

# SENATE BILL REPORT

## SB 6452

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As Reported by Senate Committee On:  
Human Services & Corrections, January 24, 2018  
Ways & Means, February 6, 2018

**Title:** An act relating to expanding the activities of the children's mental health services consultation program.

**Brief Description:** Expanding the activities of the children's mental health services consultation program.

**Sponsors:** Senators Brown, Frockt, Carlyle, O'Ban, Walsh, Darneille, Miloscia, Kuderer and Saldaña.

**Brief History:**

**Committee Activity:** Human Services & Corrections: 1/17/18, 1/24/18 [DP-WM].  
Ways & Means: 1/31/18, 2/06/18 [DPS].

**Brief Summary of First Substitute Bill**

- Establishes the Partnership Access Line (PAL) for Moms and Kids two-year pilot program to expand the activities of PAL to include support for health care professionals who provide care to pregnant women and new mothers, and assist parents or guardians with making mental health service connections.
- Requires Health Care Authority (HCA) to collaborate with University of Washington and Seattle Children's Hospital to provide annual reporting pilot outcomes.
- Requires HCA to enforce network adequacy and care coordination requirements in managed care contracts.

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### SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

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

Signed by Senators Darneille, Chair; Dhingra, Vice Chair; O'Ban, Ranking Member; Carlyle, Frockt, Miloscia and Walsh.

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

**Staff:** Keri Waterland (786-7490)

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## SENATE COMMITTEE ON WAYS & MEANS

**Majority Report:** That Substitute Senate Bill No. 6452 be substituted therefor, and the substitute bill do pass.

Signed by Senators Rolfes, Chair; Frockt, Vice Chair; Braun, Ranking Member; Bailey, Becker, Billig, Brown, Carlyle, Conway, Darneille, Fain, Hasegawa, Hunt, Keiser, Mullet, Palumbo, Pedersen, Ranker, Rivers, Schoesler, Van De Wege, Wagoner and Warnick.

**Staff:** Sandy Stith (786-7710)

**Background:** The PAL is a telephone-based child mental health consultation system for primary care providers. PAL is staffed by child psychiatrists affiliated with the University of Washington and Seattle Children's Hospital to deliver its consultation services. PAL has a master's-level social worker that assists with finding mental health resources for patients with any type of insurance—state, private or no insurance. PAL is available to primary care doctors, nurse practitioners and physician assistants throughout the state of Washington.

PAL provides rapid consultation responses during business hours for any type of mental health issue relevant to a minor patient. PAL supports primary care providers—doctors, nurse practitioners and physician assistants with questions about mental health care such as diagnostic clarification, medication adjustment, or treatment planning. Child and adolescent psychiatrists are available to consult during business hours. PAL is available to providers caring for any patient in Washington; the consultation program is funded by the Legislature through the HCA.

**Summary of Bill (First Substitute):** To the extent that funds are specifically appropriated for this purpose, HCA must collaborate with the University of Washington Department of Psychiatry and Behavioral Sciences and Seattle Children's Hospital to implement a two-year PAL pilot program for Moms and Kids.

PAL for Moms and Kids must provide support for obstetricians, pediatricians, primary care providers, mental health professionals, and other health care professionals who provide care to pregnant women and new mothers through same-day telephone consultations in the assessment and provision of appropriate diagnosis and treatment of depression in pregnant women and new mothers.

PAL for Moms and Kids must facilitate referrals to children's mental health services and other resources for parents and guardians with concerns related to the mental health of the parent or guardian's child. Facilitation activities include:

- assessing the level of services needed by the child;
- identifying within seven days of receiving a call from a parent or guardian mental health professionals who are in-network with the child's health care coverage who are accepting new patients and taking appointments;
- coordinating contact between the parent or guardian and the mental health professional; and providing postreferral reviews to determine if the child has outstanding needs.

In conducting its referral activities, PAL for Moms and Kids must collaborate with existing databases and resources to identify in-network mental health professionals.

HCA, in collaboration with University of Washington and Seattle Children's Hospital must provide annual reporting of program outcomes.

HCA must enforce managed care contract requirements for network adequacy and care coordination to address barriers to access to mental health services.

**EFFECT OF CHANGES MADE BY WAYS & MEANS COMMITTEE (First Substitute):**

- Changes the PAL program for Moms and Kids to a two-year pilot.
- Requires HCA, in collaboration with University of Washington and Seattle Children's Hospital to provide annual reporting on program outcomes.
- Requires HCA to enforce network adequacy and care coordination requirements in managed care contracts with regard to mental health services.

**Appropriation:** None.

**Fiscal Note:** Available.

**Creates Committee/Commission/Task Force that includes Legislative members:** No.

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

**Staff Summary of Public Testimony on Original Bill (Human Services & Corrections):**

PRO: Mental health services are difficult to find. There was just another teen suicide and we need to do something about services. This system is difficult to navigate and there are many stories of families who need services but do not know where to turn. A provider called 15 different other providers for services and was turned down by all, imagine if this were a parent. The huge barrier is access. This program is borrowed from Massachusetts and England. This bill would add additional staff and team referral providers.

**Persons Testifying (Human Services & Corrections):** PRO: Senator Sharon Brown, Prime Sponsor; Laurie Lippold, Partners for Our Children; Seth Dawson, Washington State Psychiatric Association, Compass Health; Robert Hilt, UW/Seattle Childrens; Kristin Houser, Parent Member, Children's Mental Health Work Group; Ruth Conn, Washington Chapter of the American Academy of Pediatrics.

**Persons Signed In To Testify But Not Testifying (Human Services & Corrections):** No one.

**Staff Summary of Public Testimony on Original Bill (Ways & Means):** *The committee recommended a different version of the bill than what was heard.*

PRO: This program began in 2008 as an immediate consultation to all providers in the state for child mental health concerns. This would expand the program for pregnant women and new moms and add a

robust referral process. This makes significant additions. This is about access to services and connecting people to services in their community. The needs of children's mental health is under-addressed. If we do not help children with mental health issues, there will be repercussions, both in fiscal and human costs. Prevention matters. If you cannot access mental health care after a suicide attempt, the cost is very high, both emotionally and fiscally. You can put a child back together physically, but you cannot prevent a relapse without follow-up mental health services. We support referral services. We spend half of our funds for children for 5 percent of our services. Forty-nine percent of kids in emergency rooms need mental health services. Low cost services work. Consider the costs of not getting early intervention work. People do not get the care they need because of the obstacles to getting the services. Then we end up spending more in money and human suffering.

OTHER: We have identified an issue. We are in support and want to help work to perfect this legislation. Last year HB 1713 required managed care organizations to do something similar. We think there is a potential for duplication. We want to make sure we do not have overlap.

**Persons Testifying (Ways & Means):** PRO: Senator Sharon Brown, Prime Sponsor; Seth Dawson, Washington State Psychiatric Association; Washington Association for Children & Families; Laurie Lippold, Partners for Our Children; Bob Hilt, Seattle Childrens' Hospital, UW Medicine; Crystal Shen, Washington Chapter of the American Academy of Pediatrics; Kristin Houser, citizen.

OTHER: Dave Knutson, Community Health Plan of Washington.

**Persons Signed In To Testify But Not Testifying (Ways & Means):** No one.