9 if the notes or records are not available to others.

10 (~~(32)~~) (31) "Tribal authority," for the purposes of this
11 section and RCW 71.24.300 only, means: The federally recognized
12 Indian tribes and the major Indian organizations recognized by the
13 secretary insofar as these organizations do not have a financial
14 relationship with any behavioral health organization that would
15 present a conflict of interest.

16 (32) "Alcoholism" means a disease, characterized by a dependency
17 on alcoholic beverages, loss of control over the amount and
18 circumstances of use, symptoms of tolerance, physiological or
19 psychological withdrawal, or both, if use is reduced or discontinued,
20 and impairment of health or disruption of social or economic
21 functioning.

22 (33) "Approved substance use disorder treatment program" means a
23 program for persons with a substance use disorder provided by a
24 treatment program certified by the department of social and health
25 services as meeting standards adopted under this chapter.

26 (34) "Behavioral health program" means all expenditures,
27 services, activities, or programs, including reasonable
28 administration and overhead, designed and conducted to prevent or
29 treat chemical dependency and mental illness.

30 (35) "Substance use disorder" means a cluster of cognitive,
31 behavioral, and physiological symptoms indicating that an individual
32 continues using the substance despite significant substance-related
33 problems. The diagnosis of a substance use disorder is based on a
34 pathological pattern of behaviors related to the use of the
35 substances.

36 (36) "Designated chemical dependency specialist" means a person
37 designated by the behavioral health organization or by the county
38 alcoholism and other drug addiction program coordinator designated by
39 the behavioral health organization to perform the commitment duties

1 described in RCW 70.96A.140 and qualified to do so by meeting
2 standards adopted by the department.

3 (37) "Drug addiction" means a disease characterized by a
4 dependency on psychoactive chemicals, loss of control over the amount
5 and circumstances of use, symptoms of tolerance, physiological or
6 psychological withdrawal, or both, if use is reduced or discontinued,
7 and impairment of health or disruption of social or economic
8 functioning.

9 (38) "Early adopter" means a regional service area for which all
10 of the county authorities have requested that the department and the
11 health care authority jointly purchase medical and behavioral health
12 services through a managed care health system as defined under RCW
13 71.24.380(6).

14 (39) "Licensed physician" means a person licensed to practice
15 medicine or osteopathic medicine and surgery in the state of
16 Washington.

17 **Sec. 3.** RCW 71.24.035 and 2014 c 225 s 11 are each amended to
18 read as follows:

19 (1) The department is designated as the state (~~mental~~)
20 behavioral health authority which includes recognition as the single
21 state authority for substance use disorders and state mental health
22 authority.

23 (2) The secretary shall provide for public, client, tribal, and
24 licensed service provider participation in developing the state
25 (~~mental~~) behavioral health program, developing contracts with
26 behavioral health organizations, and any waiver request to the
27 federal government under medicaid.

28 (3) The secretary shall provide for participation in developing
29 the state (~~mental~~) behavioral health program for children and other
30 underserved populations, by including representatives on any
31 committee established to provide oversight to the state (~~mental~~)
32 behavioral health program.

33 (4) The secretary shall be designated as the behavioral health
34 organization if the behavioral health organization fails to meet
35 state minimum standards or refuses to exercise responsibilities under
36 its contract or RCW 71.24.045, until such time as a new behavioral
37 health organization is designated.

38 (5) The secretary shall:

1 (a) Develop a biennial state (~~mental~~) behavioral health program
2 that incorporates regional biennial needs assessments and regional
3 mental health service plans and state services for adults and
4 children with mental (~~illness~~) disorders or substance use disorders
5 or both;

6 (b) Assure that any behavioral health organization or county
7 community (~~mental~~) behavioral health program provides medically
8 necessary services to medicaid recipients consistent with the state's
9 medicaid state plan or federal waiver authorities, and nonmedicaid
10 services consistent with priorities established by the department;

11 (c) Develop and adopt rules establishing state minimum standards
12 for the delivery of (~~mental~~) behavioral health services pursuant to
13 RCW 71.24.037 including, but not limited to:

14 (i) Licensed service providers. These rules shall permit a
15 county-operated (~~mental~~) behavioral health program to be licensed
16 as a service provider subject to compliance with applicable statutes
17 and rules. The secretary shall provide for deeming of compliance with
18 state minimum standards for those entities accredited by recognized
19 behavioral health accrediting bodies recognized and having a current
20 agreement with the department;

21 (ii) Inpatient services, evaluation and treatment services and
22 facilities under chapter 71.05 RCW, resource management services, and
23 community support services;

24 (d) Assure that the special needs of persons who are minorities,
25 elderly, disabled, children, low-income, and parents who are
26 respondents in dependency cases are met within the priorities
27 established in this section;

28 (e) Establish a standard contract or contracts, consistent with
29 state minimum standards which shall be used in contracting with
30 behavioral health organizations. The standard contract shall include
31 a maximum fund balance, which shall be consistent with that required
32 by federal regulations or waiver stipulations;

33 (f) Make contracts necessary or incidental to the performance of
34 its duties and the execution of its powers, including managed care
35 contracts for behavioral health services, contracts entered into
36 under RCW 74.09.522, and contracts with public and private agencies,
37 organizations, and individuals to pay them for behavioral health
38 services;

39 (g) Establish, to the extent possible, a standardized auditing
40 procedure which is designed to assure compliance with contractual

1 agreements authorized by this chapter and minimizes paperwork
2 requirements of behavioral health organizations and licensed service
3 providers. The audit procedure shall focus on the outcomes of service
4 as provided in RCW 43.20A.895, 70.320.020, and 71.36.025;

5 ~~((g))~~ (h) Develop and maintain an information system to be used
6 by the state and behavioral health organizations that includes a
7 tracking method which allows the department and behavioral health
8 organizations to identify ~~((mental))~~ behavioral health clients'
9 participation in any ~~((mental))~~ behavioral health service or public
10 program on an immediate basis. The information system shall not
11 include individual patient's case history files. Confidentiality of
12 client information and records shall be maintained as provided in
13 this chapter and chapter 70.02 RCW;

14 ~~((h))~~ (i) License service providers who meet state minimum
15 standards;

16 ~~((i))~~ (j) Periodically monitor the compliance of behavioral
17 health organizations and their network of licensed service providers
18 for compliance with the contract between the department, the
19 behavioral health organization, and federal and state rules at
20 reasonable times and in a reasonable manner;

21 ~~((j))~~ (k) Fix fees to be paid by evaluation and treatment
22 centers to the secretary for the required inspections;

23 ~~((k))~~ (l) Monitor and audit behavioral health organizations and
24 licensed service providers as needed to assure compliance with
25 contractual agreements authorized by this chapter;

26 ~~((l))~~ (m) Adopt such rules as are necessary to implement the
27 department's responsibilities under this chapter;

28 ~~((m))~~ (n) License or certify crisis stabilization units that
29 meet state minimum standards;

30 ~~((n))~~ (o) License or certify clubhouses that meet state minimum
31 standards; ~~((and~~

32 ~~((o))~~ (p) License or certify triage facilities that meet state
33 minimum standards; and

34 (q) Administer or supervise the administration of the provisions
35 relating to persons with substance use disorders and intoxicated
36 persons of any state plan submitted for federal funding pursuant to
37 federal health, welfare, or treatment legislation.

38 (6) The secretary shall use available resources only for
39 behavioral health organizations, except:

1 (a) To the extent authorized, and in accordance with any
2 priorities or conditions specified, in the biennial appropriations
3 act; or

4 (b) To incentivize improved performance with respect to the
5 client outcomes established in RCW 43.20A.895, 70.320.020, and
6 71.36.025, integration of behavioral health and medical services at
7 the clinical level, and improved care coordination for individuals
8 with complex care needs.

9 (7) Each behavioral health organization and licensed service
10 provider shall file with the secretary, on request, such data,
11 statistics, schedules, and information as the secretary reasonably
12 requires. A behavioral health organization or licensed service
13 provider which, without good cause, fails to furnish any data,
14 statistics, schedules, or information as requested, or files
15 fraudulent reports thereof, may be subject to the behavioral health
16 organization contractual remedies in RCW 43.20A.894 or may have its
17 service provider certification or license revoked or suspended.

18 (8) The secretary may suspend, revoke, limit, or restrict a
19 certification or license, or refuse to grant a certification or
20 license for failure to conform to: (a) The law; (b) applicable rules
21 and regulations; (c) applicable standards; or (d) state minimum
22 standards.

23 (9) The superior court may restrain any behavioral health
24 organization or service provider from operating without a contract,
25 certification, or a license or any other violation of this section.
26 The court may also review, pursuant to procedures contained in
27 chapter 34.05 RCW, any denial, suspension, limitation, restriction,
28 or revocation of certification or license, and grant other relief
29 required to enforce the provisions of this chapter.

30 (10) Upon petition by the secretary, and after hearing held upon
31 reasonable notice to the facility, the superior court may issue a
32 warrant to an officer or employee of the secretary authorizing him or
33 her to enter at reasonable times, and examine the records, books, and
34 accounts of any behavioral health organization(~~(s-[organization])~~) or
35 service provider refusing to consent to inspection or examination by
36 the authority.

37 (11) Notwithstanding the existence or pursuit of any other
38 remedy, the secretary may file an action for an injunction or other
39 process against any person or governmental unit to restrain or
40 prevent the establishment, conduct, or operation of a behavioral

1 health organization or service provider without a contract,
2 certification, or a license under this chapter.

3 ~~(12) ((The standards for certification or licensure of evaluation
4 and treatment facilities shall include standards relating to
5 maintenance of good physical and mental health and other services to
6 be afforded persons pursuant to this chapter and chapters 71.05 and
7 71.34 RCW, and shall otherwise assure the effectuation of the
8 purposes of these chapters.~~

9 ~~(13) The standards for certification or licensure of crisis
10 stabilization units shall include standards that:~~

11 ~~(a) Permit location of the units at a jail facility if the unit
12 is physically separate from the general population of the jail;~~

13 ~~(b) Require administration of the unit by mental health
14 professionals who direct the stabilization and rehabilitation
15 efforts; and~~

16 ~~(c) Provide an environment affording security appropriate with
17 the alleged criminal behavior and necessary to protect the public
18 safety.~~

19 ~~(14) The standards for certification or licensure of a clubhouse
20 shall at a minimum include:~~

21 ~~(a) The facilities may be peer-operated and must be
22 recovery-focused;~~

23 ~~(b) Members and employees must work together;~~

24 ~~(c) Members must have the opportunity to participate in all the
25 work of the clubhouse, including administration, research, intake and
26 orientation, outreach, hiring, training and evaluation of staff,
27 public relations, advocacy, and evaluation of clubhouse
28 effectiveness;~~

29 ~~(d) Members and staff and ultimately the clubhouse director must
30 be responsible for the operation of the clubhouse, central to this
31 responsibility is the engagement of members and staff in all aspects
32 of clubhouse operations;~~

33 ~~(e) Clubhouse programs must be comprised of structured activities
34 including but not limited to social skills training, vocational
35 rehabilitation, employment training and job placement, and community
36 resource development;~~

37 ~~(f) Clubhouse programs must provide in-house educational programs
38 that significantly utilize the teaching and tutoring skills of
39 members and assist members by helping them to take advantage of adult
40 education opportunities in the community;~~

1 ~~(g) Clubhouse programs must focus on strengths, talents, and~~
2 ~~abilities of its members;~~

3 ~~(h) The work-ordered day may not include medication clinics, day~~
4 ~~treatment, or other therapy programs within the clubhouse.~~

5 ~~(15))~~ The department shall distribute appropriated state and
6 federal funds in accordance with any priorities, terms, or conditions
7 specified in the appropriations act.

8 ~~((16))~~ (13) The secretary shall assume all duties assigned to
9 the nonparticipating behavioral health organizations under chapters
10 71.05 and 71.34 RCW and this chapter. Such responsibilities shall
11 include those which would have been assigned to the nonparticipating
12 counties in regions where there are not participating behavioral
13 health organizations.

14 The behavioral health organizations, or the secretary's
15 assumption of all responsibilities under chapters 71.05 and 71.34 RCW
16 and this chapter, shall be included in all state and federal plans
17 affecting the state ~~((mental))~~ behavioral health program including at
18 least those required by this chapter, the medicaid program, and P.L.
19 99-660. Nothing in these plans shall be inconsistent with the intent
20 and requirements of this chapter.

21 ~~((17))~~ (14) The secretary shall:

22 (a) Disburse funds for the behavioral health organizations within
23 sixty days of approval of the biennial contract. The department must
24 either approve or reject the biennial contract within sixty days of
25 receipt.

26 (b) Enter into biennial contracts with behavioral health
27 organizations. The contracts shall be consistent with available
28 resources. No contract shall be approved that does not include
29 progress toward meeting the goals of this chapter by taking
30 responsibility for: (i) Short-term commitments; (ii) residential
31 care; and (iii) emergency response systems.

32 (c) Notify behavioral health organizations of their allocation of
33 available resources at least sixty days prior to the start of a new
34 biennial contract period.

35 (d) Deny all or part of the funding allocations to behavioral
36 health organizations based solely upon formal findings of
37 noncompliance with the terms of the behavioral health organization's
38 contract with the department. Behavioral health organizations
39 disputing the decision of the secretary to withhold funding

1 allocations are limited to the remedies provided in the department's
2 contracts with the behavioral health organizations.

3 ~~((18))~~ (15) The department, in cooperation with the state
4 congressional delegation, shall actively seek waivers of federal
5 requirements and such modifications of federal regulations as are
6 necessary to allow federal medicaid reimbursement for services
7 provided by freestanding evaluation and treatment facilities
8 certified under chapter 71.05 RCW. The department shall periodically
9 report its efforts to the appropriate committees of the senate and
10 the house of representatives.

11 (16) The department may:

12 (a) Plan, establish, and maintain substance use disorder
13 prevention and substance use disorder treatment programs as necessary
14 or desirable;

15 (b) Coordinate its activities and cooperate with behavioral
16 programs in this and other states, and make contracts and other joint
17 or cooperative arrangements with state, local, or private agencies in
18 this and other states for behavioral health services and for the
19 common advancement of substance use disorder programs;

20 (c) Solicit and accept for use any gift of money or property made
21 by will or otherwise, and any grant of money, services, or property
22 from the federal government, the state, or any political subdivision
23 thereof or any private source, and do all things necessary to
24 cooperate with the federal government or any of its agencies in
25 making an application for any grant;

26 (d) Keep records and engage in research and the gathering of
27 relevant statistics; and

28 (e) Acquire, hold, or dispose of real property or any interest
29 therein, and construct, lease, or otherwise provide substance use
30 disorder treatment programs.

31 **Sec. 4.** RCW 70.96A.050 and 2014 c 225 s 23 are each amended to
32 read as follows:

33 The department shall:

34 (1) Develop, encourage, and foster statewide, regional, and local
35 plans and programs for the prevention of alcoholism and other drug
36 addiction, treatment of persons with substance use disorders and
37 their families, persons incapacitated by alcohol or other
38 psychoactive chemicals, and intoxicated persons in cooperation with
39 public and private agencies, organizations, and individuals and

1 provide technical assistance and consultation services for these
2 purposes;

3 (2) Assure that any behavioral health organization managed care
4 contract, or managed care contract under RCW 74.09.522 for behavioral
5 health services or programs for the treatment of persons with
6 substance use disorders and their families, persons incapacitated by
7 alcohol or other psychoactive chemicals, and intoxicated persons
8 provides medically necessary services to medicaid recipients. This
9 must include a continuum of mental health and (~~chemical dependency~~)
10 substance use disorder services consistent with the state's medicaid
11 plan or federal waiver authorities, and nonmedicaid services
12 consistent with priorities established by the department;

13 (3) Coordinate the efforts and enlist the assistance of all
14 public and private agencies, organizations, and individuals
15 interested in prevention of alcoholism and drug addiction, and
16 treatment of persons with substance use disorders and their families,
17 persons incapacitated by alcohol or other psychoactive chemicals, and
18 intoxicated persons;

19 (4) Cooperate with public and private agencies in establishing
20 and conducting programs to provide treatment for persons with
21 substance use disorders and their families, persons incapacitated by
22 alcohol or other psychoactive chemicals, and intoxicated persons who
23 are clients of the correctional system;

24 (5) Cooperate with the superintendent of public instruction,
25 state board of education, schools, police departments, courts, and
26 other public and private agencies, organizations and individuals in
27 establishing programs for the prevention of (~~alcoholism and other~~
28 ~~drug addiction~~) substance use disorders, treatment of persons with
29 substance use disorders and their families, persons incapacitated by
30 alcohol or other psychoactive chemicals, and intoxicated persons, and
31 preparing curriculum materials thereon for use at all levels of
32 school education;

33 (6) Prepare, publish, evaluate, and disseminate educational
34 material dealing with the nature and effects of alcohol and other
35 psychoactive chemicals and the consequences of their use;

36 (7) Develop and implement, as an integral part of substance use
37 disorder treatment programs, an educational program for use in the
38 treatment of persons with substance use disorders, persons
39 incapacitated by alcohol or other psychoactive chemicals, and
40 intoxicated persons, which program shall include the dissemination of

1 information concerning the nature and effects of alcohol and other
2 psychoactive chemicals, the consequences of their use, the principles
3 of recovery, and HIV and AIDS;

4 (8) Organize and foster training programs for persons engaged in
5 treatment of persons with substance use disorders, persons
6 incapacitated by alcohol or other psychoactive chemicals, and
7 intoxicated persons;

8 (9) Sponsor and encourage research into the causes and nature of
9 (~~alcoholism and other drug addiction~~) substance use disorders,
10 treatment of persons with substance use disorders, persons
11 incapacitated by alcohol or other psychoactive chemicals, and
12 intoxicated persons, and serve as a clearinghouse for information
13 relating to (~~alcoholism or other drug addiction~~) substance use
14 disorders;

15 (10) Specify uniform methods for keeping statistical information
16 by public and private agencies, organizations, and individuals, and
17 collect and make available relevant statistical information,
18 including number of persons treated, frequency of admission and
19 readmission, and frequency and duration of treatment;

20 (11) Advise the governor in the preparation of a comprehensive
21 plan for treatment of persons with substance use disorders, persons
22 incapacitated by alcohol or other psychoactive chemicals, and
23 intoxicated persons for inclusion in the state's comprehensive health
24 plan;

25 (12) Review all state health, welfare, and treatment plans to be
26 submitted for federal funding under federal legislation, and advise
27 the governor on provisions to be included relating to substance use
28 disorders;

29 (13) Assist in the development of, and cooperate with, programs
30 for alcohol and other psychoactive chemical education and treatment
31 for employees of state and local governments and businesses and
32 industries in the state;

33 (14) Use the support and assistance of interested persons in the
34 community to encourage persons with substance use disorders
35 voluntarily to undergo treatment;

36 (15) Cooperate with public and private agencies in establishing
37 and conducting programs designed to deal with the problem of persons
38 operating motor vehicles while intoxicated;

39 (16) Encourage general hospitals and other appropriate health
40 facilities to admit without discrimination persons with substance use

1 disorders, persons incapacitated by alcohol or other psychoactive
2 chemicals, and intoxicated persons and to provide them with adequate
3 and appropriate treatment;

4 (17) Encourage all health and disability insurance programs to
5 include (~~alcoholism and other drug addiction~~) substance use
6 disorders as a covered illness; and

7 (18) Organize and sponsor a statewide program to help court
8 personnel, including judges, better understand (~~the disease of~~
9 ~~alcoholism and other drug addiction~~) substance use disorders and the
10 uses of (~~chemical dependency~~) substance use disorder treatment
11 programs.

12 **Sec. 5.** RCW 71.24.037 and 2001 c 323 s 11 are each amended to
13 read as follows:

14 (1) The secretary shall by rule establish state minimum standards
15 for licensed behavioral health service providers and services,
16 whether those service providers and services are licensed to provide
17 solely mental health services, substance use disorder treatment
18 services, or services to persons with co-occurring disorders.

19 (2) Minimum standards for licensed behavioral health service
20 providers shall, at a minimum, establish: Qualifications for staff
21 providing services directly to (~~mentally ill~~) persons with mental
22 disorders, substance use disorders, or both, the intended result of
23 each service, and the rights and responsibilities of persons
24 receiving (~~mental~~) behavioral health services pursuant to this
25 chapter. The secretary shall provide for deeming of licensed
26 behavioral health service providers as meeting state minimum
27 standards as a result of accreditation by a recognized behavioral
28 health accrediting body recognized and having a current agreement
29 with the department.

30 (3) Minimum standards for community support services and resource
31 management services shall include at least qualifications for
32 resource management services, client tracking systems, and the
33 transfer of patient information between behavioral health service
34 providers.

35 (4) The department may suspend, revoke, limit, restrict, or
36 modify an approval, or refuse to grant approval, for failure to meet
37 the provisions of this chapter, or the standards adopted under this
38 chapter. RCW 43.20A.205 governs notice of a license denial,

1 revocation, suspension, or modification and provides the right to an
2 adjudicative proceeding.

3 (5) No licensed behavioral health service provider may advertise
4 or represent itself as a licensed behavioral health service provider
5 if approval has not been granted, has been denied, suspended,
6 revoked, or canceled.

7 (6) Licensure as a behavioral health service provider is
8 effective for one calendar year from the date of issuance of the
9 license. The license must specify the types of services provided by
10 the behavioral health service provider that meet the standards
11 adopted under this chapter. Renewal of a license must be made in
12 accordance with this section for initial approval and in accordance
13 with the standards set forth in rules adopted by the secretary.

14 (7) Licensure as a licensed behavioral health service provider
15 must specify the types of services provided that meet the standards
16 adopted under this chapter. Renewal of a license must be made in
17 accordance with this section for initial approval and in accordance
18 with the standards set forth in rules adopted by the secretary.

19 (8) Licensed behavioral health service providers may not provide
20 types of services for which the licensed behavioral health service
21 provider has not been certified. Licensed behavioral health service
22 providers may provide services for which approval has been sought and
23 is pending, if approval for the services has not been previously
24 revoked or denied.

25 (9) The department periodically shall inspect licensed behavioral
26 health service providers at reasonable times and in a reasonable
27 manner.

28 (10) Upon petition of the department and after a hearing held
29 upon reasonable notice to the facility, the superior court may issue
30 a warrant to an officer or employee of the department authorizing him
31 or her to enter and inspect at reasonable times, and examine the
32 books and accounts of, any licensed behavioral health service
33 provider refusing to consent to inspection or examination by the
34 department or which the department has reasonable cause to believe is
35 operating in violation of this chapter.

36 (11) The department shall maintain and periodically publish a
37 current list of licensed behavioral health service providers.

38 (12) Each licensed behavioral health service provider shall file
39 with the department upon request, data, statistics, schedules, and
40 information the department reasonably requires. A licensed behavioral

1 health service provider that without good cause fails to furnish any
2 data, statistics, schedules, or information as requested, or files
3 fraudulent returns thereof, may have its license revoked or
4 suspended.

5 (13) The department shall use the data provided in subsection
6 (12) of this section to evaluate each program that admits children to
7 inpatient substance use disorder treatment upon application of their
8 parents. The evaluation must be done at least once every twelve
9 months. In addition, the department shall randomly select and review
10 the information on individual children who are admitted on
11 application of the child's parent for the purpose of determining
12 whether the child was appropriately placed into substance use
13 disorder treatment based on an objective evaluation of the child's
14 condition and the outcome of the child's treatment.

15 **Sec. 6.** RCW 70.96A.090 and 2005 c 70 s 2 are each amended to
16 read as follows:

17 ~~(1) ((The department shall adopt rules establishing standards for~~
18 ~~approved treatment programs, the process for the review and~~
19 ~~inspection program applying to the department for certification as an~~
20 ~~approved treatment program, and fixing the fees to be charged by the~~
21 ~~department for the required inspections. The standards may concern~~
22 ~~the health standards to be met and standards of services and~~
23 ~~treatment to be afforded patients.~~

24 ~~(2) The department may suspend, revoke, limit, restrict, or~~
25 ~~modify an approval, or refuse to grant approval, for failure to meet~~
26 ~~the provisions of this chapter, or the standards adopted under this~~
27 ~~chapter. RCW 43.20A.205 governs notice of a license denial,~~
28 ~~revocation, suspension, or modification and provides the right to an~~
29 ~~adjudicative proceeding.~~

30 ~~(3) No treatment program may advertise or represent itself as an~~
31 ~~approved treatment program if approval has not been granted, has been~~
32 ~~denied, suspended, revoked, or canceled.~~

33 ~~(4) Certification as an approved treatment program is effective~~
34 ~~for one calendar year from the date of issuance of the certificate.~~
35 ~~The certification shall specify the types of services provided by the~~
36 ~~approved treatment program that meet the standards adopted under this~~
37 ~~chapter. Renewal of certification shall be made in accordance with~~
38 ~~this section for initial approval and in accordance with the~~
39 ~~standards set forth in rules adopted by the secretary.~~

1 ~~(5) Approved treatment programs shall not provide alcoholism or~~
2 ~~other drug addiction treatment services for which the approved~~
3 ~~treatment program has not been certified. Approved treatment programs~~
4 ~~may provide services for which approval has been sought and is~~
5 ~~pending, if approval for the services has not been previously revoked~~
6 ~~or denied.~~

7 ~~(6) The department periodically shall inspect approved public and~~
8 ~~private treatment programs at reasonable times and in a reasonable~~
9 ~~manner.~~

10 ~~(7) The department shall maintain and periodically publish a~~
11 ~~current list of approved treatment programs.~~

12 ~~(8) Each approved treatment program shall file with the~~
13 ~~department on request, data, statistics, schedules, and information~~
14 ~~the department reasonably requires. An approved treatment program~~
15 ~~that without good cause fails to furnish any data, statistics,~~
16 ~~schedules, or information as requested, or files fraudulent returns~~
17 ~~thereof, may be removed from the list of approved treatment programs,~~
18 ~~and its certification revoked or suspended.~~

19 ~~(9) The department shall use the data provided in subsection (8)~~
20 ~~of this section to evaluate each program that admits children to~~
21 ~~inpatient treatment upon application of their parents. The evaluation~~
22 ~~shall be done at least once every twelve months. In addition, the~~
23 ~~department shall randomly select and review the information on~~
24 ~~individual children who are admitted on application of the child's~~
25 ~~parent for the purpose of determining whether the child was~~
26 ~~appropriately placed into treatment based on an objective evaluation~~
27 ~~of the child's condition and the outcome of the child's treatment.~~

28 ~~(10) Upon petition of the department and after a hearing held~~
29 ~~upon reasonable notice to the facility, the superior court may issue~~
30 ~~a warrant to an officer or employee of the department authorizing him~~
31 ~~or her to enter and inspect at reasonable times, and examine the~~
32 ~~books and accounts of, any approved public or private treatment~~
33 ~~program refusing to consent to inspection or examination by the~~
34 ~~department or which the department has reasonable cause to believe is~~
35 ~~operating in violation of this chapter.~~

36 ~~(11)(a))~~ All approved opiate substitution treatment programs
37 that provide services to women who are pregnant are required to
38 disseminate up-to-date and accurate health education information to
39 all their pregnant clients concerning the possible addiction and
40 health risks that their opiate substitution treatment may have on

1 their baby. All pregnant clients must also be advised of the risks to
2 both them and their baby associated with not remaining on the opiate
3 substitute program. The information must be provided to these clients
4 both verbally and in writing. The health education information
5 provided to the pregnant clients must include referral options for
6 the addicted baby.

7 ((b)) (2) The department shall adopt rules that require all
8 opiate treatment programs to educate all pregnant women in their
9 program on the benefits and risks of methadone treatment to their
10 fetus before they are provided these medications, as part of their
11 addiction treatment. The department shall meet the requirements under
12 this subsection within the appropriations provided for opiate
13 treatment programs. The department, working with treatment providers
14 and medical experts, shall develop and disseminate the educational
15 materials to all certified opiate treatment programs.

16 NEW SECTION. **Sec. 7.** A new section is added to chapter 71.24
17 RCW to read as follows:

18 The standards for certification or licensure of evaluation and
19 treatment facilities must include standards relating to maintenance
20 of good physical and mental health and other services to be afforded
21 persons pursuant to this chapter and chapters 71.05 and 71.34 RCW,
22 and must otherwise assure the effectuation of the purposes of these
23 chapters.

24 NEW SECTION. **Sec. 8.** A new section is added to chapter 71.24
25 RCW to read as follows:

26 The standards for certification or licensure of crisis
27 stabilization units must include standards that:

28 (1) Permit location of the units at a jail facility if the unit
29 is physically separate from the general population of the jail;

30 (2) Require administration of the unit by mental health
31 professionals who direct the stabilization and rehabilitation
32 efforts; and

33 (3) Provide an environment affording security appropriate with
34 the alleged criminal behavior and necessary to protect the public
35 safety.

36 NEW SECTION. **Sec. 9.** A new section is added to chapter 71.24
37 RCW to read as follows:

1 The standards for certification or licensure of a clubhouse must
2 at a minimum include:

3 (1) The facilities may be peer-operated and must be
4 recovery-focused;

5 (2) Members and employees must work together;

6 (3) Members must have the opportunity to participate in all the
7 work of the clubhouse, including administration, research, intake and
8 orientation, outreach, hiring, training and evaluation of staff,
9 public relations, advocacy, and evaluation of clubhouse
10 effectiveness;

11 (4) Members and staff and ultimately the clubhouse director must
12 be responsible for the operation of the clubhouse, central to this
13 responsibility is the engagement of members and staff in all aspects
14 of clubhouse operations;

15 (5) Clubhouse programs must be comprised of structured activities
16 including but not limited to social skills training, vocational
17 rehabilitation, employment training and job placement, and community
18 resource development;

19 (6) Clubhouse programs must provide in-house educational programs
20 that significantly utilize the teaching and tutoring skills of
21 members and assist members by helping them to take advantage of adult
22 education opportunities in the community;

23 (7) Clubhouse programs must focus on strengths, talents, and
24 abilities of its members;

25 (8) The work-ordered day may not include medication clinics, day
26 treatment, or other therapy programs within the clubhouse.

27 **Sec. 10.** RCW 71.24.385 and 2014 c 225 s 9 are each amended to
28 read as follows:

29 (1) Within funds appropriated by the legislature for this
30 purpose, behavioral health organizations shall develop the means to
31 serve the needs of people:

32 (a) With mental disorders residing within the boundaries of their
33 regional service area. Elements of the program may include:

34 ~~((a))~~ (i) Crisis diversion services;

35 ~~((b))~~ (ii) Evaluation and treatment and community hospital
36 beds;

37 ~~((c))~~ (iii) Residential treatment;

38 ~~((d))~~ (iv) Programs for intensive community treatment;

39 ~~((e))~~ (v) Outpatient services;

- 1 ~~((f))~~ (vi) Peer support services;
2 ~~((g))~~ (vii) Community support services;
3 ~~((h))~~ (viii) Resource management services; and
4 ~~((i))~~ (ix) Supported housing and supported employment services.

5 (b) With substance use disorders and their families, people
6 incapacitated by alcohol or other psychoactive chemicals, and
7 intoxicated people.

8 (i) Elements of the program shall include, but not necessarily be
9 limited to, a continuum of substance use disorder treatment services
10 that includes:

- 11 (A) Withdrawal management;
12 (B) Residential treatment; and
13 (C) Outpatient treatment.

14 (ii) The program may include peer support, supported housing,
15 supported employment, crisis diversion, or recovery support services.

16 (iii) The department may contract for the use of an approved
17 substance use disorder treatment program or other individual or
18 organization if the secretary considers this to be an effective and
19 economical course to follow.

20 (2) The behavioral health organization shall have the
21 flexibility, within the funds appropriated by the legislature for
22 this purpose and the terms of their contract, to design the mix of
23 services that will be most effective within their service area of
24 meeting the needs of people with ~~((mental))~~ behavioral health
25 disorders and avoiding placement of such individuals at the state
26 mental hospital. Behavioral health organizations are encouraged to
27 maximize the use of evidence-based practices and alternative
28 resources with the goal of substantially reducing and potentially
29 eliminating the use of institutions for mental diseases.

30 (3)(a) Treatment provided under this chapter must be purchased
31 primarily through managed care contracts.

32 (b) Consistent with RCW 70.96A.350 (as recodified by this act),
33 services and funding provided through the criminal justice treatment
34 account are intended to be exempted from managed care contracting.

35 **Sec. 11.** RCW 70.96A.350 and 2013 2nd sp.s. c 4 s 990 are each
36 amended to read as follows:

37 (1) The criminal justice treatment account is created in the
38 state treasury. Moneys in the account may be expended solely for: (a)
39 Substance ~~((abuse))~~ use disorder treatment and treatment support

1 services for offenders with (~~an addiction or a substance abuse~~
2 ~~problem~~) a substance use disorder that, if not treated, would result
3 in addiction, against whom charges are filed by a prosecuting
4 attorney in Washington state; (b) the provision of (~~drug and~~
5 ~~alcohol~~) substance use disorder treatment services and treatment
6 support services for nonviolent offenders within a drug court
7 program; and (c) the administrative and overhead costs associated
8 with the operation of a drug court(~~;~~ ~~and~~ ~~(d) during the 2011-2013~~
9 ~~biennium, the legislature may appropriate up to three million dollars~~
10 ~~from the account in order to offset reductions in the state general~~
11 ~~fund for treatment services provided by counties. This amount is not~~
12 ~~subject to the requirements of subsections (5) through (9) of this~~
13 ~~section. During the 2013-2015 fiscal biennium, the legislature may~~
14 ~~transfer from the criminal justice treatment account to the state~~
15 ~~general fund amounts as reflect the state savings associated with the~~
16 ~~implementation of the medicaid expansion of the federal affordable~~
17 ~~care act)). Moneys in the account may be spent only after~~
18 appropriation.

19 (2) For purposes of this section:

20 (a) "Treatment" means services that are critical to a
21 participant's successful completion of his or her substance (~~abuse~~)
22 use disorder treatment program, but does not include the following
23 services: Housing other than that provided as part of an inpatient
24 substance (~~abuse~~) use disorder treatment program, vocational
25 training, and mental health counseling; and

26 (b) "Treatment support" means transportation to or from inpatient
27 or outpatient treatment services when no viable alternative exists,
28 and child care services that are necessary to ensure a participant's
29 ability to attend outpatient treatment sessions.

30 (3) Revenues to the criminal justice treatment account consist
31 of: (a) Funds transferred to the account pursuant to this section;
32 and (b) any other revenues appropriated to or deposited in the
33 account.

34 (4)(a) (~~For the fiscal biennium beginning July 1, 2003, the~~
35 ~~state treasurer shall transfer eight million nine hundred fifty~~
36 ~~thousand dollars from the general fund into the criminal justice~~
37 ~~treatment account, divided into eight equal quarterly payments.)~~ For
38 the fiscal year beginning July 1, 2005, and each subsequent fiscal
39 year, the state treasurer shall transfer eight million two hundred
40 fifty thousand dollars from the general fund to the criminal justice

1 treatment account, divided into four equal quarterly payments. For
2 the fiscal year beginning July 1, 2006, and each subsequent fiscal
3 year, the amount transferred shall be increased on an annual basis by
4 the implicit price deflator as published by the federal bureau of
5 labor statistics.

6 (b) In each odd-numbered year, the legislature shall appropriate
7 the amount transferred to the criminal justice treatment account in
8 (a) of this subsection to the ~~((division of alcohol and substance
9 abuse))~~ department for the purposes of subsection (5) of this
10 section.

11 (5) Moneys appropriated to the ~~((division of alcohol and
12 substance abuse))~~ department from the criminal justice treatment
13 account shall be distributed as specified in this subsection. The
14 department ~~((shall serve as the fiscal agent for purposes of
15 distribution. Until July 1, 2004, the department may not use moneys
16 appropriated from the criminal justice treatment account for
17 administrative expenses and shall distribute all amounts appropriated
18 under subsection (4)(b) of this section in accordance with this
19 subsection. Beginning in July 1, 2004, the department))~~ may retain up
20 to three percent of the amount appropriated under subsection (4)(b)
21 of this section for its administrative costs.

22 (a) Seventy percent of amounts appropriated to the ~~((division))~~
23 department from the account shall be distributed to counties pursuant
24 to the distribution formula adopted under this section. The division
25 of alcohol and substance abuse, in consultation with the department
26 of corrections, the Washington state association of counties, the
27 Washington state association of drug court professionals, the
28 superior court judges' association, the Washington association of
29 prosecuting attorneys, representatives of the criminal defense bar,
30 representatives of substance ~~((abuse))~~ use disorder treatment
31 providers, and any other person deemed by the ~~((division))~~ department
32 to be necessary, shall establish a fair and reasonable methodology
33 for distribution to counties of moneys in the criminal justice
34 treatment account. County or regional plans submitted for the
35 expenditure of formula funds must be approved by the panel
36 established in (b) of this subsection.

37 (b) Thirty percent of the amounts appropriated to the
38 ~~((division))~~ department from the account shall be distributed as
39 grants for purposes of treating offenders against whom charges are
40 filed by a county prosecuting attorney. The ~~((division))~~ department

1 shall appoint a panel of representatives from the Washington
2 association of prosecuting attorneys, the Washington association of
3 sheriffs and police chiefs, the superior court judges' association,
4 the Washington state association of counties, the Washington
5 defender's association or the Washington association of criminal
6 defense lawyers, the department of corrections, the Washington state
7 association of drug court professionals, substance ((~~abuse~~)) use
8 disorder treatment providers, and the division. The panel shall
9 review county or regional plans for funding under (a) of this
10 subsection and grants approved under this subsection. The panel shall
11 attempt to ensure that treatment as funded by the grants is available
12 to offenders statewide.

13 (6) The county alcohol and drug coordinator, county prosecutor,
14 county sheriff, county superior court, a substance abuse treatment
15 provider appointed by the county legislative authority, a member of
16 the criminal defense bar appointed by the county legislative
17 authority, and, in counties with a drug court, a representative of
18 the drug court shall jointly submit a plan, approved by the county
19 legislative authority or authorities, to the panel established in
20 subsection (5)(b) of this section, for disposition of all the funds
21 provided from the criminal justice treatment account within that
22 county. The funds shall be used solely to provide approved alcohol
23 and substance abuse treatment pursuant to RCW 70.96A.090 (as
24 recodified by this act), treatment support services, and for the
25 administrative and overhead costs associated with the operation of a
26 drug court.

27 (a) No more than ten percent of the total moneys received under
28 subsections (4) and (5) of this section by a county or group of
29 counties participating in a regional agreement shall be spent on the
30 administrative and overhead costs associated with the operation of a
31 drug court.

32 (b) No more than ten percent of the total moneys received under
33 subsections (4) and (5) of this section by a county or group of
34 counties participating in a regional agreement shall be spent for
35 treatment support services.

36 (7) Counties are encouraged to consider regional agreements and
37 submit regional plans for the efficient delivery of treatment under
38 this section.

1 (8) Moneys allocated under this section shall be used to
2 supplement, not supplant, other federal, state, and local funds used
3 for substance abuse treatment.

4 (9) Counties must meet the criteria established in RCW
5 2.28.170(3)(b).

6 (10) The authority under this section to use funds from the
7 criminal justice treatment account for the administrative and
8 overhead costs associated with the operation of a drug court expires
9 June 30, 2015.

10 **Sec. 12.** RCW 70.96A.035 and 2005 c 504 s 302 are each amended to
11 read as follows:

12 (1) (~~((Not later than January 1, 2007,))~~) All persons providing
13 treatment under this chapter shall also implement the integrated
14 comprehensive screening and assessment process for chemical
15 dependency and mental disorders adopted pursuant to RCW 70.96C.010
16 and shall document the numbers of clients with co-occurring mental
17 and substance abuse disorders based on a quadrant system of low and
18 high needs.

19 (2) Treatment providers contracted to provide treatment under
20 this chapter who fail to implement the integrated comprehensive
21 screening and assessment process for chemical dependency and mental
22 disorders (~~((by July 1, 2007,))~~) are subject to contractual penalties
23 established under RCW 70.96C.010 (as recodified by this act).

24 **Sec. 13.** RCW 70.96C.010 and 2014 c 225 s 77 are each amended to
25 read as follows:

26 (1) The department of social and health services(~~((, in~~
27 ~~consultation with the members of the team charged with developing the~~
28 ~~state plan for co-occurring mental and substance abuse disorders,~~
29 ~~shall adopt, not later than January 1, 2006,))~~) shall maintain an
30 integrated and comprehensive screening and assessment process for
31 (~~((chemical dependency))~~) substance use and mental disorders and co-
32 occurring (~~((chemical dependency))~~) substance use and mental disorders.

33 (a) The process adopted shall include, at a minimum:

34 (i) An initial screening tool that can be used by intake
35 personnel system-wide and which will identify the most common types
36 of co-occurring disorders;

1 (ii) An assessment process for those cases in which assessment is
2 indicated that provides an appropriate degree of assessment for most
3 situations, which can be expanded for complex situations;

4 (iii) Identification of triggers in the screening that indicate
5 the need to begin an assessment;

6 (iv) Identification of triggers after or outside the screening
7 that indicate a need to begin or resume an assessment;

8 (v) The components of an assessment process and a protocol for
9 determining whether part or all of the assessment is necessary, and
10 at what point; and

11 (vi) Emphasis that the process adopted under this section is to
12 replace and not to duplicate existing intake, screening, and
13 assessment tools and processes.

14 (b) The department shall consider existing models, including
15 those already adopted by other states, and to the extent possible,
16 adopt an established, proven model.

17 (c) The integrated, comprehensive screening and assessment
18 process shall be implemented statewide by all (~~chemical dependency~~)
19 substance use disorder and mental health treatment providers as well
20 as all designated mental health professionals, designated chemical
21 dependency specialists, and designated crisis responders (~~not later~~
22 ~~than January 1, 2007~~)).

23 (2) The department shall provide adequate training to effect
24 statewide implementation by the dates designated in this section and
25 shall report the rates of co-occurring disorders and the stage of
26 screening or assessment at which the co-occurring disorder was
27 identified to the appropriate committees of the legislature.

28 (3) The department shall establish contractual penalties to
29 contracted treatment providers, the behavioral health organizations,
30 and their contracted providers for failure to implement the
31 integrated screening and assessment process (~~by July 1, 2007~~)).

32 **Sec. 14.** RCW 70.96A.037 and 2011 c 89 s 9 are each amended to
33 read as follows:

34 (1) The department of social and health services shall contract
35 for chemical dependency specialist services at division of children
36 and family services offices to enhance the timeliness and quality of
37 child protective services assessments and to better connect families
38 to needed treatment services.

1 (2) The chemical dependency specialist's duties may include, but
2 are not limited to: Conducting on-site (~~chemical dependency~~)
3 substance use disorder screening and assessment, facilitating
4 progress reports to department employees, in-service training of
5 department employees and staff on substance (~~abuse~~) use disorder
6 issues, referring clients from the department to treatment providers,
7 and providing consultation on cases to department employees.

8 (3) The department of social and health services shall provide
9 training in and ensure that each case-carrying employee is trained in
10 uniform screening for mental health and (~~chemical dependency~~)
11 substance use disorder.

12 **Sec. 15.** RCW 70.96A.047 and 1989 c 270 s 11 are each amended to
13 read as follows:

14 Except as provided in this chapter, the secretary shall not
15 approve any substance use disorder facility, plan, or program for
16 financial assistance under RCW 70.96A.040 (as recodified by this act)
17 unless at least ten percent of the amount spent for the facility,
18 plan, or program is provided from local public or private sources.
19 When deemed necessary to maintain public standards of care in the
20 substance use disorder facility, plan, or program, the secretary may
21 require the substance use disorder facility, plan, or program to
22 provide up to fifty percent of the total spent for the program
23 through fees, gifts, contributions, or volunteer services. The
24 secretary shall determine the value of the gifts, contributions, and
25 volunteer services.

26 **Sec. 16.** RCW 70.96A.055 and 1999 c 197 s 10 are each amended to
27 read as follows:

28 The department shall contract with counties operating drug courts
29 and counties in the process of implementing new drug courts for the
30 provision of (~~drug and alcohol~~) substance use disorder treatment
31 services.

32 **Sec. 17.** RCW 70.96A.087 and 1989 c 270 s 13 are each amended to
33 read as follows:

34 To be eligible to receive its share of liquor taxes and profits,
35 each city and county shall devote no less than two percent of its
36 share of liquor taxes and profits to the support of a substance use
37 disorder program (~~of alcoholism and other drug addiction~~) approved

1 by the (~~alcoholism and other drug addiction board authorized by RCW~~
2 ~~70.96A.300~~) behavioral health organization and the secretary.

3 **Sec. 18.** RCW 70.96A.170 and 1989 c 270 s 30 are each amended to
4 read as follows:

5 (1) The state and counties, cities, and other municipalities may
6 establish or contract for emergency service patrols which are to be
7 under the administration of the appropriate jurisdiction. A patrol
8 consists of persons trained to give assistance in the streets and in
9 other public places to persons who are intoxicated. Members of an
10 emergency service patrol shall be capable of providing first aid in
11 emergency situations and may transport intoxicated persons to their
12 homes and to and from substance use disorder treatment programs.

13 (2) The secretary shall adopt rules pursuant to chapter 34.05 RCW
14 for the establishment, training, and conduct of emergency service
15 patrols.

16 **Sec. 19.** RCW 70.96A.180 and 2012 c 117 s 413 are each amended to
17 read as follows:

18 (1) If substance use disorder treatment is provided by an
19 approved substance use disorder treatment program and the patient has
20 not paid or is unable to pay the charge therefor, the program is
21 entitled to any payment (a) received by the patient or to which he or
22 she may be entitled because of the services rendered, and (b) from
23 any public or private source available to the program because of the
24 treatment provided to the patient.

25 (2) A patient in a substance use disorder program, or the estate
26 of the patient, or a person obligated to provide for the cost of
27 treatment and having sufficient financial ability, is liable to the
28 program for cost of maintenance and treatment of the patient therein
29 in accordance with rates established.

30 (3) The secretary shall adopt rules governing financial ability
31 that take into consideration the income, savings, and other personal
32 and real property of the person required to pay, and any support
33 being furnished by him or her to any person he or she is required by
34 law to support.

35 **Sec. 20.** RCW 70.96A.095 and 1998 c 296 s 23 are each amended to
36 read as follows:

1 Any person thirteen years of age or older may give consent for
2 himself or herself to the furnishing of outpatient treatment by a
3 (~~chemical dependency~~) substance use disorder treatment program
4 certified by the department. Parental authorization is required for
5 any treatment of a minor under the age of thirteen.

6 **Sec. 21.** RCW 70.96A.096 and 1996 c 133 s 5 are each amended to
7 read as follows:

8 School district personnel who contact a (~~chemical dependency~~)
9 substance use disorder inpatient treatment program or provider for
10 the purpose of referring a student to inpatient treatment shall
11 provide the parents with notice of the contact within forty-eight
12 hours.

13 **Sec. 22.** RCW 70.96A.097 and 1998 c 296 s 28 are each amended to
14 read as follows:

15 (1) The department shall ensure that, for any minor admitted to
16 inpatient treatment under RCW 70.96A.245 (as recodified by this act),
17 a review is conducted by a physician or chemical dependency
18 counselor, as defined in rule by the department, who is employed by
19 the department or an agency under contract with the department and
20 who neither has a financial interest in continued inpatient treatment
21 of the minor nor is affiliated with the program providing the
22 treatment. The physician or chemical dependency counselor shall
23 conduct the review not less than seven nor more than fourteen days
24 following the date the minor was brought to the facility under RCW
25 70.96A.245(1) (as recodified by this act) to determine whether it is
26 a medical necessity to continue the minor's treatment on an inpatient
27 basis.

28 (2) In making a determination under subsection (1) of this
29 section whether it is a medical necessity to release the minor from
30 inpatient treatment, the department shall consider the opinion of the
31 treatment provider, the safety of the minor, the likelihood the
32 minor's (~~chemical dependency~~) substance use disorder recovery will
33 deteriorate if released from inpatient treatment, and the wishes of
34 the parent.

35 (3) If, after any review conducted by the department under this
36 section, the department determines it is no longer a medical
37 necessity for a minor to receive inpatient treatment, the department
38 shall immediately notify the parents and the professional person in

1 charge. The professional person in charge shall release the minor to
2 the parents within twenty-four hours of receiving notice. If the
3 professional person in charge and the parent believe that it is a
4 medical necessity for the minor to remain in inpatient treatment, the
5 minor shall be released to the parent on the second judicial day
6 following the department's determination in order to allow the parent
7 time to file an at-risk youth petition under chapter 13.32A RCW. If
8 the department determines it is a medical necessity for the minor to
9 receive outpatient treatment and the minor declines to obtain such
10 treatment, such refusal shall be grounds for the parent to file an
11 at-risk youth petition.

12 (4) The department may, subject to available funds, contract with
13 other governmental agencies for the conduct of the reviews conducted
14 under this section and may seek reimbursement from the parents, their
15 insurance, or medicaid for the expense of any review conducted by an
16 agency under contract.

17 (5) In addition to the review required under this section, the
18 department may periodically determine and redetermine the medical
19 necessity of treatment for purposes of payment with public funds.

20 **Sec. 23.** RCW 70.96A.235 and 1998 c 296 s 25 are each amended to
21 read as follows:

22 Parental consent is required for inpatient (~~chemical~~
23 ~~dependency~~) substance use disorder treatment of a minor, unless the
24 child meets the definition of a child in need of services in RCW
25 13.32A.030(~~(+4)~~) (5)(c) as determined by the department(~~(+3~~
26 ~~PROVIDED)~~), except that parental consent is required for any
27 treatment of a minor under the age of thirteen.

28 This section does not apply to petitions filed under this
29 chapter.

30 **Sec. 24.** RCW 70.96A.240 and 1998 c 296 s 26 are each amended to
31 read as follows:

32 (1) The parent of a minor is not liable for payment of inpatient
33 or outpatient (~~chemical—dependency~~) substance use disorder
34 treatment unless the parent has joined in the consent to the
35 treatment.

36 (2) The ability of a parent to apply to a certified treatment
37 program for the admission of his or her minor child does not create a
38 right to obtain or benefit from any funds or resources of the state.

1 However, the state may provide services for indigent minors to the
2 extent that funds are available therefor.

3 **Sec. 25.** RCW 70.96A.245 and 1998 c 296 s 27 are each amended to
4 read as follows:

5 (1) A parent may bring, or authorize the bringing of, his or her
6 minor child to a certified treatment program and request that a
7 (~~chemical dependency~~) substance use disorder assessment be
8 conducted by a professional person to determine whether the minor
9 (~~is chemically dependent~~) has a substance use disorder and in need
10 of inpatient treatment.

11 (2) The consent of the minor is not required for admission,
12 evaluation, and treatment if the parent brings the minor to the
13 program.

14 (3) An appropriately trained professional person may evaluate
15 whether the minor (~~is chemically dependent~~) has a substance use
16 disorder. The evaluation shall be completed within twenty-four hours
17 of the time the minor was brought to the program, unless the
18 professional person determines that the condition of the minor
19 necessitates additional time for evaluation. In no event shall a
20 minor be held longer than seventy-two hours for evaluation. If, in
21 the judgment of the professional person, it is determined it is a
22 medical necessity for the minor to receive inpatient treatment, the
23 minor may be held for treatment. The facility shall limit treatment
24 to that which the professional person determines is medically
25 necessary to stabilize the minor's condition until the evaluation has
26 been completed. Within twenty-four hours of completion of the
27 evaluation, the professional person shall notify the department if
28 the child is held for treatment and of the date of admission.

29 (4) No provider is obligated to provide treatment to a minor
30 under the provisions of this section. No provider may admit a minor
31 to treatment under this section unless it is medically necessary.

32 (5) No minor receiving inpatient treatment under this section may
33 be discharged from the program based solely on his or her request.

34 **Sec. 26.** RCW 70.96A.250 and 1998 c 296 s 29 are each amended to
35 read as follows:

36 (1) A parent may bring, or authorize the bringing of, his or her
37 minor child to a provider of outpatient (~~chemical dependency~~)
38 substance use disorder treatment and request that an appropriately

1 trained professional person examine the minor to determine whether
2 the minor has a ((~~chemical dependency~~)) substance use disorder and is
3 in need of outpatient treatment.

4 (2) The consent of the minor is not required for evaluation if
5 the parent brings the minor to the provider.

6 (3) The professional person in charge of the program may evaluate
7 whether the minor has a ((~~chemical dependency~~)) substance use
8 disorder and is in need of outpatient treatment.

9 (4) Any minor admitted to inpatient treatment under RCW
10 70.96A.245 (as recodified by this act) shall be discharged
11 immediately from inpatient treatment upon written request of the
12 parent.

13 **Sec. 27.** RCW 70.96A.265 and 1998 c 296 s 32 are each amended to
14 read as follows:

15 For purposes of eligibility for medical assistance under chapter
16 74.09 RCW, minors in inpatient ((~~chemical dependency~~)) substance use
17 disorder treatment shall be considered to be part of their parent's
18 or legal guardian's household, unless the minor has been assessed by
19 the department or its designee as likely to require such treatment
20 for at least ninety consecutive days, or is in out-of-home care in
21 accordance with chapter 13.34 RCW, or the parents are found to not be
22 exercising responsibility for care and control of the minor. Payment
23 for such care by the department shall be made only in accordance with
24 rules, guidelines, and clinical criteria applicable to inpatient
25 treatment of minors established by the department.

26 **Sec. 28.** RCW 70.96A.400 and 2001 c 242 s 1 are each amended to
27 read as follows:

28 The state of Washington declares that there is no fundamental
29 right to opiate substitution treatment. The state of Washington
30 further declares that while opiate substitution drugs used in the
31 treatment of opiate dependency are addictive substances, that they
32 nevertheless have several legal, important, and justified uses and
33 that one of their appropriate and legal uses is, in conjunction with
34 other required therapeutic procedures, in the treatment of persons
35 addicted to or habituated to opioids. Opiate substitution treatment
36 should only be used for participants who are deemed appropriate to
37 need this level of intervention and should not be the first treatment
38 intervention for all opiate addicts.

1 Because opiate substitution drugs, used in the treatment of
2 opiate dependency are addictive and are listed as a schedule II
3 controlled substance in chapter 69.50 RCW, the state of Washington
4 has the legal obligation and right to regulate the use of opiate
5 substitution treatment. The state of Washington declares its
6 authority to control and regulate carefully, in consultation with
7 counties and cities, all clinical uses of opiate substitution drugs
8 used in the treatment of opiate addiction.

9 Further, the state declares that the primary goal of opiate
10 substitution treatment is total abstinence from ~~((chemical
11 dependency))~~ substance use for the individuals who participate in the
12 treatment program. The state recognizes that a small percentage of
13 persons who participate in opiate substitution treatment programs
14 require treatment for an extended period of time. Opiate substitution
15 treatment programs shall provide a comprehensive transition program
16 to eliminate ~~((chemical-dependency))~~ substance use, including opiate
17 and opiate substitute addiction of program participants.

18 **Sec. 29.** RCW 70.96A.800 and 2014 c 225 s 33 are each amended to
19 read as follows:

20 (1) Subject to funds appropriated for this specific purpose, the
21 secretary shall select and contract with ~~((counties))~~ behavioral
22 health organizations to provide intensive case management for
23 ~~((chemically-dependent))~~ persons with substance use disorders and
24 histories of high utilization of crisis services at two sites. In
25 selecting the two sites, the secretary shall endeavor to site one in
26 an urban county, and one in a rural county; and to site them in
27 counties other than those selected pursuant to RCW 70.96B.020, to the
28 extent necessary to facilitate evaluation of pilot project results.
29 Subject to funds appropriated for this specific purpose, the
30 secretary may contract with additional counties to provide intensive
31 case management.

32 (2) The contracted sites shall implement the pilot programs by
33 providing intensive case management to persons with a primary
34 ~~((chemical-dependency))~~ substance use disorder diagnosis or dual
35 primary ~~((chemical-dependency))~~ substance use disorder and mental
36 health diagnoses, through the employment of ~~((chemical-dependency))~~
37 substance use disorder case managers. The ~~((chemical-dependency))~~
38 substance use disorder case managers shall:

1 (a) Be trained in and use the integrated, comprehensive screening
2 and assessment process adopted under RCW 70.96C.010;

3 (b) Reduce the use of crisis medical, (~~chemical dependency~~)
4 substance use disorder treatment and mental health services,
5 including but not limited to, emergency room admissions,
6 hospitalizations, withdrawal management programs, inpatient
7 psychiatric admissions, involuntary treatment petitions, emergency
8 medical services, and ambulance services;

9 (c) Reduce the use of emergency first responder services
10 including police, fire, emergency medical, and ambulance services;

11 (d) Reduce the number of criminal justice interventions including
12 arrests, violations of conditions of supervision, bookings, jail
13 days, prison sanction day for violations, court appearances, and
14 prosecutor and defense costs;

15 (e) Where appropriate and available, work with therapeutic courts
16 including drug courts and mental health courts to maximize the
17 outcomes for the individual and reduce the likelihood of reoffense;

18 (f) Coordinate with local offices of the economic services
19 administration to assist the person in accessing and remaining
20 enrolled in those programs to which the person may be entitled;

21 (g) Where appropriate and available, coordinate with primary care
22 and other programs operated through the federal government including
23 federally qualified health centers, Indian health programs, and
24 veterans' health programs for which the person is eligible to reduce
25 duplication of services and conflicts in case approach;

26 (h) Where appropriate, advocate for the client's needs to assist
27 the person in achieving and maintaining stability and progress toward
28 recovery;

29 (i) Document the numbers of persons with co-occurring mental and
30 substance (~~abuse~~) use disorders and the point of determination of
31 the co-occurring disorder by quadrant of intensity of need; and

32 (j) Where a program participant is under supervision by the
33 department of corrections, collaborate with the department of
34 corrections to maximize treatment outcomes and reduce the likelihood
35 of reoffense.

36 (3) The pilot programs established by this section shall begin
37 providing services by March 1, 2006.

38 **Sec. 30.** RCW 70.96A.905 and 1992 c 205 s 306 are each amended to
39 read as follows:

1 The department shall ensure that the provisions of this chapter
2 are applied by the (~~counties~~) behavioral health organizations in a
3 consistent and uniform manner. The department shall also ensure that,
4 to the extent possible within available funds, the (~~county-~~
5 ~~designated~~) behavioral health organization-designated chemical
6 dependency specialists are specifically trained in adolescent
7 chemical dependency issues, the chemical dependency commitment laws,
8 and the criteria for commitment, as specified in this chapter and
9 chapter 70.96A RCW.

10 **Sec. 31.** RCW 71.24.300 and 2014 c 225 s 39 are each amended to
11 read as follows:

12 (1) Upon the request of a tribal authority or authorities within
13 a behavioral health organization the joint operating agreement or the
14 county authority shall allow for the inclusion of the tribal
15 authority to be represented as a party to the behavioral health
16 organization.

17 (2) The roles and responsibilities of the county and tribal
18 authorities shall be determined by the terms of that agreement
19 including a determination of membership on the governing board and
20 advisory committees, the number of tribal representatives to be party
21 to the agreement, and the provisions of law and shall assure the
22 provision of culturally competent services to the tribes served.

23 (3) The state (~~mental~~) behavioral health authority may not
24 determine the roles and responsibilities of county authorities as to
25 each other under behavioral health organizations by rule, except to
26 assure that all duties required of behavioral health organizations
27 are assigned and that counties and the behavioral health organization
28 do not duplicate functions and that a single authority has final
29 responsibility for all available resources and performance under the
30 behavioral health organization's contract with the secretary.

31 (4) If a behavioral health organization is a private entity, the
32 department shall allow for the inclusion of the tribal authority to
33 be represented as a party to the behavioral health organization.

34 (5) The roles and responsibilities of the private entity and the
35 tribal authorities shall be determined by the department, through
36 negotiation with the tribal authority.

37 (6) Behavioral health organizations shall submit an overall six-
38 year operating and capital plan, timeline, and budget and submit

1 progress reports and an updated two-year plan biennially thereafter,
2 to assume within available resources all of the following duties:

3 (a) Administer and provide for the availability of all resource
4 management services, residential services, and community support
5 services.

6 (b) Administer and provide for the availability of all
7 investigation, transportation, court-related, and other services
8 provided by the state or counties pursuant to chapter 71.05 RCW.

9 (c) Provide within the boundaries of each behavioral health
10 organization evaluation and treatment services for at least ninety
11 percent of persons detained or committed for periods up to seventeen
12 days according to chapter 71.05 RCW. Behavioral health organizations
13 may contract to purchase evaluation and treatment services from other
14 organizations if they are unable to provide for appropriate resources
15 within their boundaries. Insofar as the original intent of serving
16 persons in the community is maintained, the secretary is authorized
17 to approve exceptions on a case-by-case basis to the requirement to
18 provide evaluation and treatment services within the boundaries of
19 each behavioral health organization. Such exceptions are limited to:

20 (i) Contracts with neighboring or contiguous regions; or

21 (ii) Individuals detained or committed for periods up to
22 seventeen days at the state hospitals at the discretion of the
23 secretary.

24 (d) Administer and provide for the availability of all other
25 mental health services, which shall include patient counseling, day
26 treatment, consultation, education services, employment services as
27 described in RCW 71.24.035, and mental health services to children.

28 (e) Establish standards and procedures for reviewing individual
29 service plans and determining when that person may be discharged from
30 resource management services.

31 (7) A behavioral health organization may request that any state-
32 owned land, building, facility, or other capital asset which was ever
33 purchased, deeded, given, or placed in trust for the care of the
34 persons with mental illness and which is within the boundaries of a
35 behavioral health organization be made available to support the
36 operations of the behavioral health organization. State agencies
37 managing such capital assets shall give first priority to requests
38 for their use pursuant to this chapter.

39 (8) Each behavioral health organization shall appoint a
40 (~~mental~~) behavioral health advisory board which shall review and

1 provide comments on plans and policies developed under this chapter,
2 provide local oversight regarding the activities of the behavioral
3 health organization, and work with the behavioral health organization
4 to resolve significant concerns regarding service delivery and
5 outcomes. The department shall establish statewide procedures for the
6 operation of regional advisory committees including mechanisms for
7 advisory board feedback to the department regarding behavioral health
8 organization performance. The composition of the board shall be
9 broadly representative of the demographic character of the region and
10 shall include, but not be limited to, representatives of consumers of
11 substance use disorder and mental health services and their families,
12 law enforcement, and, where the county is not the behavioral health
13 organization, county elected officials. Composition and length of
14 terms of board members may differ between behavioral health
15 organizations but shall be included in each behavioral health
16 organization's contract and approved by the secretary.

17 (9) Behavioral health organizations shall assume all duties
18 specified in their plans and joint operating agreements through
19 biennial contractual agreements with the secretary.

20 (10) Behavioral health organizations may receive technical
21 assistance from the housing trust fund and may identify and submit
22 projects for housing and housing support services to the housing
23 trust fund established under chapter 43.185 RCW. Projects identified
24 or submitted under this subsection must be fully integrated with the
25 behavioral health organization six-year operating and capital plan,
26 timeline, and budget required by subsection (6) of this section.

27 **Sec. 32.** RCW 71.24.350 and 2014 c 225 s 41 are each amended to
28 read as follows:

29 The department shall require each behavioral health organization
30 to provide for a separately funded (~~(mental)~~) behavioral health
31 ombuds office in each behavioral health organization that is
32 independent of the behavioral health organization. The ombuds office
33 shall maximize the use of consumer advocates.

34 **Sec. 33.** RCW 70.96A.020 and 2014 c 225 s 20 are each reenacted
35 and amended to read as follows:

36 For the purposes of this chapter the following words and phrases
37 shall have the following meanings unless the context clearly requires
38 otherwise:

1 (1) "Alcoholism" means a disease, characterized by a dependency
2 on alcoholic beverages, loss of control over the amount and
3 circumstances of use, symptoms of tolerance, physiological or
4 psychological withdrawal, or both, if use is reduced or discontinued,
5 and impairment of health or disruption of social or economic
6 functioning.

7 (2) "Approved substance use disorder treatment program" means a
8 program for persons with a substance use disorder provided by a
9 treatment program certified by the department of social and health
10 services as meeting standards adopted under this chapter.

11 (3) "Behavioral health organization" means a county authority or
12 group of county authorities or other entity recognized by the
13 secretary in contract in a defined regional service area.

14 (4) "Behavioral health program" has the same meaning as in RCW
15 71.24.025.

16 (5) "Behavioral health services" means mental health services as
17 described in chapters 71.24 and 71.36 RCW and ~~((chemical dependency))~~
18 substance use disorder treatment services as described in this
19 chapter.

20 ~~((+5))~~ (6) "Chemical dependency" means: (a) Alcoholism; (b) drug
21 addiction; or (c) dependence on alcohol and one or more other
22 psychoactive chemicals, as the context requires.

23 ~~((+6) "Chemical dependency program" means expenditures and
24 activities of the department designed and conducted to prevent or
25 treat alcoholism and other drug addiction, including reasonable
26 administration and overhead.))~~

27 (7) "Department" means the department of social and health
28 services.

29 (8) "Designated chemical dependency specialist" or "specialist"
30 means a person designated by the behavioral health organization or by
31 the county ~~((alcoholism and other drug addiction))~~ substance use
32 disorder treatment program coordinator designated ~~((under RCW~~
33 ~~70.96A.310))~~ by the behavioral health organization to perform the
34 commitment duties described in RCW 70.96A.140 and qualified to do so
35 by meeting standards adopted by the department.

36 (9) ~~(("Director" means the person administering the substance use
37 disorder program within the department.~~

38 ~~(+10))~~ "Drug addiction" means a disease characterized by a
39 dependency on psychoactive chemicals, loss of control over the amount
40 and circumstances of use, symptoms of tolerance, physiological or

1 psychological withdrawal, or both, if use is reduced or discontinued,
2 and impairment of health or disruption of social or economic
3 functioning.

4 ~~((11)) "Emergency service patrol" means a patrol established~~
5 ~~under RCW 70.96A.170.~~

6 ~~(12))~~ (10) "Gravely disabled by alcohol or other psychoactive
7 chemicals" or "gravely disabled" means that a person, as a result of
8 the use of alcohol or other psychoactive chemicals: (a) Is in danger
9 of serious physical harm resulting from a failure to provide for his
10 or her essential human needs of health or safety; or (b) manifests
11 severe deterioration in routine functioning evidenced by a repeated
12 and escalating loss of cognition or volitional control over his or
13 her actions and is not receiving care as essential for his or her
14 health or safety.

15 ~~((13))~~ (11) "History of one or more violent acts" refers to the
16 period of time ten years prior to the filing of a petition under this
17 chapter, excluding any time spent, but not any violent acts
18 committed, in a mental health facility, or a long-term alcoholism or
19 drug treatment facility, or in confinement.

20 ~~((14))~~ (12) "Incapacitated by alcohol or other psychoactive
21 chemicals" means that a person, as a result of the use of alcohol or
22 other psychoactive chemicals, is gravely disabled or presents a
23 likelihood of serious harm to himself or herself, to any other
24 person, or to property.

25 ~~((15))~~ (13) "Incompetent person" means a person who has been
26 adjudged incompetent by the superior court.

27 ~~((16))~~ (14) "Intoxicated person" means a person whose mental or
28 physical functioning is substantially impaired as a result of the use
29 of alcohol or other psychoactive chemicals.

30 ~~((17))~~ (15) "Licensed physician" means a person licensed to
31 practice medicine or osteopathic medicine and surgery in the state of
32 Washington.

33 ~~((18))~~ (16) "Likelihood of serious harm" means:
34 (a) A substantial risk that: (i) Physical harm will be inflicted
35 by an individual upon his or her own person, as evidenced by threats
36 or attempts to commit suicide or inflict physical harm on one's self;
37 (ii) physical harm will be inflicted by an individual upon another,
38 as evidenced by behavior that has caused the harm or that places
39 another person or persons in reasonable fear of sustaining the harm;
40 or (iii) physical harm will be inflicted by an individual upon the

1 property of others, as evidenced by behavior that has caused
2 substantial loss or damage to the property of others; or

3 (b) The individual has threatened the physical safety of another
4 and has a history of one or more violent acts.

5 ((+19+)) (17) "Medical necessity" for inpatient care of a minor
6 means a requested certified inpatient service that is reasonably
7 calculated to: (a) Diagnose, arrest, or alleviate a chemical
8 dependency; or (b) prevent the progression of substance use disorders
9 that endanger life or cause suffering and pain, or result in illness
10 or infirmity or threaten to cause or aggravate a handicap, or cause
11 physical deformity or malfunction, and there is no adequate less
12 restrictive alternative available.

13 ((+20+)) (18) "Minor" means a person less than eighteen years of
14 age.

15 ((+21+)) (19) "Parent" means the parent or parents who have the
16 legal right to custody of the child. Parent includes custodian or
17 guardian.

18 ((+22+)) (20) "Peace officer" means a law enforcement official of
19 a public agency or governmental unit, and includes persons
20 specifically given peace officer powers by any state law, local
21 ordinance, or judicial order of appointment.

22 ((+23+)) (21) "Person" means an individual, including a minor.

23 ((+24+)) (22) "Professional person in charge" or "professional
24 person" means a physician or chemical dependency counselor as defined
25 in rule by the department, who is empowered by a certified treatment
26 program with authority to make assessment, admission, continuing
27 care, and discharge decisions on behalf of the certified program.

28 ((+25+)) (23) "Secretary" means the secretary of the department
29 of social and health services.

30 ((+26+)) (24) "Substance use disorder" means a cluster of
31 cognitive, behavioral, and physiological symptoms indicating that an
32 individual continues using the substance despite significant
33 substance-related problems. The diagnosis of a substance use disorder
34 is based on a pathological pattern of behaviors related to the use of
35 the substances.

36 ((+27+)) (25) "Treatment" means the broad range of emergency,
37 withdrawal management, residential, and outpatient services and care,
38 including diagnostic evaluation, (~~chemical dependency~~) substance
39 use disorder education and counseling, medical, psychiatric,
40 psychological, and social service care, vocational rehabilitation and

1 career counseling, which may be extended to persons with substance
2 use disorders and their families, persons incapacitated by alcohol or
3 other psychoactive chemicals, and intoxicated persons.

4 ~~((+28))~~ (26) "Substance use disorder treatment program" means an
5 organization, institution, or corporation, public or private, engaged
6 in the care, treatment, or rehabilitation of persons with substance
7 use ~~((disorder[s]))~~ disorders.

8 ~~((+29))~~ (27) "Violent act" means behavior that resulted in
9 homicide, attempted suicide, nonfatal injuries, or substantial damage
10 to property.

11 **Sec. 34.** RCW 2.28.170 and 2013 2nd sp.s. c 4 s 952 are each
12 amended to read as follows:

13 (1) Jurisdictions may establish and operate drug courts.

14 (2) For the purposes of this section, "drug court" means a court
15 that has special calendars or dockets designed to achieve a reduction
16 in recidivism and substance abuse among nonviolent, substance abusing
17 felony and nonfelony offenders, whether adult or juvenile, by
18 increasing their likelihood for successful rehabilitation through
19 early, continuous, and intense judicially supervised treatment;
20 mandatory periodic drug testing; and the use of appropriate sanctions
21 and other rehabilitation services.

22 (3)(a) Any jurisdiction that seeks a state appropriation to fund
23 a drug court program must first:

24 (i) Exhaust all federal funding that is available to support the
25 operations of its drug court and associated services; and

26 (ii) Match, on a dollar-for-dollar basis, state moneys allocated
27 for drug court programs with local cash or in-kind resources. Moneys
28 allocated by the state must be used to supplement, not supplant,
29 other federal, state, and local funds for drug court operations and
30 associated services. However, from July 26, 2009, until June 30,
31 2015, no match is required for state moneys expended for the
32 administrative and overhead costs associated with the operation of a
33 drug court pursuant to RCW 70.96A.350 (as recodified by this act).

34 (b) Any jurisdiction that establishes a drug court pursuant to
35 this section shall establish minimum requirements for the
36 participation of offenders in the program. The drug court may adopt
37 local requirements that are more stringent than the minimum. The
38 minimum requirements are:

39 (i) The offender would benefit from substance abuse treatment;

1 (ii) The offender has not previously been convicted of a serious
2 violent offense or sex offense as defined in RCW 9.94A.030; and

3 (iii) Without regard to whether proof of any of these elements is
4 required to convict, the offender is not currently charged with or
5 convicted of an offense:

6 (A) That is a sex offense;

7 (B) That is a serious violent offense;

8 (C) During which the defendant used a firearm; or

9 (D) During which the defendant caused substantial or great bodily
10 harm or death to another person.

11 **Sec. 35.** RCW 9.94A.660 and 2009 c 389 s 3 are each amended to
12 read as follows:

13 (1) An offender is eligible for the special drug offender
14 sentencing alternative if:

15 (a) The offender is convicted of a felony that is not a violent
16 offense or sex offense and the violation does not involve a sentence
17 enhancement under RCW 9.94A.533 (3) or (4);

18 (b) The offender is convicted of a felony that is not a felony
19 driving while under the influence of intoxicating liquor or any drug
20 under RCW 46.61.502(6) or felony physical control of a vehicle while
21 under the influence of intoxicating liquor or any drug under RCW
22 46.61.504(6);

23 (c) The offender has no current or prior convictions for a sex
24 offense at any time or violent offense within ten years before
25 conviction of the current offense, in this state, another state, or
26 the United States;

27 (d) For a violation of the Uniform Controlled Substances Act
28 under chapter 69.50 RCW or a criminal solicitation to commit such a
29 violation under chapter 9A.28 RCW, the offense involved only a small
30 quantity of the particular controlled substance as determined by the
31 judge upon consideration of such factors as the weight, purity,
32 packaging, sale price, and street value of the controlled substance;

33 (e) The offender has not been found by the United States attorney
34 general to be subject to a deportation detainer or order and does not
35 become subject to a deportation order during the period of the
36 sentence;

37 (f) The end of the standard sentence range for the current
38 offense is greater than one year; and

1 (g) The offender has not received a drug offender sentencing
2 alternative more than once in the prior ten years before the current
3 offense.

4 (2) A motion for a special drug offender sentencing alternative
5 may be made by the court, the offender, or the state.

6 (3) If the sentencing court determines that the offender is
7 eligible for an alternative sentence under this section and that the
8 alternative sentence is appropriate, the court shall waive imposition
9 of a sentence within the standard sentence range and impose a
10 sentence consisting of either a prison-based alternative under RCW
11 9.94A.662 or a residential chemical dependency treatment-based
12 alternative under RCW 9.94A.664. The residential chemical dependency
13 treatment-based alternative is only available if the midpoint of the
14 standard range is twenty-four months or less.

15 (4) To assist the court in making its determination, the court
16 may order the department to complete either or both a risk assessment
17 report and a chemical dependency screening report as provided in RCW
18 9.94A.500.

19 (5)(a) If the court is considering imposing a sentence under the
20 residential chemical dependency treatment-based alternative, the
21 court may order an examination of the offender by the department. The
22 examination shall, at a minimum, address the following issues:

23 (i) Whether the offender suffers from drug addiction;

24 (ii) Whether the addiction is such that there is a probability
25 that criminal behavior will occur in the future;

26 (iii) Whether effective treatment for the offender's addiction is
27 available from a provider that has been licensed or certified by the
28 (~~division of alcohol and substance abuse of the~~) department of
29 social and health services; and

30 (iv) Whether the offender and the community will benefit from the
31 use of the alternative.

32 (b) The examination report must contain:

33 (i) A proposed monitoring plan, including any requirements
34 regarding living conditions, lifestyle requirements, and monitoring
35 by family members and others; and

36 (ii) Recommended crime-related prohibitions and affirmative
37 conditions.

38 (6) When a court imposes a sentence of community custody under
39 this section:

1 (a) The court may impose conditions as provided in RCW 9.94A.703
2 and may impose other affirmative conditions as the court considers
3 appropriate. In addition, an offender may be required to pay thirty
4 dollars per month while on community custody to offset the cost of
5 monitoring for alcohol or controlled substances.

6 (b) The department may impose conditions and sanctions as
7 authorized in RCW 9.94A.704 and 9.94A.737.

8 (7)(a) The court may bring any offender sentenced under this
9 section back into court at any time on its own initiative to evaluate
10 the offender's progress in treatment or to determine if any
11 violations of the conditions of the sentence have occurred.

12 (b) If the offender is brought back to court, the court may
13 modify the conditions of the community custody or impose sanctions
14 under (c) of this subsection.

15 (c) The court may order the offender to serve a term of total
16 confinement within the standard range of the offender's current
17 offense at any time during the period of community custody if the
18 offender violates the conditions or requirements of the sentence or
19 if the offender is failing to make satisfactory progress in
20 treatment.

21 (d) An offender ordered to serve a term of total confinement
22 under (c) of this subsection shall receive credit for any time
23 previously served under this section.

24 (8) In serving a term of community custody imposed upon failure
25 to complete, or administrative termination from, the special drug
26 offender sentencing alternative program, the offender shall receive
27 no credit for time served in community custody prior to termination
28 of the offender's participation in the program.

29 (9) An offender sentenced under this section shall be subject to
30 all rules relating to earned release time with respect to any period
31 served in total confinement.

32 (10) Costs of examinations and preparing treatment plans under a
33 special drug offender sentencing alternative may be paid, at the
34 option of the county, from funds provided to the county from the
35 criminal justice treatment account under RCW 70.96A.350 (as
36 recodified by this act).

37 **Sec. 36.** RCW 10.05.020 and 2010 c 269 s 9 are each amended to
38 read as follows:

1 (1) Except as provided in subsection (2) of this section, the
2 petitioner shall allege under oath in the petition that the wrongful
3 conduct charged is the result of or caused by ~~((alcoholism, drug
4 addiction,))~~ substance use disorders or mental problems for which the
5 person is in need of treatment and unless treated the probability of
6 future recurrence is great, along with a statement that the person
7 agrees to pay the cost of a diagnosis and treatment of the alleged
8 problem or problems if financially able to do so. The petition shall
9 also contain a case history and written assessment prepared by an
10 approved ~~((alcoholism))~~ substance use disorder treatment program as
11 designated in chapter ~~((70.96A))~~ 71.24 RCW if the petition alleges
12 ~~((alcoholism, an approved drug program as designated in chapter 71.24
13 RCW if the petition alleges drug addiction,))~~ a substance use
14 disorder or by an approved mental health center if the petition
15 alleges a mental problem.

16 (2) In the case of a petitioner charged with a misdemeanor or
17 gross misdemeanor under chapter 9A.42 RCW, the petitioner shall
18 allege under oath in the petition that the petitioner is the natural
19 or adoptive parent of the alleged victim; that the wrongful conduct
20 charged is the result of parenting problems for which the petitioner
21 is in need of services; that the petitioner is in need of child
22 welfare services under chapter 74.13 RCW to improve his or her
23 parenting skills in order to better provide his or her child or
24 children with the basic necessities of life; that the petitioner
25 wants to correct his or her conduct to reduce the likelihood of harm
26 to his or her minor children; that in the absence of child welfare
27 services the petitioner may be unable to reduce the likelihood of
28 harm to his or her minor children; and that the petitioner has
29 cooperated with the department of social and health services to
30 develop a plan to receive appropriate child welfare services; along
31 with a statement that the person agrees to pay the cost of the
32 services if he or she is financially able to do so. The petition
33 shall also contain a case history and a written service plan from the
34 department of social and health services.

35 (3) Before entry of an order deferring prosecution, a petitioner
36 shall be advised of his or her rights as an accused and execute, as a
37 condition of receiving treatment, a statement that contains: (a) An
38 acknowledgment of his or her rights; (b) an acknowledgment and waiver
39 of the right to testify, the right to a speedy trial, the right to
40 call witnesses to testify, the right to present evidence in his or

1 her defense, and the right to a jury trial; (c) a stipulation to the
2 admissibility and sufficiency of the facts contained in the written
3 police report; and (d) an acknowledgment that the statement will be
4 entered and used to support a finding of guilty if the court finds
5 cause to revoke the order granting deferred prosecution. The
6 petitioner shall also be advised that he or she may, if he or she
7 proceeds to trial and is found guilty, be allowed to seek suspension
8 of some or all of the fines and incarceration that may be ordered
9 upon the condition that he or she seek treatment and, further, that
10 he or she may seek treatment from public and private agencies at any
11 time without regard to whether or not he or she is found guilty of
12 the offense charged. He or she shall also be advised that the court
13 will not accept a petition for deferred prosecution from a person
14 who: (i) Sincerely believes that he or she is innocent of the
15 charges; (ii) sincerely believes that he or she does not, in fact,
16 suffer from alcoholism, drug addiction, or mental problems; or (iii)
17 in the case of a petitioner charged under chapter 9A.42 RCW,
18 sincerely believes that he or she does not need child welfare
19 services.

20 (4) Before entering an order deferring prosecution, the court
21 shall make specific findings that: (a) The petitioner has stipulated
22 to the admissibility and sufficiency of the facts as contained in the
23 written police report; (b) the petitioner has acknowledged the
24 admissibility of the stipulated facts in any criminal hearing on the
25 underlying offense or offenses held subsequent to revocation of the
26 order granting deferred prosecution; (c) the petitioner has
27 acknowledged and waived the right to testify, the right to a speedy
28 trial, the right to call witnesses to testify, the right to present
29 evidence in his or her defense, and the right to a jury trial; and
30 (d) the petitioner's statements were made knowingly and voluntarily.
31 Such findings shall be included in the order granting deferred
32 prosecution.

33 **Sec. 37.** RCW 10.05.030 and 2002 c 219 s 8 are each amended to
34 read as follows:

35 The arraignment judge upon consideration of the petition and with
36 the concurrence of the prosecuting attorney may continue the
37 arraignment and refer such person for a diagnostic investigation and
38 evaluation to an approved (~~alcoholism~~) substance use disorder
39 treatment program as designated in chapter (~~70.96A~~) 71.24 RCW, if

1 the petition alleges ((~~an alcohol problem, an approved drug treatment~~
2 ~~center as designated in chapter 71.24 RCW, if the petition alleges a~~
3 ~~drug problem~~) a substance use disorder, to an approved mental health
4 center, if the petition alleges a mental problem, or the department
5 of social and health services if the petition is brought under RCW
6 10.05.020(2).

7 **Sec. 38.** RCW 10.05.150 and 1999 c 143 s 43 are each amended to
8 read as follows:

9 A deferred prosecution program for alcoholism shall be for a two-
10 year period and shall include, but not be limited to, the following
11 requirements:

12 (1) Total abstinence from alcohol and all other nonprescribed
13 mind-altering drugs;

14 (2) Participation in an intensive inpatient or intensive
15 outpatient program in a state-approved ((~~alcoholism~~)) substance use
16 disorder treatment program;

17 (3) Participation in a minimum of two meetings per week of an
18 alcoholism self-help recovery support group, as determined by the
19 assessing agency, for the duration of the treatment program;

20 (4) Participation in an alcoholism self-help recovery support
21 group, as determined by the assessing agency, from the date of court
22 approval of the plan to entry into intensive treatment;

23 (5) Not less than weekly approved outpatient counseling, group or
24 individual, for a minimum of six months following the intensive phase
25 of treatment;

26 (6) Not less than monthly outpatient contact, group or
27 individual, for the remainder of the two-year deferred prosecution
28 period;

29 (7) The decision to include the use of prescribed drugs,
30 including disulfiram, as a condition of treatment shall be reserved
31 to the treating facility and the petitioner's physician;

32 (8) All treatment within the purview of this section shall occur
33 within or be approved by a state-approved ((~~alcoholism~~)) substance
34 use disorder treatment program as described in chapter 70.96A RCW;

35 (9) Signature of the petitioner agreeing to the terms and
36 conditions of the treatment program.

37 NEW SECTION. **Sec. 39.** RCW 43.135.03901 is decodified.

1 **Sec. 40.** RCW 46.61.5055 and 2014 c 100 s 1 are each amended to
2 read as follows:

3 (1) **No prior offenses in seven years.** Except as provided in RCW
4 46.61.502(6) or 46.61.504(6), a person who is convicted of a
5 violation of RCW 46.61.502 or 46.61.504 and who has no prior offense
6 within seven years shall be punished as follows:

7 (a) **Penalty for alcohol concentration less than 0.15.** In the case
8 of a person whose alcohol concentration was less than 0.15, or for
9 whom for reasons other than the person's refusal to take a test
10 offered pursuant to RCW 46.20.308 there is no test result indicating
11 the person's alcohol concentration:

12 (i) By imprisonment for not less than one day nor more than three
13 hundred sixty-four days. Twenty-four consecutive hours of the
14 imprisonment may not be suspended unless the court finds that the
15 imposition of this mandatory minimum sentence would impose a
16 substantial risk to the offender's physical or mental well-being.
17 Whenever the mandatory minimum sentence is suspended, the court shall
18 state in writing the reason for granting the suspension and the facts
19 upon which the suspension is based. In lieu of the mandatory minimum
20 term of imprisonment required under this subsection (1)(a)(i), the
21 court may order not less than fifteen days of electronic home
22 monitoring. The offender shall pay the cost of electronic home
23 monitoring. The county or municipality in which the penalty is being
24 imposed shall determine the cost. The court may also require the
25 offender's electronic home monitoring device or other separate
26 alcohol monitoring device to include an alcohol detection
27 breathalyzer, and the court may restrict the amount of alcohol the
28 offender may consume during the time the offender is on electronic
29 home monitoring; and

30 (ii) By a fine of not less than three hundred fifty dollars nor
31 more than five thousand dollars. Three hundred fifty dollars of the
32 fine may not be suspended unless the court finds the offender to be
33 indigent; or

34 (b) **Penalty for alcohol concentration at least 0.15.** In the case
35 of a person whose alcohol concentration was at least 0.15, or for
36 whom by reason of the person's refusal to take a test offered
37 pursuant to RCW 46.20.308 there is no test result indicating the
38 person's alcohol concentration:

39 (i) By imprisonment for not less than two days nor more than
40 three hundred sixty-four days. Forty-eight consecutive hours of the

1 imprisonment may not be suspended unless the court finds that the
2 imposition of this mandatory minimum sentence would impose a
3 substantial risk to the offender's physical or mental well-being.
4 Whenever the mandatory minimum sentence is suspended, the court shall
5 state in writing the reason for granting the suspension and the facts
6 upon which the suspension is based. In lieu of the mandatory minimum
7 term of imprisonment required under this subsection (1)(b)(i), the
8 court may order not less than thirty days of electronic home
9 monitoring. The offender shall pay the cost of electronic home
10 monitoring. The county or municipality in which the penalty is being
11 imposed shall determine the cost. The court may also require the
12 offender's electronic home monitoring device to include an alcohol
13 detection breathalyzer or other separate alcohol monitoring device,
14 and the court may restrict the amount of alcohol the offender may
15 consume during the time the offender is on electronic home
16 monitoring; and

17 (ii) By a fine of not less than five hundred dollars nor more
18 than five thousand dollars. Five hundred dollars of the fine may not
19 be suspended unless the court finds the offender to be indigent.

20 (2) **One prior offense in seven years.** Except as provided in RCW
21 46.61.502(6) or 46.61.504(6), a person who is convicted of a
22 violation of RCW 46.61.502 or 46.61.504 and who has one prior offense
23 within seven years shall be punished as follows:

24 (a) **Penalty for alcohol concentration less than 0.15.** In the case
25 of a person whose alcohol concentration was less than 0.15, or for
26 whom for reasons other than the person's refusal to take a test
27 offered pursuant to RCW 46.20.308 there is no test result indicating
28 the person's alcohol concentration:

29 (i) By imprisonment for not less than thirty days nor more than
30 three hundred sixty-four days and sixty days of electronic home
31 monitoring. In lieu of the mandatory minimum term of sixty days
32 electronic home monitoring, the court may order at least an
33 additional four days in jail or, if available in that county or city,
34 a six-month period of 24/7 sobriety program monitoring pursuant to
35 RCW 36.28A.300 through 36.28A.390, and the court shall order an
36 expanded alcohol assessment and treatment, if deemed appropriate by
37 the assessment. The offender shall pay for the cost of the electronic
38 monitoring. The county or municipality where the penalty is being
39 imposed shall determine the cost. The court may also require the
40 offender's electronic home monitoring device include an alcohol

1 detection breathalyzer or other separate alcohol monitoring device,
2 and may restrict the amount of alcohol the offender may consume
3 during the time the offender is on electronic home monitoring. Thirty
4 days of imprisonment and sixty days of electronic home monitoring may
5 not be suspended unless the court finds that the imposition of this
6 mandatory minimum sentence would impose a substantial risk to the
7 offender's physical or mental well-being. Whenever the mandatory
8 minimum sentence is suspended, the court shall state in writing the
9 reason for granting the suspension and the facts upon which the
10 suspension is based; and

11 (ii) By a fine of not less than five hundred dollars nor more
12 than five thousand dollars. Five hundred dollars of the fine may not
13 be suspended unless the court finds the offender to be indigent; or

14 (b) **Penalty for alcohol concentration at least 0.15.** In the case
15 of a person whose alcohol concentration was at least 0.15, or for
16 whom by reason of the person's refusal to take a test offered
17 pursuant to RCW 46.20.308 there is no test result indicating the
18 person's alcohol concentration:

19 (i) By imprisonment for not less than forty-five days nor more
20 than three hundred sixty-four days and ninety days of electronic home
21 monitoring. In lieu of the mandatory minimum term of ninety days
22 electronic home monitoring, the court may order at least an
23 additional six days in jail or, if available in that county or city,
24 a six-month period of 24/7 sobriety program monitoring pursuant to
25 RCW 36.28A.300 through 36.28A.390, and the court shall order an
26 expanded alcohol assessment and treatment, if deemed appropriate by
27 the assessment. The offender shall pay for the cost of the electronic
28 monitoring. The county or municipality where the penalty is being
29 imposed shall determine the cost. The court may also require the
30 offender's electronic home monitoring device include an alcohol
31 detection breathalyzer or other separate alcohol monitoring device,
32 and may restrict the amount of alcohol the offender may consume
33 during the time the offender is on electronic home monitoring. Forty-
34 five days of imprisonment and ninety days of electronic home
35 monitoring may not be suspended unless the court finds that the
36 imposition of this mandatory minimum sentence would impose a
37 substantial risk to the offender's physical or mental well-being.
38 Whenever the mandatory minimum sentence is suspended, the court shall
39 state in writing the reason for granting the suspension and the facts
40 upon which the suspension is based; and

1 (ii) By a fine of not less than seven hundred fifty dollars nor
2 more than five thousand dollars. Seven hundred fifty dollars of the
3 fine may not be suspended unless the court finds the offender to be
4 indigent.

5 (3) **Two or three prior offenses in seven years.** Except as
6 provided in RCW 46.61.502(6) or 46.61.504(6), a person who is
7 convicted of a violation of RCW 46.61.502 or 46.61.504 and who has
8 two or three prior offenses within seven years shall be punished as
9 follows:

10 (a) **Penalty for alcohol concentration less than 0.15.** In the case
11 of a person whose alcohol concentration was less than 0.15, or for
12 whom for reasons other than the person's refusal to take a test
13 offered pursuant to RCW 46.20.308 there is no test result indicating
14 the person's alcohol concentration:

15 (i) By imprisonment for not less than ninety days nor more than
16 three hundred sixty-four days, if available in that county or city, a
17 six-month period of 24/7 sobriety program monitoring pursuant to RCW
18 36.28A.300 through 36.28A.390, and one hundred twenty days of
19 electronic home monitoring. In lieu of the mandatory minimum term of
20 one hundred twenty days of electronic home monitoring, the court may
21 order at least an additional eight days in jail. The court shall
22 order an expanded alcohol assessment and treatment, if deemed
23 appropriate by the assessment. The offender shall pay for the cost of
24 the electronic monitoring. The county or municipality where the
25 penalty is being imposed shall determine the cost. The court may also
26 require the offender's electronic home monitoring device include an
27 alcohol detection breathalyzer or other separate alcohol monitoring
28 device, and may restrict the amount of alcohol the offender may
29 consume during the time the offender is on electronic home
30 monitoring. Ninety days of imprisonment and one hundred twenty days
31 of electronic home monitoring may not be suspended unless the court
32 finds that the imposition of this mandatory minimum sentence would
33 impose a substantial risk to the offender's physical or mental well-
34 being. Whenever the mandatory minimum sentence is suspended, the
35 court shall state in writing the reason for granting the suspension
36 and the facts upon which the suspension is based; and

37 (ii) By a fine of not less than one thousand dollars nor more
38 than five thousand dollars. One thousand dollars of the fine may not
39 be suspended unless the court finds the offender to be indigent; or

1 (b) **Penalty for alcohol concentration at least 0.15.** In the case
2 of a person whose alcohol concentration was at least 0.15, or for
3 whom by reason of the person's refusal to take a test offered
4 pursuant to RCW 46.20.308 there is no test result indicating the
5 person's alcohol concentration:

6 (i) By imprisonment for not less than one hundred twenty days nor
7 more than three hundred sixty-four days, if available in that county
8 or city, a six-month period of 24/7 sobriety program monitoring
9 pursuant to RCW 36.28A.300 through 36.28A.390, and one hundred fifty
10 days of electronic home monitoring. In lieu of the mandatory minimum
11 term of one hundred fifty days of electronic home monitoring, the
12 court may order at least an additional ten days in jail. The offender
13 shall pay for the cost of the electronic monitoring. The court shall
14 order an expanded alcohol assessment and treatment, if deemed
15 appropriate by the assessment. The county or municipality where the
16 penalty is being imposed shall determine the cost. The court may also
17 require the offender's electronic home monitoring device include an
18 alcohol detection breathalyzer or other separate alcohol monitoring
19 device, and may restrict the amount of alcohol the offender may
20 consume during the time the offender is on electronic home
21 monitoring. One hundred twenty days of imprisonment and one hundred
22 fifty days of electronic home monitoring may not be suspended unless
23 the court finds that the imposition of this mandatory minimum
24 sentence would impose a substantial risk to the offender's physical
25 or mental well-being. Whenever the mandatory minimum sentence is
26 suspended, the court shall state in writing the reason for granting
27 the suspension and the facts upon which the suspension is based; and

28 (ii) By a fine of not less than one thousand five hundred dollars
29 nor more than five thousand dollars. One thousand five hundred
30 dollars of the fine may not be suspended unless the court finds the
31 offender to be indigent.

32 (4) **Four or more prior offenses in ten years.** A person who is
33 convicted of a violation of RCW 46.61.502 or 46.61.504 shall be
34 punished under chapter 9.94A RCW if:

35 (a) The person has four or more prior offenses within ten years;
36 or

37 (b) The person has ever previously been convicted of:

38 (i) A violation of RCW 46.61.520 committed while under the
39 influence of intoxicating liquor or any drug;

1 (ii) A violation of RCW 46.61.522 committed while under the
2 influence of intoxicating liquor or any drug;

3 (iii) An out-of-state offense comparable to the offense specified
4 in (b)(i) or (ii) of this subsection; or

5 (iv) A violation of RCW 46.61.502(6) or 46.61.504(6).

6 (5) **Monitoring.**

7 (a) **Ignition interlock device.** The court shall require any person
8 convicted of a violation of RCW 46.61.502 or 46.61.504 or an
9 equivalent local ordinance to comply with the rules and requirements
10 of the department regarding the installation and use of a functioning
11 ignition interlock device installed on all motor vehicles operated by
12 the person.

13 (b) **Monitoring devices.** If the court orders that a person refrain
14 from consuming any alcohol, the court may order the person to submit
15 to alcohol monitoring through an alcohol detection breathalyzer
16 device, transdermal sensor device, or other technology designed to
17 detect alcohol in a person's system. The person shall pay for the
18 cost of the monitoring, unless the court specifies that the cost of
19 monitoring will be paid with funds that are available from an
20 alternative source identified by the court. The county or
21 municipality where the penalty is being imposed shall determine the
22 cost.

23 (c) **Ignition interlock device substituted for 24/7 sobriety**
24 **program monitoring.** In any county or city where a 24/7 sobriety
25 program is available and verified by the Washington association of
26 sheriffs and police chiefs, the court shall:

27 (i) Order the person to install and use a functioning ignition
28 interlock or other device in lieu of such period of 24/7 sobriety
29 program monitoring;

30 (ii) Order the person to a period of 24/7 sobriety program
31 monitoring pursuant to subsections (1) through (3) of this section;
32 or

33 (iii) Order the person to install and use a functioning ignition
34 interlock or other device in addition to a period of 24/7 sobriety
35 program monitoring pursuant to subsections (1) through (3) of this
36 section.

37 (6) **Penalty for having a minor passenger in vehicle.** If a person
38 who is convicted of a violation of RCW 46.61.502 or 46.61.504
39 committed the offense while a passenger under the age of sixteen was
40 in the vehicle, the court shall:

1 (a) Order the use of an ignition interlock or other device for an
2 additional six months;

3 (b) In any case in which the person has no prior offenses within
4 seven years, and except as provided in RCW 46.61.502(6) or
5 46.61.504(6), order an additional twenty-four hours of imprisonment
6 and a fine of not less than one thousand dollars and not more than
7 five thousand dollars. One thousand dollars of the fine may not be
8 suspended unless the court finds the offender to be indigent;

9 (c) In any case in which the person has one prior offense within
10 seven years, and except as provided in RCW 46.61.502(6) or
11 46.61.504(6), order an additional five days of imprisonment and a
12 fine of not less than two thousand dollars and not more than five
13 thousand dollars. One thousand dollars of the fine may not be
14 suspended unless the court finds the offender to be indigent;

15 (d) In any case in which the person has two or three prior
16 offenses within seven years, and except as provided in RCW
17 46.61.502(6) or 46.61.504(6), order an additional ten days of
18 imprisonment and a fine of not less than three thousand dollars and
19 not more than ten thousand dollars. One thousand dollars of the fine
20 may not be suspended unless the court finds the offender to be
21 indigent.

22 (7) **Other items courts must consider while setting penalties.** In
23 exercising its discretion in setting penalties within the limits
24 allowed by this section, the court shall particularly consider the
25 following:

26 (a) Whether the person's driving at the time of the offense was
27 responsible for injury or damage to another or another's property;

28 (b) Whether at the time of the offense the person was driving or
29 in physical control of a vehicle with one or more passengers;

30 (c) Whether the driver was driving in the opposite direction of
31 the normal flow of traffic on a multiple lane highway, as defined by
32 RCW 46.04.350, with a posted speed limit of forty-five miles per hour
33 or greater; and

34 (d) Whether a child passenger under the age of sixteen was an
35 occupant in the driver's vehicle.

36 (8) **Treatment and information school.** An offender punishable
37 under this section is subject to the alcohol assessment and treatment
38 provisions of RCW 46.61.5056.

39 (9) **Driver's license privileges of the defendant.** The license,
40 permit, or nonresident privilege of a person convicted of driving or

1 being in physical control of a motor vehicle while under the
2 influence of intoxicating liquor or drugs must:

3 (a) **Penalty for alcohol concentration less than 0.15.** If the
4 person's alcohol concentration was less than 0.15, or if for reasons
5 other than the person's refusal to take a test offered under RCW
6 46.20.308 there is no test result indicating the person's alcohol
7 concentration:

8 (i) Where there has been no prior offense within seven years, be
9 suspended or denied by the department for ninety days;

10 (ii) Where there has been one prior offense within seven years,
11 be revoked or denied by the department for two years; or

12 (iii) Where there have been two or more prior offenses within
13 seven years, be revoked or denied by the department for three years;

14 (b) **Penalty for alcohol concentration at least 0.15.** If the
15 person's alcohol concentration was at least 0.15:

16 (i) Where there has been no prior offense within seven years, be
17 revoked or denied by the department for one year;

18 (ii) Where there has been one prior offense within seven years,
19 be revoked or denied by the department for nine hundred days; or

20 (iii) Where there have been two or more prior offenses within
21 seven years, be revoked or denied by the department for four years;
22 or

23 (c) **Penalty for refusing to take test.** If by reason of the
24 person's refusal to take a test offered under RCW 46.20.308, there is
25 no test result indicating the person's alcohol concentration:

26 (i) Where there have been no prior offenses within seven years,
27 be revoked or denied by the department for two years;

28 (ii) Where there has been one prior offense within seven years,
29 be revoked or denied by the department for three years; or

30 (iii) Where there have been two or more previous offenses within
31 seven years, be revoked or denied by the department for four years.

32 The department shall grant credit on a day-for-day basis for any
33 portion of a suspension, revocation, or denial already served under
34 this subsection for a suspension, revocation, or denial imposed under
35 RCW 46.20.3101 arising out of the same incident.

36 Upon its own motion or upon motion by a person, a court may find,
37 on the record, that notice to the department under RCW 46.20.270 has
38 been delayed for three years or more as a result of a clerical or
39 court error. If so, the court may order that the person's license,
40 permit, or nonresident privilege shall not be revoked, suspended, or

1 denied for that offense. The court shall send notice of the finding
2 and order to the department and to the person. Upon receipt of the
3 notice from the court, the department shall not revoke, suspend, or
4 deny the license, permit, or nonresident privilege of the person for
5 that offense.

6 For purposes of this subsection (9), the department shall refer
7 to the driver's record maintained under RCW 46.52.120 when
8 determining the existence of prior offenses.

9 (10) **Probation of driving privilege.** After expiration of any
10 period of suspension, revocation, or denial of the offender's
11 license, permit, or privilege to drive required by this section, the
12 department shall place the offender's driving privilege in
13 probationary status pursuant to RCW 46.20.355.

14 (11) **Conditions of probation.** (a) In addition to any
15 nonsuspendable and nondeferrable jail sentence required by this
16 section, whenever the court imposes up to three hundred sixty-four
17 days in jail, the court shall also suspend but shall not defer a
18 period of confinement for a period not exceeding five years. The
19 court shall impose conditions of probation that include: (i) Not
20 driving a motor vehicle within this state without a valid license to
21 drive and proof of liability insurance or other financial
22 responsibility for the future pursuant to RCW 46.30.020; (ii) not
23 driving or being in physical control of a motor vehicle within this
24 state while having an alcohol concentration of 0.08 or more or a THC
25 concentration of 5.00 nanograms per milliliter of whole blood or
26 higher, within two hours after driving; and (iii) not refusing to
27 submit to a test of his or her breath or blood to determine alcohol
28 or drug concentration upon request of a law enforcement officer who
29 has reasonable grounds to believe the person was driving or was in
30 actual physical control of a motor vehicle within this state while
31 under the influence of intoxicating liquor or drug. The court may
32 impose conditions of probation that include nonrepetition,
33 installation of an ignition interlock device on the probationer's
34 motor vehicle, alcohol or drug treatment, supervised probation, or
35 other conditions that may be appropriate. The sentence may be imposed
36 in whole or in part upon violation of a condition of probation during
37 the suspension period.

38 (b) For each violation of mandatory conditions of probation under
39 (a)(i), (ii), or (iii) of this subsection, the court shall order the

1 convicted person to be confined for thirty days, which shall not be
2 suspended or deferred.

3 (c) For each incident involving a violation of a mandatory
4 condition of probation imposed under this subsection, the license,
5 permit, or privilege to drive of the person shall be suspended by the
6 court for thirty days or, if such license, permit, or privilege to
7 drive already is suspended, revoked, or denied at the time the
8 finding of probation violation is made, the suspension, revocation,
9 or denial then in effect shall be extended by thirty days. The court
10 shall notify the department of any suspension, revocation, or denial
11 or any extension of a suspension, revocation, or denial imposed under
12 this subsection.

13 (12) **Waiver of electronic home monitoring.** A court may waive the
14 electronic home monitoring requirements of this chapter when:

15 (a) The offender does not have a dwelling, telephone service, or
16 any other necessity to operate an electronic home monitoring system.
17 However, if a court determines that an alcohol monitoring device
18 utilizing wireless reporting technology is reasonably available, the
19 court may require the person to obtain such a device during the
20 period of required electronic home monitoring;

21 (b) The offender does not reside in the state of Washington; or

22 (c) The court determines that there is reason to believe that the
23 offender would violate the conditions of the electronic home
24 monitoring penalty.

25 Whenever the mandatory minimum term of electronic home monitoring
26 is waived, the court shall state in writing the reason for granting
27 the waiver and the facts upon which the waiver is based, and shall
28 impose an alternative sentence with similar punitive consequences.
29 The alternative sentence may include, but is not limited to, use of
30 an ignition interlock device, the 24/7 sobriety program monitoring,
31 additional jail time, work crew, or work camp.

32 Whenever the combination of jail time and electronic home
33 monitoring or alternative sentence would exceed three hundred sixty-
34 four days, the offender shall serve the jail portion of the sentence
35 first, and the electronic home monitoring or alternative portion of
36 the sentence shall be reduced so that the combination does not exceed
37 three hundred sixty-four days.

38 (13) **Extraordinary medical placement.** An offender serving a
39 sentence under this section, whether or not a mandatory minimum term
40 has expired, may be granted an extraordinary medical placement by the

1 jail administrator subject to the standards and limitations set forth
2 in RCW 9.94A.728(3).

3 (14) **Definitions.** For purposes of this section and RCW 46.61.502
4 and 46.61.504:

5 (a) A "prior offense" means any of the following:

6 (i) A conviction for a violation of RCW 46.61.502 or an
7 equivalent local ordinance;

8 (ii) A conviction for a violation of RCW 46.61.504 or an
9 equivalent local ordinance;

10 (iii) A conviction for a violation of RCW 46.25.110 or an
11 equivalent local ordinance;

12 (iv) A conviction for a violation of RCW 79A.60.040 or an
13 equivalent local ordinance;

14 (v) A conviction for a violation of RCW 47.68.220 or an
15 equivalent local ordinance;

16 (vi) A conviction for a violation of RCW 46.09.470(2) or an
17 equivalent local ordinance;

18 (vii) A conviction for a violation of RCW 46.10.490(2) or an
19 equivalent local ordinance;

20 (viii) A conviction for a violation of RCW 46.61.520 committed
21 while under the influence of intoxicating liquor or any drug, or a
22 conviction for a violation of RCW 46.61.520 committed in a reckless
23 manner or with the disregard for the safety of others if the
24 conviction is the result of a charge that was originally filed as a
25 violation of RCW 46.61.520 committed while under the influence of
26 intoxicating liquor or any drug;

27 (ix) A conviction for a violation of RCW 46.61.522 committed
28 while under the influence of intoxicating liquor or any drug, or a
29 conviction for a violation of RCW 46.61.522 committed in a reckless
30 manner or with the disregard for the safety of others if the
31 conviction is the result of a charge that was originally filed as a
32 violation of RCW 46.61.522 committed while under the influence of
33 intoxicating liquor or any drug;

34 (x) A conviction for a violation of RCW 46.61.5249, 46.61.500, or
35 9A.36.050 or an equivalent local ordinance, if the conviction is the
36 result of a charge that was originally filed as a violation of RCW
37 46.61.502 or 46.61.504, or an equivalent local ordinance, or of RCW
38 46.61.520 or 46.61.522;

1 (xi) An out-of-state conviction for a violation that would have
2 been a violation of (a)(i), (ii), (viii), (ix), or (x) of this
3 subsection if committed in this state;

4 (xii) A deferred prosecution under chapter 10.05 RCW granted in a
5 prosecution for a violation of RCW 46.61.502, 46.61.504, or an
6 equivalent local ordinance;

7 (xiii) A deferred prosecution under chapter 10.05 RCW granted in
8 a prosecution for a violation of RCW 46.61.5249, or an equivalent
9 local ordinance, if the charge under which the deferred prosecution
10 was granted was originally filed as a violation of RCW 46.61.502 or
11 46.61.504, or an equivalent local ordinance, or of RCW 46.61.520 or
12 46.61.522;

13 (xiv) A deferred prosecution granted in another state for a
14 violation of driving or having physical control of a vehicle while
15 under the influence of intoxicating liquor or any drug if the out-of-
16 state deferred prosecution is equivalent to the deferred prosecution
17 under chapter 10.05 RCW, including a requirement that the defendant
18 participate in a chemical dependency treatment program; or

19 (xv) A deferred sentence imposed in a prosecution for a violation
20 of RCW 46.61.5249, 46.61.500, or 9A.36.050, or an equivalent local
21 ordinance, if the charge under which the deferred sentence was
22 imposed was originally filed as a violation of RCW 46.61.502 or
23 46.61.504, or an equivalent local ordinance, or a violation of RCW
24 46.61.520 or 46.61.522;

25 If a deferred prosecution is revoked based on a subsequent
26 conviction for an offense listed in this subsection (14)(a), the
27 subsequent conviction shall not be treated as a prior offense of the
28 revoked deferred prosecution for the purposes of sentencing;

29 (b) "Treatment" means (~~(alcohol or drug))~~ substance use disorder
30 treatment approved by the department of social and health services;

31 (c) "Within seven years" means that the arrest for a prior
32 offense occurred within seven years before or after the arrest for
33 the current offense; and

34 (d) "Within ten years" means that the arrest for a prior offense
35 occurred within ten years before or after the arrest for the current
36 offense.

37 **Sec. 41.** RCW 46.61.5056 and 2011 c 293 s 13 are each amended to
38 read as follows:

1 (1) A person subject to alcohol assessment and treatment under
2 RCW 46.61.5055 shall be required by the court to complete a course in
3 an alcohol information school approved by the department of social
4 and health services or to complete more intensive treatment in a
5 substance use disorder treatment program approved by the department
6 of social and health services, as determined by the court. The court
7 shall notify the department of licensing whenever it orders a person
8 to complete a course or treatment program under this section.

9 (2) A diagnostic evaluation and treatment recommendation shall be
10 prepared under the direction of the court by an alcoholism agency
11 approved by the department of social and health services or a
12 qualified probation department approved by the department of social
13 and health services. A copy of the report shall be forwarded to the
14 court and the department of licensing. Based on the diagnostic
15 evaluation, the court shall determine whether the person shall be
16 required to complete a course in an alcohol information school
17 approved by the department of social and health services or more
18 intensive treatment in a substance use disorder treatment program
19 approved by the department of social and health services.

20 (3) Standards for approval for alcohol treatment programs shall
21 be prescribed by the department of social and health services. The
22 department of social and health services shall periodically review
23 the costs of alcohol information schools and treatment programs.

24 (4) Any agency that provides treatment ordered under RCW
25 46.61.5055, shall immediately report to the appropriate probation
26 department where applicable, otherwise to the court, and to the
27 department of licensing any noncompliance by a person with the
28 conditions of his or her ordered treatment. The court shall notify
29 the department of licensing and the department of social and health
30 services of any failure by an agency to so report noncompliance. Any
31 agency with knowledge of noncompliance that fails to so report shall
32 be fined two hundred fifty dollars by the department of social and
33 health services. Upon three such failures by an agency within one
34 year, the department of social and health services shall revoke the
35 agency's approval under this section.

36 (5) The department of licensing and the department of social and
37 health services may adopt such rules as are necessary to carry out
38 this section.

1 **Sec. 42.** RCW 82.04.4277 and 2014 c 225 s 104 are each amended to
2 read as follows:

3 (1) A health or social welfare organization may deduct from the
4 measure of tax amounts received as compensation for providing mental
5 health services and chemical dependency services under a government-
6 funded program.

7 (2) A behavioral health organization may deduct from the measure
8 of tax amounts received from the state of Washington for distribution
9 to a health or social welfare organization that is eligible to deduct
10 the distribution under subsection (1) of this section.

11 (3) A person claiming a deduction under this section must file a
12 complete annual report with the department under RCW 82.32.534.

13 (4) The definitions in this subsection apply ~~((to this section))~~
14 throughout this section unless the context clearly requires
15 otherwise.

16 (a) "Chemical dependency" has the same meaning as provided in RCW
17 70.96A.020.

18 **(b)** "Health or social welfare organization" has the meaning
19 provided in RCW 82.04.431.

20 ~~((b))~~ **(c)** "Mental health services" and "behavioral health
21 organization" have the meanings provided in RCW 71.24.025.

22 (5) This section expires ~~((August 1, 2016))~~ January 1, 2020.

23 NEW SECTION. **Sec. 43.** The following acts or parts of acts, as
24 now existing or hereafter amended, are each repealed, effective April
25 1, 2016:

26 (1) RCW 70.96A.030 (Substance use disorder program) and 2014 c
27 225 s 21, 1989 c 270 s 4, & 1972 ex.s. c 122 s 3;

28 (2) RCW 70.96A.045 (Funding prerequisites, facilities, plans, or
29 programs receiving financial assistance) and 1989 c 270 s 10;

30 (3) RCW 70.96A.060 (Interdepartmental coordinating committee) and
31 2014 c 225 s 24, 1989 c 270 s 8, 1979 c 158 s 220, & 1972 ex.s. c 122
32 s 6;

33 (4) RCW 70.96A.150 (Records of persons treated for alcoholism and
34 drug addiction) and 1990 c 151 s 1, 1989 c 162 s 1, & 1972 ex.s. c
35 122 s 15;

36 (5) RCW 70.96A.300 (Counties may create alcoholism and other drug
37 addiction board—Generally) and 2014 c 225 s 31 & 1989 c 270 s 15;

1 (6) RCW 70.96A.310 (County alcoholism and other drug addiction
2 program—Chief executive officer of program to be program coordinator)
3 and 1989 c 270 s 16;

4 (7) RCW 70.96A.320 (Alcoholism and other drug addiction program—
5 Generally) and 2014 c 225 s 32, 2013 c 320 s 8, 1990 c 151 s 9, &
6 1989 c 270 s 17; and

7 (8) RCW 70.96A.325 (Methamphetamine addiction programs—Counties
8 authorized to seek state funding) and 2006 c 339 s 101.

9 NEW SECTION. **Sec. 44.** RCW 70.96A.035, 70.96A.037, 70.96A.040,
10 70.96A.043, 70.96A.047, 70.96A.050, 70.96A.055, 70.96A.080,
11 70.96A.085, 70.96A.090, 70.96A.095, 70.96A.096, 70.96A.097,
12 70.96A.170, 70.96A.180, 70.96A.230, 70.96A.235, 70.96A.240,
13 70.96A.245, 70.96A.250, 70.96A.255, 70.96A.260, 70.96A.265,
14 70.96A.350, 70.96A.400, 70.96A.410, 70.96A.420, 70.96A.430,
15 70.96A.500, 70.96A.510, 70.96A.520, 70.96A.800, 70.96A.905, and
16 70.96C.010 are each recodified as sections in chapter 71.24 RCW.

17 NEW SECTION. **Sec. 45.** This act takes effect April 1, 2016."

ESHB 1713 - S AMD TO WM COMM AMD (S2974.1) **440**
By Senators Darneille, Parlette

ADOPTED 4/15/2015

18 On page 2, line 1 of the title amendment, after "dependency;"
19 strike the remainder of the title amendment and insert "amending RCW
20 71.24.035, 70.96A.050, 71.24.037, 70.96A.090, 71.24.385, 70.96A.350,
21 70.96A.035, 70.96C.010, 70.96A.037, 70.96A.047, 70.96A.055,
22 70.96A.087, 70.96A.170, 70.96A.180, 70.96A.095, 70.96A.096,
23 70.96A.097, 70.96A.235, 70.96A.240, 70.96A.245, 70.96A.250,
24 70.96A.265, 70.96A.400, 70.96A.800, 70.96A.905, 71.24.300, 71.24.350,
25 2.28.170, 9.94A.660, 10.05.020, 10.05.030, 10.05.150, 46.61.5055,
26 46.61.5056, and 82.04.4277; reenacting and amending RCW 71.24.025 and
27 70.96A.020; adding new sections to chapter 71.24 RCW; creating a new
28 section; recodifying RCW 70.96A.035, 70.96A.037, 70.96A.040,
29 70.96A.043, 70.96A.047, 70.96A.050, 70.96A.055, 70.96A.080,
30 70.96A.085, 70.96A.090, 70.96A.095, 70.96A.096, 70.96A.097,
31 70.96A.170, 70.96A.180, 70.96A.230, 70.96A.235, 70.96A.240,
32 70.96A.245, 70.96A.250, 70.96A.255, 70.96A.260, 70.96A.265,
33 70.96A.350, 70.96A.400, 70.96A.410, 70.96A.420, 70.96A.430,

1 70.96A.500, 70.96A.510, 70.96A.520, 70.96A.800, 70.96A.905, and
2 70.96C.010; decodifying RCW 43.135.03901; repealing RCW 70.96A.030,
3 70.96A.045, 70.96A.060, 70.96A.150, 70.96A.300, 70.96A.310,
4 70.96A.320, and 70.96A.325; providing an effective date; and
5 providing an expiration date."

EFFECT: Adds the text of 2SHB 1916 (Senate Ways & Means recommended striking amendment) to the Ways & Means Committee striking amendment. These provisions consolidate administrative statutes relating to the state chemical dependency program and mental health services administered by regional support networks into one chapter of code effective April 1, 2016. Terminology referring to chemical dependency, alcoholism, and drug addiction is updated to the term "substance use disorders." Chemical dependency concerns must be integrated into mental health advisory boards and mental health ombuds programs, which are renamed behavioral health advisory boards and behavioral health ombuds programs. A B&O tax exemption that applies to publicly funded mental health services provided by regional support networks and their affiliates is expanded to also apply to publicly funded chemical dependency services, and its expiration date is extended from August 1, 2016, to January 1, 2020.

--- END ---