FINAL BILL REPORT 2SSB 5903

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Synopsis as Enacted

Brief Description: Concerning children's mental health.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Darneille, Warnick, Das, Nguyen and O'Ban).

Senate Committee on Health & Long Term Care

Senate Committee on Behavioral Health Subcommittee to Health & Long Term Care

Senate Committee on Ways & Means

House Committee on Human Services & Early Learning

House Committee on Appropriations

Background: The Children's Mental Health Work Group (CMHWG) was established in 2016 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 CMHWG expires in December 2020.

Psychiatry Residencies. The Accreditation Council for Graduate Medical Education accredits medical education and residency programs and associated sponsoring institutions. The University of Washington (UW) Child and Adolescent Psychiatry Residency Program based at Seattle Children's Hospital and the Providence Psychiatry Residency located at the Spokane Teaching Health Clinic on the Washington State University (WSU) Spokane campus are psychiatry residency programs. Legislation enacted in 2017 and 2018 required the UW and WSU to each offer a 24-month residency position to a resident specializing in child and adolescent psychiatry. Each residency must include a minimum of 12 months of training in settings where children's mental health services are provided under the supervision of experienced psychiatric consultants. The UW residency must be located in western Washington, and WSU residency must be located in eastern Washington. The UW residency requirement becomes effective July 1, 2020.

Coordinated Specialty Care. The National Institute for Mental Health describes coordinated specialty care (CSC) as a recovery-oriented treatment program for individuals experiencing first-episode psychosis. CSC is a shared decision-making approach using a team of specialists who work together to develop a patient's treatment plan. Psychosis describes conditions that affect the mind where there has been some loss of contact with reality and often begins in adolescence or early adulthood.

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.

<u>Early Achievers Program.</u> The Early Achievers Program is administered by the Department of Children, Youth, and Families (DCYF) which provides a quality rating to participating early care providers based on the level of adoption and achievement of evidence-based practices and standards related to child development.

Summary: Legislative Findings. The Legislature finds:

- there is a workforce shortage, and increasing Medicaid rates to a level equal to Medicare rates will increase the number of providers who will serve children and families on Medicaid; and
- there is a need to increase the cultural and linguistic diversity among children's behavioral health professionals.

<u>Psychiatry Residencies.</u> Subject to funds appropriated, WSU and the UW must each offer one additional 24-month residency position to residents specializing in child and adolescent psychiatry. The WSU residency must be located in eastern Washington, effective July 1, 2020, and the UW residency must be located in western Washington, effective July 1, 2022. The minimum amount of training for these psychiatric residency programs is increased from 12 to 18 months.

Early Identification and Intervention for Psychosis. The Health Care Authority must collaborate with UW and the Washington Council on Behavioral Health to develop a statewide plan to implement evidence-based CSC programs that provide early identification and intervention for psychosis in licensed or certified community behavioral health agencies. The plan is due to the Governor and the Legislature by March 1, 2020, and must include an analysis of existing benefit packages, payment rates, and resource gaps, including needs for non-Medicaid resources; development of a discrete benefit package and case rate for CSC; identification of costs for statewide start-up, training, and community outreach; determination of the number of CSC teams needed in each regional service area; and a timeline for statewide implementation.

<u>Professional Learning Days.</u> School districts must use one of their professional learning days, starting in the 2020-21 school year, and every other year thereafter, to train district staff in one or more of the following topics: social-emotional learning, trauma-informed practices, recognition and response to emotional or behavioral distress, consideration of adverse childhood experiences, mental health literacy, antibullying strategies, or culturally sustaining practices.

<u>Early Achievers Program Consultation.</u> DCYF must contract with an organization providing coaching services to Early Achievers Program participants to provide one qualified mental health consultant in each of six regions designated by DCYF to support the work of coaches and child care providers in areas including challenging behavior, expulsions, and children with severe behavioral needs. DCYF must report on services provided and outcomes of consultant activities to the Governor and Legislature by June 30, 2021.

<u>Children's Mental Health Work Group.</u> The CMHWG is directed to form an advisory group to develop a funding model by December 1, 2019, for expansion of the Partnership Access Line to include additional client groups.

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Votes on Final Passage:

Senate 47 0

House 87 9 (House amended) Senate 48 1 (Senate concurred)

Effective: July 28, 2019

July 1, 2020 (Section 4) July 1, 2022 (Section 5)

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