

**E2SHB 1819** - S COMM AMD

By Committee on Human Services, Mental Health & Housing

**NOT CONSIDERED 04/06/2017**

1 Strike everything after the enacting clause and insert the  
2 following:

3 "NEW SECTION. **Sec. 1.** The legislature finds that a prioritized  
4 recommendation of the children's mental health work group, as  
5 reported in December 2016, is to reduce burdensome and duplicative  
6 paperwork requirements for providers of children's mental health  
7 services. This recommendation is consistent with the recommendations  
8 of the behavioral health workforce assessment of the workforce  
9 training and education coordinating board to reduce time-consuming  
10 documentation requirements and the behavioral and primary health  
11 regulatory alignment task force to streamline regulations and reduce  
12 the time spent responding to inefficient and excessive audits.

13 The legislature further finds that duplicative and overly  
14 prescriptive documentation and audit requirements negatively impact  
15 the adequacy of the provider network by reducing workforce morale and  
16 limiting the time available for patient care. Such requirements  
17 create costly barriers to the efficient provision of services for  
18 children and their families. The legislature also finds that current  
19 state regulations are often duplicative or conflicting with research-  
20 based models and other state-mandated treatment models intended to  
21 improve the quality of services and ensure positive outcomes. These  
22 barriers can be reduced while creating a greater emphasis on quality,  
23 outcomes, and safety.

24 The legislature further finds that social workers serving  
25 children are encumbered by burdensome paperwork requirements which  
26 can interfere with the effective delivery of services.

27 Therefore, the legislature intends to require the department of  
28 social and health services to take steps to reduce paperwork,  
29 documentation, and audit requirements that are inefficient or  
30 duplicative for social workers who serve children and for providers  
31 of mental health services to children and families, and to encourage

1 the use of effective treatment models to improve the quality of  
2 services.

3 NEW SECTION. **Sec. 2.** A new section is added to chapter 71.24  
4 RCW to read as follows:

5 (1) Subject to the availability of amounts appropriated for this  
6 specific purpose, rules adopted by the department relating to the  
7 provision of behavioral health services must:

8 (a) Limit prescriptive requirements for individual initial  
9 assessments to allow clinicians to exercise professional judgment to  
10 conduct age-appropriate, strength-based psychosocial assessments,  
11 including current needs and relevant history according to current  
12 best practices;

13 (b) By February 1, 2018, provide a single set of regulations for  
14 agencies to follow that provide mental health, substance use  
15 disorder, and co-occurring treatment services;

16 (c) Exempt providers from state documentation requirements when  
17 the provider is following documentation requirements of an evidence-  
18 based, research-based, or state-mandated program which provides  
19 adequate protection for patient safety; and

20 (d) Be clear and not unduly burdensome in order to maximize the  
21 time available for the provision of care.

22 (2) Subject to the availability of amounts appropriated for this  
23 specific purpose, audits conducted by the department relating to  
24 provision of behavioral health services must:

25 (a) Rely on a sampling methodology to conduct reviews of  
26 personnel files and clinical records based on written guidelines  
27 established by the department that are consistent with the standards  
28 of other licensing and accrediting bodies;

29 (b) Treat organizations with multiple locations as a single  
30 entity. The department must not require annual visits at all  
31 locations operated by a single entity when a sample of records may be  
32 reviewed from a centralized location;

33 (c) Share audit results with behavioral health organizations to  
34 assist with their review process and, when appropriate, take steps to  
35 coordinate and combine audit activities;

36 (d) Coordinate audit functions between the department and the  
37 department of health to combine audit activities into a single site  
38 visit and eliminate redundancies;

1 (e) Not require information to be provided in particular  
2 documents or locations when the same information is included or  
3 demonstrated elsewhere in the clinical file, except where required by  
4 federal law; and

5 (f) Ensure that audits involving manualized programs such as  
6 wraparound with intensive services or other evidence or research-  
7 based programs are conducted to the extent practicable by personnel  
8 familiar with the program model and in a manner consistent with the  
9 documentation requirements of the program.

10 NEW SECTION. **Sec. 3.** (1) Subject to the availability of amounts  
11 appropriated for this specific purpose, the department of social and  
12 health services must immediately perform a review of casework  
13 documentation and paperwork requirements for social workers with the  
14 children's administration who provide services to children. The  
15 review must identify areas in which duplicative or inefficient  
16 documentation and paperwork requirements can be eliminated or  
17 streamlined in order to allow social workers to spend greater amounts  
18 of time and attention on direct services to children and their  
19 families. The department must complete the review by November 1,  
20 2017. Upon completion of the review, the department must take  
21 immediate steps to amend department rules and procedures accordingly.

22 (2) This section expires December 31, 2018."

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23 On page 1, line 3 of the title, after "families;" strike the  
24 remainder of the title and insert "adding a new section to chapter  
25 71.24 RCW; creating new sections; and providing an expiration date."

EFFECT: Replaces bill with the contents of 2SSB 5749, as follows:  
(1) Subject to funds appropriated for this purpose, DSHS must  
amend its rules to:  
(a) Limit the prescriptive requirements for individual initial  
assessments to allow clinicians to exercise professional judgment to  
conduct age-appropriate, strength-based psychosocial assessments,  
including current needs and relevant history, according to current  
best practices;  
(b) Provide a single set of regulations for agencies to follow  
that provide mental health, substance use disorder, and co-occurring  
treatment services by February 1, 2018; and

(c) Be clear and not unduly burdensome in order to maximize the time available for provision of care.

(2) Subject to funds appropriated for this purpose, audits conducted by DSHS must:

(a) Rely on a sampling methodology to conduct reviews of personnel files and clinical records based on written guidelines established by DSHS that are consistent with the standards of other licensing and accrediting bodies;

(b) Treat organizations with multiple locations as a single entity, and not require annual visits at all locations operated by a single entity when a sample of records may be reviewed from a centralized location;

(c) Share audit results with BHOs to assist with their review process and, where appropriate, take steps to coordinate and combine audit activities;

(d) Coordinate audit functions between DSHS and DOH to combine audit activities to a single site visit and eliminate redundancies;

(e) Not require information to be provided in particular documents or locations when the same information is included or demonstrated elsewhere in the clinical file, except where required by federal law; and

(f) Ensure that audits involving manualized programs such as WISe or other evidence or research-based programs are conducted to the extent practicable by personnel familiar with the program model and in a manner consistent with the documentation requirements of the program.

(3) Subject to funds appropriated for this purpose, DSHS must immediately review its casework and documentation requirements for social workers with the Children's Administration who provide services to children. The review must identify areas in which duplicative or inefficient documentation and paperwork requirements can be eliminated or streamlined in order to allow social workers to spend greater amounts of time and attention on direct services to children and their families. DSHS must complete the review by November 1, 2017, and take immediate steps to amend its rules and procedures.

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