HOUSE BILL 2572

2018 Regular Session State of Washington 65th Legislature

By Representatives Cody, Macri, Jinkins, Kagi, Wylie, Slatter, Tharinger, Ormsby, and Robinson

Read first time 01/10/18. Referred to Committee on Health Care & Wellness.

- AN ACT Relating to removing health coverage barriers to accessing 1 2 substance use disorder treatment services; adding a new section to 3 chapter 41.05 RCW; adding a new section to chapter 48.43 RCW; adding 4
- a new section to chapter 71.24 RCW; and creating a new section.
- BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON: 5
- 6 <u>NEW SECTION.</u> **Sec. 1.** (1) The legislature finds that:
- 7 Substance use disorders are on the rise in Washington, (a) affecting victims, families, and communities throughout the state; 8
- (b) Access to effective treatment is a necessary component to 9 10 helping individuals recover from substance use disorders; and
- 11 (c) When individuals are ready for treatment, they should be able to obtain it with minimal barriers relating to health care coverage. 12
- 13 (2) The legislature therefore intends to ensure that there is no 14 wrong door for individuals accessing substance use disorder treatment services by requiring coverage, and prohibiting prior authorization, 15 for certain substance use disorder treatment services. 16
- 17 NEW SECTION. Sec. 2. A new section is added to chapter 41.05 RCW to read as follows: 18
- 19 (1) A health plan offered to employees and their covered dependents under this chapter issued or renewed on or after the 20

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- effective date of this section may not require an enrollee to obtain prior authorization for substance use disorder treatment if the provider is licensed under Title 18 RCW and the treatment is within the provider's scope of practice.
- (2) A health plan offered to employees and their covered dependents under this chapter issued or renewed on or after the effective date of this section must provide coverage for the following services for up to a total of fourteen days: Medically necessary acute treatment services and medically necessary clinical stabilization services. The health plan may not require an enrollee to obtain prior authorization for medically necessary acute treatment services or medically necessary clinical stabilization services. The facility providing the services shall provide the health plan both notification of admission and the initial treatment plan within forty-eight hours of admission. The health plan may initiate utilization review procedures on the seventh day after admission.
- (3) For purposes of this section, medical necessity must be determined by the treating provider in consultation with the patient and must be noted in the patient's medical record.
 - (4) For purposes of this section:

- (a) "Acute treatment services" means twenty-four hour medically supervised addiction treatment for adults or adolescents provided in a medically managed or medically monitored inpatient facility that provides evaluation and withdrawal management. "Acute treatment services" includes biopsychosocial assessment, individual and group counseling, psychoeducational groups, and discharge planning.
- (b) "Clinical stabilization services" means twenty-four hour clinically managed post detoxification treatment for adults or adolescents, usually following acute treatment services for substance abuse. "Clinical stabilization services" includes intensive education and counseling regarding the nature of substance use disorder and its consequences, relapse prevention, outreach to families and significant others, and aftercare planning, for individuals beginning to engage in recovery from a substance use disorder.
- (c) "Substance use disorder treatment" means: Early intervention services for substance use disorder treatment; substance use disorder evaluation; outpatient services, including medically assisted therapies; intensive outpatient and partial hospitalization services; residential or inpatient services other than acute treatment services or clinical stabilization services; and medically managed intensive

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- 1 inpatient services other than acute treatment services or clinical
- 2 stabilization services.

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- 3 <u>NEW SECTION.</u> **Sec. 3.** A new section is added to chapter 48.43 4 RCW to read as follows:
 - (1) A health plan issued or renewed on or after the effective date of this section may not require an enrollee to obtain prior authorization for substance use disorder treatment if the provider is licensed under Title 18 RCW and the treatment is within the provider's scope of practice.
 - (2) A health plan issued or renewed on or after the effective date of this section must provide coverage for the following services for up to a total of fourteen days: Medically necessary acute treatment services and medically necessary clinical stabilization services. The health plan may not require an enrollee to obtain prior authorization for medically necessary acute treatment services or medically necessary clinical stabilization services. The facility providing the services shall provide the health plan both notification of admission and the initial treatment plan within forty-eight hours of admission. The health plan may initiate utilization review procedures on the seventh day after admission.
- 21 (3) For purposes of this section, medical necessity must be 22 determined by the treating provider in consultation with the patient 23 and must be noted in the patient's medical record.
 - (4) For purposes of this section:
 - (a) "Acute treatment services" means twenty-four hour medically supervised addiction treatment for adults or adolescents provided in a medically managed or medically monitored inpatient facility that provides evaluation and withdrawal management. "Acute treatment services" includes biopsychosocial assessment, individual and group counseling, psychoeducational groups, and discharge planning.
 - (b) "Clinical stabilization services" means twenty-four hour clinically managed post detoxification treatment for adults or adolescents, usually following acute treatment services for substance abuse. "Clinical stabilization services" includes intensive education and counseling regarding the nature of substance use disorder and its consequences, relapse prevention, outreach to families and significant others, and aftercare planning, for individuals beginning to engage in recovery from a substance use disorder.

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- (c) "Substance use disorder treatment" means: Early intervention services for substance use disorder treatment; substance use disorder evaluation; outpatient services, including medically assisted therapies; intensive outpatient and partial hospitalization services; residential or inpatient services other than acute treatment services or clinical stabilization services; and medically managed intensive inpatient services other than acute treatment services or clinical stabilization services.
- 9 <u>NEW SECTION.</u> **Sec. 4.** A new section is added to chapter 71.24 10 RCW to read as follows:
 - (1) Beginning January 1, 2019, a behavioral health organization may not require an enrollee to obtain prior authorization for substance use disorder treatment if the provider is licensed under Title 18 RCW and the treatment is within the provider's scope of practice.
 - (2) Beginning January 1, 2019, a behavioral health organization must provide coverage for the following services for up to a total of fourteen days: Medically necessary acute treatment services and medically necessary clinical stabilization services. The behavioral health organization may not require an enrollee to obtain prior authorization for medically necessary acute treatment services or medically necessary clinical stabilization services. The facility providing the services shall provide the behavioral health organization both notification of admission and the initial treatment plan within forty-eight hours of admission. The behavioral health organization may initiate utilization review procedures on the seventh day after admission.
 - (3) For purposes of this section, medical necessity must be determined by the treating provider in consultation with the patient and must be noted in the patient's medical record.
 - (4) For purposes of this section:

- (a) "Acute treatment services" means twenty-four hour medically supervised addiction treatment for adults or adolescents provided in a medically managed or medically monitored inpatient facility that provides evaluation and withdrawal management. "Acute treatment services" includes biopsychosocial assessment, individual and group counseling, psychoeducational groups, and discharge planning.
- 38 (b) "Clinical stabilization services" means twenty-four hour 39 clinically managed post detoxification treatment for adults or

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adolescents, usually following acute treatment services for substance abuse. "Clinical stabilization services" includes intensive education and counseling regarding the nature of substance use disorder and its consequences, relapse prevention, outreach to families and significant others, and aftercare planning, for individuals beginning to engage in recovery from a substance use disorder.

(c) "Substance use disorder treatment" means: Early intervention services for substance use disorder treatment; substance use disorder evaluation; outpatient services, including medically assisted therapies; intensive outpatient and partial hospitalization services; residential or inpatient services other than acute treatment services or clinical stabilization services; and medically managed intensive inpatient services other than acute treatment services or clinical stabilization services.

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