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**SENATE BILL 6469**

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**State of Washington**

**66th Legislature**

**2020 Regular Session**

**By** Senators Randall, O'Ban, Nguyen, Hasegawa, Saldaña, and Wilson, C.

Read first time 01/17/20. Referred to Committee on Health & Long Term Care.

1 AN ACT Relating to improving access to behavioral health  
2 treatment in certified crisis facilities; amending RCW 71.05.750,  
3 71.05.755, 71.24.045, and 71.24.490; reenacting and amending RCW  
4 71.05.020 and 71.24.037; adding new sections to chapter 71.05 RCW;  
5 and creating a new section.

6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

7 NEW SECTION. **Sec. 1.** Involuntary treatment is a safety net  
8 service for adults and children experiencing a behavioral health  
9 crisis in Washington, some of whom experience anosognosia, a  
10 condition in which a person is unaware of having a brain disease.  
11 Washington law requires managed care organizations and behavioral  
12 health administrative services organizations to provide an adequate  
13 network of involuntary treatment services under RCW 71.24.045 and  
14 71.24.490. This safety net is undermined when facilities decline to  
15 admit certain persons despite having certified treatment capacity  
16 available. This legislation provides a means to collect information  
17 about why persons in crisis are denied admission into facilities with  
18 available capacity, a means for managed care organizations and  
19 behavioral health administrative services organizations to support  
20 placement efforts for persons in crisis, and a means to support  
21 evaluation and treatment facilities and secure withdrawal management

1 and stabilization facilities by ensuring they have access to  
2 resources necessary to treat persons with co-occurring disorders.

3 NEW SECTION. **Sec. 2.** A new section is added to chapter 71.05  
4 RCW to read as follows:

5 (1) An evaluation and treatment facility or secure withdrawal  
6 management and stabilization facility that has treatment capacity  
7 available shall admit a person who has been detained for inpatient  
8 treatment at the request of the designated crisis responder unless:

9 (a) The person requires medical services not generally available  
10 at a facility certified under this chapter;

11 (b) A more appropriate facility exists to serve the specific  
12 needs of the person that has agreed to admit the person; or

13 (c) Unusual reasons specific to the person or to their prior  
14 relationship with the facility exist that make the facility unable to  
15 admit the person.

16 (2) An evaluation and treatment facility or secure withdrawal  
17 management and stabilization facility that has treatment capacity  
18 available shall admit a person who is receiving temporary services  
19 under a single bed certification upon application for transfer by the  
20 facility when the attending physician considers the person medically  
21 stable unless an exception under subsection (1) of this section  
22 applies.

23 (3) An evaluation and treatment facility or secure withdrawal  
24 management facility which declines to admit a person after receiving  
25 a request under subsection (1) or (2) of this section shall document  
26 receiving the request and the statutorily permitted reason for  
27 declining admission with a brief explanation in its records and  
28 immediately provide a copy to the designated crisis responder or  
29 facility providing services under a single bed certification. The  
30 facility must provide an admission determination to a designated  
31 crisis responder relating to a person being held for initial  
32 evaluation under RCW 71.05.050 or 71.05.153 within two hours of  
33 receiving the request for admission.

34 NEW SECTION. **Sec. 3.** A new section is added to chapter 71.05  
35 RCW to read as follows:

36 (1) When a designated crisis responder or a facility providing  
37 services under a single bed certification seeking to transfer the  
38 patient to a certified facility determines that they are unable to

1 find a placement for a person who meets the criteria for detention or  
2 is detained for treatment, and the designated crisis responder or  
3 facility has obtained at least two denials of admission under section  
4 2 of this act, the designated crisis responder or facility shall:

5 (a) Immediately transmit notification to the managed care  
6 organization responsible for the cost of the person's care, or if not  
7 enrolled in a managed care organization the behavioral health  
8 administrative services organization, in the manner prescribed by the  
9 organization, of the need for emergency intervention to secure access  
10 to crisis services for the person; and

11 (b) Concurrently share with the managed care organization or  
12 behavioral health administrative services organization any  
13 documentation received from facilities that declined admission to the  
14 person under section 2 of this act. The designated crisis responder  
15 or facility is not required to wait to provide notification until  
16 receiving documentation.

17 (2) If the person is being held for initial evaluation under RCW  
18 71.05.050 or 71.05.153, upon notification under subsection (1) of  
19 this section, the person's initial evaluation hold shall be extended  
20 for an emergency period of up to twenty-four hours. The designated  
21 crisis responder shall serve notice of the emergency hold on the  
22 person. The person must be provided access to a mental health  
23 professional during this emergency period.

24 (3) A managed care organization or behavioral health  
25 administrative services organization that receives notice under  
26 subsection (1) of this section shall use its network and authority to  
27 obtain a placement or safe discharge for the person within the  
28 twenty-four hour emergency hold period. The managed care organization  
29 or behavioral health administrative services organization may  
30 negotiate directly with providers to obtain the services and support  
31 needed to obtain treatment services and may share information and  
32 coordinate with other public or private entities, if any, that  
33 provide coverage to the person. The designated crisis responder may  
34 collaborate with the managed care organization or behavioral health  
35 administrative services organization upon request. If the managed  
36 care organization or behavioral health administrative services  
37 organization is unable to obtain a placement or safe discharge for  
38 the person during the emergency hold period, the hold shall dissolve,  
39 and the managed care organization or behavioral health administrative  
40 services organization shall make a report under RCW 71.05.750.

1 (4) The managed care organization or behavioral health  
2 administrative services organization is responsible for the cost of  
3 care for the person during the twenty-four hour emergency hold  
4 period, unless coverage is provided by another entity.

5 **Sec. 4.** RCW 71.05.020 and 2019 c 446 s 2, 2019 c 444 s 16, and  
6 2019 c 325 s 3001 are each reenacted and amended to read as follows:

7 The definitions in this section apply throughout this chapter  
8 unless the context clearly requires otherwise.

9 (1) "Admission" or "admit" means a decision by a physician,  
10 physician assistant, or psychiatric advanced registered nurse  
11 practitioner that a person should be examined or treated as a patient  
12 in a hospital;

13 (2) "Alcoholism" means a disease, characterized by a dependency  
14 on alcoholic beverages, loss of control over the amount and  
15 circumstances of use, symptoms of tolerance, physiological or  
16 psychological withdrawal, or both, if use is reduced or discontinued,  
17 and impairment of health or disruption of social or economic  
18 functioning;

19 (3) "Antipsychotic medications" means that class of drugs  
20 primarily used to treat serious manifestations of mental illness  
21 associated with thought disorders, which includes, but is not limited  
22 to atypical antipsychotic medications;

23 (4) "Approved substance use disorder treatment program" means a  
24 program for persons with a substance use disorder provided by a  
25 treatment program certified by the department as meeting standards  
26 adopted under chapter 71.24 RCW;

27 (5) "Attending staff" means any person on the staff of a public  
28 or private agency having responsibility for the care and treatment of  
29 a patient;

30 (6) "Authority" means the Washington state health care authority;

31 (7) "Co-occurring disorder specialist" means an individual  
32 possessing an enhancement granted by the department of health under  
33 chapter 18.205 RCW that certifies the individual to provide substance  
34 use disorder counseling subject to the practice limitations under RCW  
35 18.205.105;

36 (8) "Commitment" means the determination by a court that a person  
37 should be detained for a period of either evaluation or treatment, or  
38 both, in an inpatient or a less restrictive setting;

1 (9) "Conditional release" means a revocable modification of a  
2 commitment, which may be revoked upon violation of any of its terms;

3 (10) "Crisis stabilization unit" means a short-term facility or a  
4 portion of a facility licensed or certified by the department, such  
5 as an evaluation and treatment facility or a hospital, which has been  
6 designed to assess, diagnose, and treat individuals experiencing an  
7 acute crisis without the use of long-term hospitalization;

8 (11) "Custody" means involuntary detention under the provisions  
9 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
10 unconditional release from commitment from a facility providing  
11 involuntary care and treatment;

12 (12) "Department" means the department of health;

13 (13) "Designated crisis responder" means a mental health  
14 professional appointed by the county or an entity appointed by the  
15 county, to perform the duties specified in this chapter;

16 (14) "Detention" or "detain" means the lawful confinement of a  
17 person, under the provisions of this chapter;

18 (15) "Developmental disabilities professional" means a person who  
19 has specialized training and three years of experience in directly  
20 treating or working with persons with developmental disabilities and  
21 is a psychiatrist, physician assistant working with a supervising  
22 psychiatrist, psychologist, psychiatric advanced registered nurse  
23 practitioner, or social worker, and such other developmental  
24 disabilities professionals as may be defined by rules adopted by the  
25 secretary of the department of social and health services;

26 (16) "Developmental disability" means that condition defined in  
27 RCW 71A.10.020(5);

28 (17) "Director" means the director of the authority;

29 (18) "Discharge" means the termination of hospital medical  
30 authority. The commitment may remain in place, be terminated, or be  
31 amended by court order;

32 (19) "Drug addiction" means a disease, characterized by a  
33 dependency on psychoactive chemicals, loss of control over the amount  
34 and circumstances of use, symptoms of tolerance, physiological or  
35 psychological withdrawal, or both, if use is reduced or discontinued,  
36 and impairment of health or disruption of social or economic  
37 functioning;

38 (20) "Evaluation and treatment facility" means any facility which  
39 can provide directly, or by direct arrangement with other public or  
40 private agencies, emergency evaluation and treatment, outpatient

1 care, and timely and appropriate inpatient care to persons suffering  
2 from a mental disorder, and which is licensed or certified as such by  
3 the department. The authority may certify single beds as temporary  
4 evaluation and treatment beds under RCW 71.05.745. Effective July 1,  
5 2021, an evaluation and treatment facility must provide medically  
6 necessary substance use disorder services to persons with a co-  
7 occurring substance use disorder. A physically separate and  
8 separately operated portion of a state hospital may be designated as  
9 an evaluation and treatment facility. A facility which is part of, or  
10 operated by, the department of social and health services or any  
11 federal agency will not require certification. No correctional  
12 institution or facility, or jail, shall be an evaluation and  
13 treatment facility within the meaning of this chapter;

14 (21) "Gravely disabled" means a condition in which a person, as a  
15 result of a mental disorder, or as a result of the use of alcohol or  
16 other psychoactive chemicals: (a) Is in danger of serious physical  
17 harm resulting from a failure to provide for his or her essential  
18 human needs of health or safety; or (b) manifests severe  
19 deterioration in routine functioning evidenced by repeated and  
20 escalating loss of cognitive or volitional control over his or her  
21 actions and is not receiving such care as is essential for his or her  
22 health or safety;

23 (22) "Habilitative services" means those services provided by  
24 program personnel to assist persons in acquiring and maintaining life  
25 skills and in raising their levels of physical, mental, social, and  
26 vocational functioning. Habilitative services include education,  
27 training for employment, and therapy. The habilitative process shall  
28 be undertaken with recognition of the risk to the public safety  
29 presented by the person being assisted as manifested by prior charged  
30 criminal conduct;

31 (23) "Hearing" means any proceeding conducted in open court. For  
32 purposes of this chapter, at any hearing the petitioner, the  
33 respondent, the witnesses, and the presiding judicial officer may be  
34 present and participate either in person or by video, as determined  
35 by the court. The term "video" as used herein shall include any  
36 functional equivalent. At any hearing conducted by video, the  
37 technology used must permit the judicial officer, counsel, all  
38 parties, and the witnesses to be able to see, hear, and speak, when  
39 authorized, during the hearing; to allow attorneys to use exhibits or  
40 other materials during the hearing; and to allow respondent's counsel

1 to be in the same location as the respondent unless otherwise  
2 requested by the respondent or the respondent's counsel. Witnesses in  
3 a proceeding may also appear in court through other means, including  
4 telephonically, pursuant to the requirements of superior court civil  
5 rule 43. Notwithstanding the foregoing, the court, upon its own  
6 motion or upon a motion for good cause by any party, may require all  
7 parties and witnesses to participate in the hearing in person rather  
8 than by video. In ruling on any such motion, the court may allow in-  
9 person or video testimony; and the court may consider, among other  
10 things, whether the respondent's alleged mental illness affects the  
11 respondent's ability to perceive or participate in the proceeding by  
12 video;

13 (24) "History of one or more violent acts" refers to the period  
14 of time ten years prior to the filing of a petition under this  
15 chapter, excluding any time spent, but not any violent acts  
16 committed, in a mental health facility, a long-term alcoholism or  
17 drug treatment facility, or in confinement as a result of a criminal  
18 conviction;

19 (25) "Imminent" means the state or condition of being likely to  
20 occur at any moment or near at hand, rather than distant or remote;

21 (26) "In need of assisted outpatient behavioral health treatment"  
22 means that a person, as a result of a mental disorder or substance  
23 use disorder: (a) Has been committed by a court to detention for  
24 involuntary behavioral health treatment during the preceding thirty-  
25 six months; (b) is unlikely to voluntarily participate in outpatient  
26 treatment without an order for less restrictive alternative  
27 treatment, based on a history of nonadherence with treatment or in  
28 view of the person's current behavior; (c) is likely to benefit from  
29 less restrictive alternative treatment; and (d) requires less  
30 restrictive alternative treatment to prevent a relapse,  
31 decompensation, or deterioration that is likely to result in the  
32 person presenting a likelihood of serious harm or the person becoming  
33 gravely disabled within a reasonably short period of time;

34 (27) "Individualized service plan" means a plan prepared by a  
35 developmental disabilities professional with other professionals as a  
36 team, for a person with developmental disabilities, which shall  
37 state:

38 (a) The nature of the person's specific problems, prior charged  
39 criminal behavior, and habilitation needs;

1 (b) The conditions and strategies necessary to achieve the  
2 purposes of habilitation;

3 (c) The intermediate and long-range goals of the habilitation  
4 program, with a projected timetable for the attainment;

5 (d) The rationale for using this plan of habilitation to achieve  
6 those intermediate and long-range goals;

7 (e) The staff responsible for carrying out the plan;

8 (f) Where relevant in light of past criminal behavior and due  
9 consideration for public safety, the criteria for proposed movement  
10 to less-restrictive settings, criteria for proposed eventual  
11 discharge or release, and a projected possible date for discharge or  
12 release; and

13 (g) The type of residence immediately anticipated for the person  
14 and possible future types of residences;

15 (28) "Information related to mental health services" means all  
16 information and records compiled, obtained, or maintained in the  
17 course of providing services to either voluntary or involuntary  
18 recipients of services by a mental health service provider. This may  
19 include documents of legal proceedings under this chapter or chapter  
20 71.34 or 10.77 RCW, or somatic health care information;

21 (29) "Intoxicated person" means a person whose mental or physical  
22 functioning is substantially impaired as a result of the use of  
23 alcohol or other psychoactive chemicals;

24 (30) "Judicial commitment" means a commitment by a court pursuant  
25 to the provisions of this chapter;

26 (31) "Legal counsel" means attorneys and staff employed by county  
27 prosecutor offices or the state attorney general acting in their  
28 capacity as legal representatives of public mental health and  
29 substance use disorder service providers under RCW 71.05.130;

30 (32) "Less restrictive alternative treatment" means a program of  
31 individualized treatment in a less restrictive setting than inpatient  
32 treatment that includes the services described in RCW 71.05.585;

33 (33) "Licensed physician" means a person licensed to practice  
34 medicine or osteopathic medicine and surgery in the state of  
35 Washington;

36 (34) "Likelihood of serious harm" means:

37 (a) A substantial risk that: (i) Physical harm will be inflicted  
38 by a person upon his or her own person, as evidenced by threats or  
39 attempts to commit suicide or inflict physical harm on oneself; (ii)  
40 physical harm will be inflicted by a person upon another, as



1 evidenced by behavior which has caused such harm or which places  
2 another person or persons in reasonable fear of sustaining such harm;  
3 or (iii) physical harm will be inflicted by a person upon the  
4 property of others, as evidenced by behavior which has caused  
5 substantial loss or damage to the property of others; or

6 (b) The person has threatened the physical safety of another and  
7 has a history of one or more violent acts;

8 (35) "Medical clearance" means a physician or other health care  
9 provider has determined that a person is medically stable and ready  
10 for referral to the designated crisis responder;

11 (36) "Mental disorder" means any organic, mental, or emotional  
12 impairment which has substantial adverse effects on a person's  
13 cognitive or volitional functions;

14 (37) "Mental health professional" means a psychiatrist,  
15 psychologist, physician assistant working with a supervising  
16 psychiatrist, psychiatric advanced registered nurse practitioner,  
17 psychiatric nurse, or social worker, and such other mental health  
18 professionals as may be defined by rules adopted by the secretary  
19 pursuant to the provisions of this chapter;

20 (38) "Mental health service provider" means a public or private  
21 agency that provides mental health services to persons with mental  
22 disorders or substance use disorders as defined under this section  
23 and receives funding from public sources. This includes, but is not  
24 limited to, hospitals licensed under chapter 70.41 RCW, evaluation  
25 and treatment facilities as defined in this section, community mental  
26 health service delivery systems or community behavioral health  
27 programs as defined in RCW 71.24.025, facilities conducting  
28 competency evaluations and restoration under chapter 10.77 RCW,  
29 approved substance use disorder treatment programs as defined in this  
30 section, secure withdrawal management and stabilization facilities as  
31 defined in this section, and correctional facilities operated by  
32 state and local governments;

33 (39) "Peace officer" means a law enforcement official of a public  
34 agency or governmental unit, and includes persons specifically given  
35 peace officer powers by any state law, local ordinance, or judicial  
36 order of appointment;

37 (40) "Physician assistant" means a person licensed as a physician  
38 assistant under chapter 18.57A or 18.71A RCW;

39 (41) "Private agency" means any person, partnership, corporation,  
40 or association that is not a public agency, whether or not financed

1 in whole or in part by public funds, which constitutes an evaluation  
2 and treatment facility or private institution, or hospital, or  
3 approved substance use disorder treatment program, which is conducted  
4 for, or includes a department or ward conducted for, the care and  
5 treatment of persons with mental illness, substance use disorders, or  
6 both mental illness and substance use disorders;

7 (42) "Professional person" means a mental health professional,  
8 substance use disorder professional, or designated crisis responder  
9 and shall also mean a physician, physician assistant, psychiatric  
10 advanced registered nurse practitioner, registered nurse, and such  
11 others as may be defined by rules adopted by the secretary pursuant  
12 to the provisions of this chapter;

13 (43) "Psychiatric advanced registered nurse practitioner" means a  
14 person who is licensed as an advanced registered nurse practitioner  
15 pursuant to chapter 18.79 RCW; and who is board certified in advanced  
16 practice psychiatric and mental health nursing;

17 (44) "Psychiatrist" means a person having a license as a  
18 physician and surgeon in this state who has in addition completed  
19 three years of graduate training in psychiatry in a program approved  
20 by the American medical association or the American osteopathic  
21 association and is certified or eligible to be certified by the  
22 American board of psychiatry and neurology;

23 (45) "Psychologist" means a person who has been licensed as a  
24 psychologist pursuant to chapter 18.83 RCW;

25 (46) "Public agency" means any evaluation and treatment facility  
26 or institution, secure withdrawal management and stabilization  
27 facility, approved substance use disorder treatment program, or  
28 hospital which is conducted for, or includes a department or ward  
29 conducted for, the care and treatment of persons with mental illness,  
30 substance use disorders, or both mental illness and substance use  
31 disorders, if the agency is operated directly by federal, state,  
32 county, or municipal government, or a combination of such  
33 governments;

34 (47) "Release" means legal termination of the commitment under  
35 the provisions of this chapter;

36 (48) "Resource management services" has the meaning given in  
37 chapter 71.24 RCW;

38 (49) "Secretary" means the secretary of the department of health,  
39 or his or her designee;

1 (50) "Secure withdrawal management and stabilization facility"  
2 means a facility operated by either a public or private agency or by  
3 the program of an agency which provides care to voluntary individuals  
4 and individuals involuntarily detained and committed under this  
5 chapter for whom there is a likelihood of serious harm or who are  
6 gravely disabled due to the presence of a substance use disorder.  
7 Secure withdrawal management and stabilization facilities must:

8 (a) Provide the following services:

9 (i) Assessment and treatment, provided by certified substance use  
10 disorder professionals or co-occurring disorder specialists;

11 (ii) Clinical stabilization services;

12 (iii) Acute or subacute detoxification services for intoxicated  
13 individuals;

14 (iv) Medically necessary mental health services to persons with a  
15 co-occurring mental health disorder, effective July 1, 2021; and

16 ~~((iv))~~ (v) Discharge assistance provided by certified substance  
17 use disorder professionals or co-occurring disorder specialists,  
18 including facilitating transitions to appropriate voluntary or  
19 involuntary inpatient services or to less restrictive alternatives as  
20 appropriate for the individual;

21 (b) Include security measures sufficient to protect the patients,  
22 staff, and community; and

23 (c) Be licensed or certified as such by the department of health;

24 (51) "Serious violent offense" has the same meaning as provided  
25 in RCW 9.94A.030;

26 (52) "Social worker" means a person with a master's or further  
27 advanced degree from a social work educational program accredited and  
28 approved as provided in RCW 18.320.010;

29 (53) "Substance use disorder" means a cluster of cognitive,  
30 behavioral, and physiological symptoms indicating that an individual  
31 continues using the substance despite significant substance-related  
32 problems. The diagnosis of a substance use disorder is based on a  
33 pathological pattern of behaviors related to the use of the  
34 substances;

35 (54) "Substance use disorder professional" means a person  
36 certified as a substance use disorder professional by the department  
37 of health under chapter 18.205 RCW;

38 (55) "Therapeutic court personnel" means the staff of a mental  
39 health court or other therapeutic court which has jurisdiction over  
40 defendants who are dually diagnosed with mental disorders, including

1 court personnel, probation officers, a court monitor, prosecuting  
2 attorney, or defense counsel acting within the scope of therapeutic  
3 court duties;

4 (56) "Treatment records" include registration and all other  
5 records concerning persons who are receiving or who at any time have  
6 received services for mental illness, which are maintained by the  
7 department of social and health services, the department, the  
8 authority, behavioral health administrative services organizations  
9 and their staffs, managed care organizations and their staffs, and by  
10 treatment facilities. Treatment records include mental health  
11 information contained in a medical bill including but not limited to  
12 mental health drugs, a mental health diagnosis, provider name, and  
13 dates of service stemming from a medical service. Treatment records  
14 do not include notes or records maintained for personal use by a  
15 person providing treatment services for the department of social and  
16 health services, the department, the authority, behavioral health  
17 administrative services organizations, managed care organizations, or  
18 a treatment facility if the notes or records are not available to  
19 others;

20 (57) "Triage facility" means a short-term facility or a portion  
21 of a facility licensed or certified by the department, which is  
22 designed as a facility to assess and stabilize an individual or  
23 determine the need for involuntary commitment of an individual, and  
24 must meet department residential treatment facility standards. A  
25 triage facility may be structured as a voluntary or involuntary  
26 placement facility;

27 (58) "Violent act" means behavior that resulted in homicide,  
28 attempted suicide, nonfatal injuries, or substantial damage to  
29 property.

30 (59) "Behavioral health administrative services organization"  
31 means an entity contracted with the authority to administer  
32 behavioral health services and programs under RCW 71.24.381,  
33 including crisis services and administration of this chapter, the  
34 involuntary treatment act, for all individuals in a defined regional  
35 service area.

36 (60) "Managed care organization" means an organization, having a  
37 certificate of authority or certificate of registration from the  
38 office of the insurance commissioner, that contracts with the  
39 authority under a comprehensive risk contract to provide prepaid

1 health care services to enrollees under the authority's managed care  
2 programs under chapter 74.09 RCW.

3 **Sec. 5.** RCW 71.05.750 and 2019 c 325 s 3013 are each amended to  
4 read as follows:

5 (1) A (~~designated crisis responder~~) managed care organization  
6 or behavioral health administrative services organization shall make  
7 a report to the authority when (~~he or she determines a person meets~~  
8 ~~detention criteria under RCW 71.05.150, 71.05.153, 71.34.700, or~~  
9 ~~71.34.710 and~~) after the expiration of a twenty-four hour emergency  
10 hold period under section 3 of this act and despite the efforts of  
11 the managed care organization or behavioral health administrative  
12 services organization to obtain a placement or safe discharge for the  
13 person there are not any beds available at an evaluation and  
14 treatment facility(~~, the person has not been provisionally accepted~~  
15 ~~for admission by a facility,~~) or secure withdrawal management and  
16 stabilization facility and the person cannot be served on a single  
17 bed certification or less restrictive alternative. (~~Starting at the~~  
18 ~~time when the designated crisis responder determines a person meets~~  
19 ~~detention criteria and the investigation has been completed, the~~  
20 ~~designated crisis responder~~) The managed care organization or  
21 behavioral health administrative services organization has twenty-  
22 four hours from the expiration of the twenty-four hour emergency  
23 period to submit a completed report to the authority.

24 (2) The report required under subsection (1) of this section must  
25 contain at a minimum:

26 (a) The date and time that the designated crisis responder  
27 investigation was completed;

28 (b) The identity of the responsible behavioral health  
29 administrative services organization and managed care organization(~~, if~~  
30 ~~applicable~~);

31 (c) The county in which the person met detention criteria;

32 (d) A list of facilities which (~~refused~~) declined to admit the  
33 person;

34 (e) A summary of the efforts undertaken by the managed care  
35 organization or behavioral health administrative services  
36 organization; and

37 (~~e~~) (f) Identifying information for the person, including age  
38 or date of birth.

1 (3) The authority shall develop a standardized reporting form or  
2 modify the current form used for single bed certifications for the  
3 report required under subsection (2) of this section and may require  
4 additional reporting elements as it determines are necessary or  
5 supportive. The authority shall also determine the method for the  
6 transmission of the completed report (~~from the designated crisis~~  
7 ~~responder~~) to the authority.

8 (4) The authority shall create quarterly reports displayed on its  
9 web site that summarize the information reported under subsection (2)  
10 of this section. At a minimum, the reports must display data by  
11 county and by month. The reports must also include the number of  
12 single bed certifications granted by category. The categories must  
13 include all of the reasons that the authority recognizes for issuing  
14 a single bed certification, as identified in rule.

15 (5) The reports provided according to this section may not  
16 display "protected health information" as that term is used in the  
17 federal health insurance portability and accountability act of 1996,  
18 nor information (~~contained in "mental health treatment records" as~~  
19 ~~that term is used in~~) prohibited from disclosure under chapter 70.02  
20 RCW or elsewhere in state law, and must otherwise be compliant with  
21 state and federal privacy laws.

22 (6) For purposes of this section, the term "single bed  
23 certification" means a situation in which an adult on a seventy-two  
24 hour detention, fourteen-day commitment, ninety-day commitment, or  
25 one hundred eighty-day commitment is detained to a facility that is:

26 (a) Not licensed or certified as an inpatient evaluation and  
27 treatment facility; or

28 (b) A licensed or certified inpatient evaluation and treatment  
29 facility that is already at capacity.

30 **Sec. 6.** RCW 71.05.755 and 2019 c 325 s 3014 are each amended to  
31 read as follows:

32 (1) (~~The authority shall promptly share reports it receives~~  
33 ~~under RCW 71.05.750 with the responsible behavioral health~~  
34 ~~administrative services organization or managed care organization, if~~  
35 ~~applicable. The~~) A behavioral health administrative services  
36 organization or managed care organization(~~, if applicable, receiving~~  
37 ~~this notification~~) that files a report under RCW 71.05.750 must  
38 continue to attempt to engage the person in appropriate services for

1 which the person is eligible and report back again within seven days  
2 to the authority.

3 (2) The authority shall track and analyze reports submitted under  
4 RCW 71.05.750. The authority must initiate corrective action when  
5 appropriate to ensure that each behavioral health administrative  
6 services organization or managed care organization(~~(,---if~~  
7 ~~applicable,~~)) has implemented an adequate network and plan to provide  
8 evaluation and treatment services. Corrective actions may include  
9 remedies under the authority's contract with such entity. An adequate  
10 plan may include development of less restrictive alternatives to  
11 involuntary commitment such as crisis triage, crisis diversion,  
12 voluntary treatment, or prevention programs reasonably calculated to  
13 reduce demand for evaluation and treatment under this chapter.

14 **Sec. 7.** RCW 71.24.037 and 2019 c 446 s 23 and 2019 c 325 s 1007  
15 are each reenacted and amended to read as follows:

16 (1) The secretary shall license or certify any agency or facility  
17 that: (a) Submits payment of the fee established under RCW 43.70.110  
18 and 43.70.250; (b) submits a complete application that demonstrates  
19 the ability to comply with requirements for operating and maintaining  
20 an agency or facility in statute or rule; and (c) successfully  
21 completes the prelicensure inspection requirement.

22 (2) The secretary shall establish by rule minimum standards for  
23 licensed or certified behavioral health agencies that must, at a  
24 minimum, establish: (a) Qualifications for staff providing services  
25 directly to persons with mental disorders, substance use disorders,  
26 or both; (b) the intended result of each service; and (c) the rights  
27 and responsibilities of persons receiving behavioral health services  
28 pursuant to this chapter and chapter 71.05 RCW. The secretary shall  
29 provide for deeming of licensed or certified behavioral health  
30 agencies as meeting state minimum standards as a result of  
31 accreditation by a recognized behavioral health accrediting body  
32 recognized and having a current agreement with the department.

33 (3) The department shall review reports or other information  
34 alleging a failure to comply with this chapter or the standards and  
35 rules adopted under this chapter and may initiate investigations and  
36 enforcement actions based on those reports.

37 (4) The department shall conduct inspections of agencies and  
38 facilities, including reviews of records and documents required to be  
39 maintained under this chapter or rules adopted under this chapter. In

1 the case of an evaluation and treatment facility or secure withdrawal  
2 management and stabilization facility under chapter 71.05 RCW, the  
3 inspection shall include records created under section 2 of this act  
4 and an analysis of means available, if any, to improve availability  
5 of services for persons in crisis, including the receipt of technical  
6 assistance from the department or other entities.

7 (5) The department may suspend, revoke, limit, restrict, or  
8 modify an approval, or refuse to grant approval, for failure to meet  
9 the provisions of this chapter, or the standards adopted under this  
10 chapter. RCW 43.70.115 governs notice of a license or certification  
11 denial, revocation, suspension, or modification and provides the  
12 right to an adjudicative proceeding.

13 (6) No licensed or certified behavioral health (~~service~~) agency  
14 or behavioral health provider may advertise or represent itself as a  
15 licensed or certified behavioral health (~~service~~) agency or  
16 behavioral health provider if approval has not been granted or has  
17 been denied, suspended, revoked, or canceled.

18 (7) Licensure or certification as a behavioral health (~~service~~)  
19 agency or behavioral health provider is effective for one calendar  
20 year from the date of issuance of the license or certification. The  
21 license or certification must specify the types of services provided  
22 by the behavioral health (~~service~~) agency or behavioral health  
23 provider that meet the standards adopted under this chapter. Renewal  
24 of a license or certification must be made in accordance with this  
25 section for initial approval and in accordance with the standards set  
26 forth in rules adopted by the secretary.

27 (8) Licensure or certification as a licensed or certified  
28 behavioral health (~~service~~) agency or behavioral health provider  
29 must specify the types of services provided that meet the standards  
30 adopted under this chapter. Renewal of a license or certification  
31 must be made in accordance with this section for initial approval and  
32 in accordance with the standards set forth in rules adopted by the  
33 secretary.

34 (9) The department shall develop a process by which a  
35 (~~provider~~) behavioral health agency may obtain dual licensure as an  
36 evaluation and treatment facility and secure withdrawal management  
37 and stabilization facility.

38 (10) Licensed or certified behavioral health (~~service~~) agencies  
39 or behavioral health providers may not provide types of services for  
40 which the licensed or certified behavioral health (~~service~~) agency



1 or behavioral health provider has not been certified. Licensed or  
2 certified behavioral health (~~(service)~~) agencies or behavioral health  
3 providers may provide services for which approval has been sought and  
4 is pending, if approval for the services has not been previously  
5 revoked or denied.

6 (11) The department periodically shall inspect licensed or  
7 certified behavioral health (~~(service—providers)~~) agencies at  
8 reasonable times and in a reasonable manner.

9 (12) Upon petition of the department and after a hearing held  
10 upon reasonable notice to the facility, the superior court may issue  
11 a warrant to an officer or employee of the department authorizing him  
12 or her to enter and inspect at reasonable times, and examine the  
13 books and accounts of, any licensed or certified behavioral health  
14 (~~(service—provider)~~) agency refusing to consent to inspection or  
15 examination by the department or which the department has reasonable  
16 cause to believe is operating in violation of this chapter.

17 (13) The department shall maintain and periodically publish a  
18 current list of licensed or certified behavioral health (~~(service)~~)  
19 agencies and behavioral health providers.

20 (14) Each licensed or certified behavioral health (~~(service~~  
21 ~~provider)~~) agency shall file with the department or the authority  
22 upon request, data, statistics, schedules, and information the  
23 department or the authority reasonably requires. A licensed or  
24 certified behavioral health (~~(service—provider)~~) agency that without  
25 good cause fails to furnish any data, statistics, schedules, or  
26 information as requested, or files fraudulent returns thereof, may  
27 have its license or certification revoked or suspended.

28 (15) The authority shall use the data provided in subsection (14)  
29 of this section to evaluate each program that admits children to  
30 inpatient substance use disorder treatment upon application of their  
31 parents. The evaluation must be done at least once every twelve  
32 months. In addition, the authority shall randomly select and review  
33 the information on individual children who are admitted on  
34 application of the child's parent for the purpose of determining  
35 whether the child was appropriately placed into substance use  
36 disorder treatment based on an objective evaluation of the child's  
37 condition and the outcome of the child's treatment.

38 (16) Any settlement agreement entered into between the department  
39 and a licensed or certified behavioral health (~~(service—providers)~~)  
40 agency to resolve administrative complaints, license or certification

1 violations, license or certification suspensions, or license or  
2 certification revocations may not reduce the number of violations  
3 reported by the department unless the department concludes, based on  
4 evidence gathered by inspectors, that the licensed or certified  
5 behavioral health ((~~service provider~~)) agency did not commit one or  
6 more of the violations.

7 (17) In cases in which a behavioral health ((~~service provider~~))  
8 agency that is in violation of licensing or certification standards  
9 attempts to transfer or sell the behavioral health ((~~service  
10 provider~~)) agency to a family member, the transfer or sale may only  
11 be made for the purpose of remedying license or certification  
12 violations and achieving full compliance with the terms of the  
13 license or certification. Transfers or sales to family members are  
14 prohibited in cases in which the purpose of the transfer or sale is  
15 to avoid liability or reset the number of license or certification  
16 violations found before the transfer or sale. If the department finds  
17 that the owner intends to transfer or sell, or has completed the  
18 transfer or sale of, ownership of the behavioral health ((~~service  
19 provider~~)) agency to a family member solely for the purpose of  
20 resetting the number of violations found before the transfer or sale,  
21 the department may not renew the behavioral health ((~~service  
22 provider's~~)) agency's license or certification or issue a new license  
23 or certification to the behavioral health ((~~service provider~~))  
24 agency.

25 **Sec. 8.** RCW 71.24.045 and 2019 c 325 s 1008 are each amended to  
26 read as follows:

27 (1) The behavioral health administrative services organization  
28 contracted with the authority pursuant to RCW 71.24.381 shall:

29 (a) Administer crisis services for the assigned regional service  
30 area. Such services must include:

31 (i) A behavioral health crisis hotline for its assigned regional  
32 service area;

33 (ii) Crisis response services twenty-four hours a day, seven days  
34 a week, three hundred sixty-five days a year;

35 (iii) Services related to involuntary commitments under chapters  
36 71.05 and 71.34 RCW;

37 (iv) Additional noncrisis behavioral health services, within  
38 available resources, to individuals who meet certain criteria set by  
39 the authority in its contracts with the behavioral health

1 administrative services organization. These services may include  
2 services provided through federal grant funds, provisos, and general  
3 fund state appropriations;

4 (v) Care coordination, diversion services, and discharge planning  
5 for nonmedicaid individuals transitioning from state hospitals or  
6 inpatient settings to reduce rehospitalization and utilization of  
7 crisis services, as required by the authority in contract; and

8 (vi) Regional coordination, cross-system and cross-jurisdiction  
9 coordination with tribal governments, and capacity building efforts,  
10 such as supporting the behavioral health advisory board, the  
11 behavioral health ombuds, and efforts to support access to services  
12 or to improve the behavioral health system;

13 (b) Administer and provide for the availability of an adequate  
14 network of evaluation and treatment services to ensure access to  
15 treatment, investigation, transportation, court-related, and other  
16 services provided as required under chapters 71.05 and 71.34 RCW;

17 (c) Provide emergency services and reporting under section 3 of  
18 this act and RCW 71.05.750, including providing for and publicizing a  
19 suitable means of receiving timely notification under section 3 of  
20 this act;

21 (d) Coordinate services for individuals under RCW 71.05.365;

22 (~~(d)~~) (e) Administer and provide for the availability of  
23 resource management services, residential services, and community  
24 support services as required under its contract with the authority;

25 (~~(e)~~) (f) Contract with a sufficient number, as determined by  
26 the authority, of licensed or certified providers for crisis services  
27 and other behavioral health services required by the authority;

28 (~~(f)~~) (g) Maintain adequate reserves or secure a bond as  
29 required by its contract with the authority;

30 (~~(g)~~) (h) Establish and maintain quality assurance processes;

31 (~~(h)~~) (i) Meet established limitations on administrative costs  
32 for agencies that contract with the behavioral health administrative  
33 services organization; and

34 (~~(i)~~) (j) Maintain patient tracking information as required by  
35 the authority.

36 (2) The behavioral health administrative services organization  
37 must collaborate with the authority and its contracted managed care  
38 organizations to develop and implement strategies to coordinate care  
39 with tribes and community behavioral health providers for individuals  
40 with a history of frequent crisis system utilization.

1 (3) The behavioral health administrative services organization  
2 shall:  
3 (a) Assure that the special needs of minorities, older adults,  
4 individuals with disabilities, children, and low-income persons are  
5 met;  
6 (b) Collaborate with local government entities to ensure that  
7 policies do not result in an adverse shift of persons with mental  
8 illness into state and local correctional facilities; and  
9 (c) Work with the authority to expedite the enrollment or  
10 reenrollment of eligible persons leaving state or local correctional  
11 facilities and institutions for mental diseases.

12 **Sec. 9.** RCW 71.24.490 and 2019 c 325 s 1032 are each amended to  
13 read as follows:

14 (1) The authority must collaborate with behavioral health  
15 administrative services organizations, managed care organizations,  
16 and the Washington state institute for public policy to estimate the  
17 capacity needs for evaluation and treatment services within each  
18 regional service area. Estimated capacity needs shall include  
19 consideration of the average occupancy rates needed to provide an  
20 adequate network of evaluation and treatment services to ensure  
21 access to treatment. Behavioral health administrative services  
22 organizations and managed care organizations must develop and  
23 maintain an adequate plan to provide for evaluation and treatment  
24 needs.

25 (2) A managed care organization must provide emergency services  
26 and reporting under section 3 of this act and RCW 71.05.750,  
27 including providing for and publicizing a suitable means of receiving  
28 timely notification under section 3 of this act.

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