FINAL BILL REPORT 2SHB 2737

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Synopsis as Enacted

Brief Description: Updating the children's mental health work group.

Sponsors: House Committee on Appropriations (originally sponsored by Representatives Callan, Dent, Frame, Stonier, Eslick, Lovick, Entenman, Senn, Caldier, Davis, Leavitt, Bergquist, Goodman, Riccelli and Chambers).

House Committee on Human Services & Early Learning
House Committee on Appropriations
Senate Committee on Health & Long Term Care
Senate Committee on Behavioral Health Subcommittee to Health & Long Term Care
Senate Committee on Ways & Means

Background:

Children's Mental Health Work Group.

The Children's Mental Health Work Group (Work Group) was established in 2016 and reauthorized in 2018 to identify barriers to accessing mental health services for children and families, and to advise the Legislature on statewide mental health services for this population. The Health Care Authority provides the primary staff support to the Work Group. The Work Group expires in December 2020.

Family, Youth, and System Partner Roundtables.

In 2009 the *T.R. v. Strange and McDermott* lawsuit was filed against the state on grounds relating to intensive mental health services for children enrolled in Medicaid. A settlement agreement was reached in 2013. The terms of the settlement include the establishment of an interagency governance structure to improve the coordination of and access to services for youth and their families. This governance structure requires Family, Youth, and System Partner Round Tables (FYSPRTs) at the state and regional levels. The FYSPRTs are comprised of family and youth, government, and tribal partners, and are tasked with identifying local needs and bringing forward recommendations on how to meet those needs.

Behavioral Health Coordination by Educational Service Districts.

The Office of the Superintendent of Public Instruction (OSPI) must establish a State School Safety Center (state center), and educational service districts must establish Regional School

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Safety Centers (regional centers) in order to form a network to coordinate school safety efforts. The state center must work with the regional centers to provide school districts with:

- behavioral health coordination;
- school-based threat assessments:
- training and technical assistance; and
- partnership development and collaboration.

Summary:

The Work Group is renamed as the Children and Youth Behavioral Health Work Group (CYBHWG), and the duties of the group are amended to require:

- monitoring mood, anxiety, and substance use disorder prevention, screening, diagnosis, and treatment for children and young mothers;
- determining strategies and resources needed to:
 - improve inpatient and outpatient access to behavioral health services;
 - support the unique needs of young children prenatally through age 5;
 - develop system improvements to support the behavioral health needs of children and youth; and
- consider issues and recommendations put forward by the statewide FYSPRT.

Membership of the CYBHWG is changed to modify the parent representatives to require one of the two parents to have a child under age 6, and add:

- one representative of an organization representing the interests of individuals with developmental disabilities;
- two youth representatives who have received behavioral health services;
- one representative of a private insurance organization;
- one representative from the statewide FYSPRT; and
- one substance use disorder professional.

An advisory group focused on school-based behavioral health and suicide prevention is established to advise the CYBHWG on creating and maintaining an integrated system of care through a tiered support framework for K-12 school systems. The CYBHWG co-chairs may invite non-work group members to participate as advisory group members. Staff support for the advisory group must be provided by the OSPI, subject to funds appropriated.

The CYBHWG must provide annual recommendations to the Governor and the Legislature beginning November 1, 2020. The CYBHWG expires December 30, 2026.

Votes on Final Passage:

House 98 0

Senate 49 0 (Senate amended) House 97 0 (House concurred)

Effective: June 11, 2020