

**E2SHB 1086** - S COMM AMD

By Subcommittee on Behavioral Health

**OUT OF ORDER 04/07/2021**

1 Strike everything after the enacting clause and insert the  
2 following:

3 "NEW SECTION. **Sec. 1.** (1) The legislature finds that:

4 (a) According to the federal substance abuse and mental health  
5 services administration's 2019 report, one in five adults in the  
6 United States will experience some form of mental illness this year  
7 and one in thirteen will need substance use disorder treatment;

8 (b) Fewer than half of all individuals needing behavioral health  
9 treatment receive those services;

10 (c) An untreated behavioral health need can have long-term  
11 negative impacts on an individual's health, well-being, and  
12 productivity;

13 (d) The state has made significant investments in the efficacy of  
14 the publicly funded behavioral health system and its providers;

15 (e) Behavioral health parity is required by both state and  
16 federal law;

17 (f) All patients deserve to be treated and cared for with dignity  
18 and respect;

19 (g) Patients often cross local and administrative boundaries when  
20 seeking effective behavioral health care;

21 (h) Individuals with behavioral health needs are  
22 disproportionately involved with the criminal justice system; and

23 (i) Providing robust community-based services can prevent  
24 expensive hospitalizations.

25 (2) The legislature intends to create the state office of the  
26 behavioral health consumer advocacy that shall:

27 (a) Advocate for all patients seeking privately and publicly  
28 funded behavioral health services;

29 (b) Advocate for all patients receiving inpatient behavioral  
30 health services from a behavioral health provider or facility;

1 (c) Assure that patients are afforded all of the rights given to  
2 them by state and federal laws;

3 (d) Maintain independence and be free from all conflicts of  
4 interest;

5 (e) Provide consistent quality services across the state; and

6 (f) Retain an office within the boundaries of the region served  
7 by each behavioral health administrative services organization.

8 NEW SECTION. **Sec. 2.** The definitions in this section apply  
9 throughout this chapter unless the context clearly requires  
10 otherwise.

11 (1) "Behavioral health provider or facility" means:

12 (a) A behavioral health provider, as defined in RCW 71.24.025, to  
13 the extent it provides behavioral health services;

14 (b) A licensed or certified behavioral health agency, as defined  
15 in RCW 71.24.025;

16 (c) A long-term care facility, as defined in RCW 43.190.020, in  
17 which adults or children with behavioral health conditions reside;

18 (d) A state hospital, as defined in RCW 72.23.010; or

19 (e) A facility or agency that receives funds from the state to  
20 provide behavioral health treatment services to adults or children  
21 with a behavioral health condition.

22 (2) "Contracting advocacy organization" means the organization  
23 selected by the office pursuant to section 3 of this act.

24 (3) "Department" means the department of commerce.

25 (4) "Office" means the state office of behavioral health consumer  
26 advocacy.

27 NEW SECTION. **Sec. 3.** (1) By July 1, 2022, the department shall  
28 establish the state office of behavioral health consumer advocacy to  
29 provide behavioral health consumer advocacy services to patients,  
30 residents, and clients of behavioral health providers or facilities.  
31 Prior to the establishment and operation of the office, the  
32 department shall solicit recommendations from members of the  
33 behavioral health community for options to rename the office and the  
34 certified behavioral health consumer advocates in a way that shows  
35 respect for the community that the office and the advocates serve.  
36 Prior to the office beginning operations, the department must rename  
37 the office and the certified behavioral health consumer advocates  
38 from the options proposed by the community. The department shall

1 contract with a private nonprofit organization to provide behavioral  
2 health consumer advocacy services, according to the standards  
3 established by the office. The department shall assure all program  
4 and staff support necessary to enable the contracting advocacy  
5 organization to effectively protect the interests of persons with  
6 behavioral health needs in accordance with this chapter. The  
7 department shall select the organization through a competitive  
8 bidding process and shall assure that the selected organization (a)  
9 has demonstrated financial stability and meets the qualifications for  
10 the duties identified in this chapter, and (b) does not have any  
11 conflicts of interest that would interfere with the duties identified  
12 in this chapter. The department shall encourage persons who have  
13 lived experience with behavioral health conditions or who are a  
14 family member of a person with behavioral health conditions to apply.

15 (2) Following the selection of the organization to carry out the  
16 ministerial functions of the office, the department shall not  
17 initiate the procurement of a new contract except upon a showing of  
18 cause. Prior to ending the contract and conducting a new competitive  
19 bidding process, the department shall provide an opportunity for  
20 comment by the contracting advocacy organization and to appeal the  
21 reselection to the department.

22 (3) The office shall adopt rules to carry out the purposes of  
23 this chapter, including:

24 (a) Establishing standards for the contracting advocacy  
25 organization to use when certifying behavioral health consumer  
26 advocates;

27 (b) Establishing procedures consistent with this act for  
28 appropriate access by behavioral health consumer advocates to  
29 behavioral health providers or facilities; and

30 (c) Establishing procedures consistent with section 14 of this  
31 act to protect the confidentiality of the records of patients,  
32 residents, clients, providers, and complainants.

33 NEW SECTION. **Sec. 4.** The state office of behavioral health  
34 consumer advocacy shall assure performance of the following  
35 activities, as authorized in contract:

36 (1) Selection of a name for the contracting advocacy organization  
37 to use for the advocacy program that it operates pursuant to contract  
38 with the office. The name must be selected by the statewide advisory

1 council established in this section and must be separate and  
2 distinguishable from that of the office;

3 (2) Certification and coordination of the activities of the  
4 behavioral health consumer advocates throughout the state according  
5 to standards adopted by the office;

6 (3) Provision of training regarding appropriate access by  
7 behavioral health consumer advocates to behavioral health providers  
8 or facilities according to standards adopted by the office;

9 (4) Establishment of a toll-free telephone number, website, and  
10 other appropriate technology to facilitate access to contracting  
11 advocacy organization services for patients, residents, and clients  
12 of behavioral health providers or facilities;

13 (5) Establishment of a statewide uniform reporting system to  
14 collect and analyze data relating to complaints and conditions  
15 provided by behavioral health providers or facilities for the purpose  
16 of identifying and resolving significant problems, with permission to  
17 submit the data to all appropriate state agencies on a regular basis;

18 (6) Establishment of procedures consistent with the standards  
19 adopted by the office to protect the confidentiality of the office's  
20 records, including the records of patients, residents, clients,  
21 providers, and complainants;

22 (7) Establishment of a statewide advisory council, a majority of  
23 which must be composed of people with lived experience, that shall  
24 include:

25 (a) Individuals with a history of mental illness including one or  
26 more members from the black community, the indigenous community, or a  
27 community of color;

28 (b) Individuals with a history of substance use disorder  
29 including one or more members from the black community, the  
30 indigenous community, or a community of color;

31 (c) Family members of individuals with behavioral health needs  
32 including one or more members from the black community, the  
33 indigenous community, or a community of color;

34 (d) One or more representatives of an organization representing  
35 consumers of behavioral health services;

36 (e) Representatives of behavioral health providers and  
37 facilities, including representatives of facilities offering  
38 inpatient and residential behavioral health services;

39 (f) One or more certified peer specialists;

1 (g) One or more medical clinicians serving individuals with  
2 behavioral health needs;

3 (h) One or more nonmedical providers serving individuals with  
4 behavioral health needs;

5 (i) One representative from a behavioral health administrative  
6 services organization;

7 (j) Other community representatives, as determined by the office;  
8 and

9 (k) One representative from a labor union representing workers  
10 who work in settings serving individuals with behavioral health  
11 conditions;

12 (8) Monitoring the development of and recommend improvements in  
13 the implementation of federal, state, and local laws, rules,  
14 regulations, and policies with respect to the provision of behavioral  
15 health services in the state and advocate for consumers;

16 (9) Development and delivery of educational programs and  
17 information statewide to patients, residents, and clients of  
18 behavioral health providers or facilities, and their families on  
19 topics including, but not limited to, the execution of mental health  
20 advance directives, wellness recovery action plans, crisis services  
21 and contacts, peer services and supports, family advocacy and rights,  
22 and involuntary treatment; and

23 (10) Reporting to the office, the legislature, and all  
24 appropriate public agencies regarding the quality of services,  
25 complaints, problems for individuals receiving services from  
26 behavioral health providers or facilities, and any recommendations  
27 for improved services for behavioral health consumers.

28 NEW SECTION. **Sec. 5.** (1) A certified behavioral health consumer  
29 advocate shall:

30 (a) Identify, investigate, and resolve complaints made by, or on  
31 behalf of, patients, residents, and clients of behavioral health  
32 providers or facilities relating to administrative action, inaction,  
33 or decisions that may adversely affect the health, safety, welfare,  
34 and rights of these individuals;

35 (b) Assist and advocate on behalf of patients, residents, and  
36 clients of behavioral health providers or facilities before  
37 government agencies and seek administrative, legal, and other  
38 remedies on their behalf, if appropriate;

1 (c) Inform patients, residents, and clients or their  
2 representatives about applicable patient and resident rights, and  
3 provide information, as appropriate, to patients, residents, clients,  
4 family members, guardians, resident representatives, and others  
5 regarding the rights of patients and residents;

6 (d) Make recommendations through the office and the contracting  
7 advocacy organization for improvements to the quality of services  
8 provided to patients, residents, and clients of behavioral health  
9 providers or facilities; and

10 (e) With the consent of the patient, resident, or client, involve  
11 family members, friends, or other designated individuals in the  
12 process of resolving complaints.

13 (2) Nothing in this section shall be construed to grant a  
14 certified behavioral health consumer advocate:

15 (a) Statutory or regulatory licensing or sanctioning authority;  
16 or

17 (b) Binding adjudicative authority.

18 NEW SECTION. **Sec. 6.** (1) For state hospitals as defined in RCW  
19 72.23.010, the state office of behavioral health consumer advocacy  
20 shall work with the department of social and health services to:

21 (a) Establish specialized training for behavioral health consumer  
22 advocates to work with forensic and criminal justice involved  
23 populations at the state hospitals;

24 (b) Create procedures and protocols that ensure that behavioral  
25 health consumer advocates have access to all state hospital patients  
26 and their families or guardians as needed to perform their duties,  
27 including persons who are awaiting admission to the state hospitals  
28 while in jail;

29 (c) Establish guidelines for how the state office of behavioral  
30 health consumer advocacy will work and collaborate with existing  
31 state employees who serve in an ombuds or advocate role for the state  
32 hospitals and ensure all legal requirements for these personnel are  
33 maintained; and

34 (d) Develop a direct reporting structure to the governor's office  
35 about any systemic issues that are discovered within the course of  
36 the advocates' duties within the state hospitals.

37 (2) The state office of behavioral health consumer advocacy shall  
38 complete this work in collaboration with the department of social and

1 health services by July 1, 2023, and prior to the deployment of  
2 behavioral health consumer advocates within the state hospitals.

3 (3) The state office of behavioral health consumer advocacy shall  
4 make strong efforts to encourage individuals with lived experience  
5 specific to the state hospitals to undergo training to fulfill  
6 behavioral health consumer advocate positions at the state hospitals.

7 NEW SECTION. **Sec. 7.** (1) The certified behavioral health  
8 consumer advocates shall have appropriate access to behavioral health  
9 providers or facilities to effectively carry out the provisions of  
10 this chapter, with provisions made for the privacy of patients,  
11 residents, and clients, according to the rules, policies, and  
12 procedures developed under section 3 of this act.

13 (2) Nothing in this chapter restricts, limits, or increases any  
14 existing right of any organizations or individuals not described in  
15 subsection (1) of this section to enter or provide assistance to  
16 patients, residents, and clients of behavioral health providers or  
17 facilities.

18 (3) Nothing in this chapter restricts any right or privilege of a  
19 patient, resident, or client of a behavioral health provider or  
20 facility to receive visitors of their choice.

21 NEW SECTION. **Sec. 8.** (1) Every behavioral health provider or  
22 facility shall post in a conspicuous location a notice providing the  
23 toll-free phone number and website of the contracting advocacy  
24 organization, as well as the name, address, and phone number of the  
25 office of the appropriate local behavioral health consumer advocate  
26 and a brief description of the services provided by the contracting  
27 advocacy organization. The form of the notice must be approved by the  
28 office. This information must also be distributed to the patients,  
29 residents, and clients of behavioral health providers or facilities,  
30 upon application for behavioral health services and upon admission to  
31 a behavioral health provider or facility. The information shall also  
32 be provided to the family members and legal guardians of the  
33 patients, residents, or clients of a behavioral health provider or  
34 facility, as allowed by state and federal privacy laws.

35 (2) Every behavioral health provider or facility must provide  
36 access to a free telephone for the express purpose of contacting the  
37 contracting advocacy organization.

1        NEW SECTION.     **Sec. 9.**     The contracting advocacy organization  
2 shall develop and submit, for approval by the office, a process to  
3 train and certify all behavioral health consumer advocates, whether  
4 paid or volunteer, authorized by this chapter as follows:

5        (1) Certified behavioral health consumer advocates must have  
6 training or experience in the following areas:

7            (a) Behavioral health and other related social services programs;

8            (b) The legal system, including differences in state or federal  
9 law between voluntary and involuntary patients, residents, or  
10 clients;

11          (c) Advocacy and supporting self-advocacy;

12          (d) Dispute or problem resolution techniques, including  
13 investigation, mediation, and negotiation; and

14          (e) All applicable patient, resident, and client rights  
15 established by either state or federal law.

16        (2) A certified behavioral health consumer advocate may not have  
17 been employed by any behavioral health provider or facility within  
18 the previous twelve months, except as a certified peer specialist or  
19 where prior to the effective date of this section the person has been  
20 employed by a regional behavioral health consumer advocate.

21        (3) No certified behavioral health consumer advocate or any  
22 member of a certified behavioral health consumer advocate's family  
23 may have, or have had, within the previous twelve months, any  
24 significant ownership or financial interest in the provision of  
25 behavioral health services.

26        NEW SECTION.     **Sec. 10.**     (1) The contracting advocacy organization  
27 shall develop and submit for approval by the office referral  
28 procedures for the organization and all certified behavioral health  
29 consumer advocates to refer any complaint, in accordance with a  
30 mutually established working agreement, to an appropriate state or  
31 local government agency. The appropriate agency shall respond to any  
32 complaint referred to it by a certified behavioral health consumer  
33 advocate, in accordance with a mutually established working  
34 agreement.

35        (2) State agencies shall review a complaint against a behavioral  
36 health provider or facility which was referred to it by a certified  
37 behavioral health consumer advocate, in accordance with a mutually  
38 established working agreement, and shall forward to that certified



1 behavioral health consumer advocate a summary of the results of the  
2 review or investigation and action proposed or taken.

3 (3) State agencies that regulate or contract with behavioral  
4 health providers or facilities shall adopt necessary rules to  
5 effectively work in coordination with the contracting advocacy  
6 organization.

7 NEW SECTION. **Sec. 11.** (1) The contracting advocacy organization  
8 shall develop and implement working agreements with the protection  
9 and advocacy agency, the long-term care ombuds, the developmental  
10 disabilities ombuds, the corrections ombuds, and the children and  
11 family ombuds, and work in cooperation to assure efficient,  
12 coordinated service.

13 (2) The contracting advocacy organization shall develop working  
14 agreements with each managed care organization, behavioral health  
15 administrative services organization, the state psychiatric  
16 hospitals, all appropriate state and local agencies, and other such  
17 entities as necessary to carry out their duties. Working agreements  
18 must include:

19 (a) The roles of the contracting advocacy organization and the  
20 agency or entity in complaint investigations, complaint referral  
21 criteria, and a process for sharing information regarding complaint  
22 review and investigation, as appropriate; and

23 (b) Processes and procedures to assure timely and seamless  
24 information sharing among all interested parties and that the  
25 contracting advocacy organization is responsive to all local  
26 information requests.

27 NEW SECTION. **Sec. 12.** (1) No certified behavioral health  
28 consumer advocate is liable for good faith performance of  
29 responsibilities under this chapter.

30 (2) No discriminatory, disciplinary, or retaliatory action may be  
31 taken against an employee or volunteer of a behavioral health  
32 provider or facility, or a patient, resident, or client of a  
33 behavioral health provider or facility, for any communication made,  
34 or information given or disclosed, to aid the certified behavioral  
35 health consumer advocate in carrying out duties and responsibilities  
36 under this chapter, unless the same was done maliciously or without  
37 good faith. This subsection is not intended to infringe on the rights  
38 of the employer to supervise, discipline, or terminate an employee or

1 volunteer for other reasons, and shall serve as a defense to any  
2 action in libel or slander.

3 (3) All communications by a certified behavioral health consumer  
4 advocate, if reasonably related to the requirements of that  
5 individual's responsibilities under this chapter and done in good  
6 faith, are privileged and confidential, subject to the procedures  
7 established by the office.

8 (4) A representative of the contracting advocacy organization is  
9 exempt from being required to testify in court as to any confidential  
10 matters except upon the express consent of the client, resident, or  
11 patient that is subject to the court proceedings, or their  
12 representatives, as applicable.

13 NEW SECTION. **Sec. 13.** It is the intent of the legislature that:

14 (1) Regional behavioral health ombuds programs existing prior to  
15 this act be integrated into this new statewide program and the ombuds  
16 from those programs be assessed and certified by the contracting  
17 advocacy organization as behavioral health consumer advocates, and  
18 for the state office of behavioral health consumer advocacy to  
19 provide the regional behavioral health ombuds programs with any  
20 additional training they may need to meet the requirements of section  
21 5 of this act;

22 (2) There shall be a behavioral health consumer advocate office  
23 within the boundaries of the region served by each behavioral health  
24 administrative services organization;

25 (3) Federal medicaid requirements be complied with; and

26 (4) The department annually expend at least the amount expended  
27 on regional behavioral health ombuds services prior to the effective  
28 date of this section on the office and for the procurement of  
29 services from the contracting advocacy organization under this  
30 chapter.

31 NEW SECTION. **Sec. 14.** (1) All records and files of the office,  
32 the contracting advocacy organization, and any certified behavioral  
33 health consumer advocates related to any complaint or investigation  
34 made pursuant to carrying out their duties and the identities of  
35 complainants, witnesses, patients, residents, or clients and  
36 information that could reasonably identify any of these individuals  
37 shall remain confidential unless disclosure is authorized in writing

1 by the subject of the information, or the subject's guardian or legal  
2 representative.

3 (2) No disclosures of records and files related to a complaint or  
4 investigation may be made to any organization or individual outside  
5 the office or the contracting advocacy organization without the  
6 written consent of any named witnesses, complainants, patients,  
7 residents, or clients unless the disclosure is made without the  
8 identity of any of these individuals and without information that  
9 could reasonably identify any of these individuals unless such  
10 disclosure is required in carrying out its duties under this chapter.

11 (3) Notwithstanding subsections (1) and (2) of this section,  
12 disclosures of records and files may be made pursuant to a court  
13 order.

14 (4) All disclosures must be compliant with state and federal  
15 privacy laws applicable to the type of information that is sought for  
16 disclosure.

17 **Sec. 15.** RCW 71.24.045 and 2019 c 325 s 1008 are each amended to  
18 read as follows:

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

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

23 (i) A behavioral health crisis hotline for its assigned regional  
24 service area;

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

27 (iii) Services related to involuntary commitments under chapters  
28 71.05 and 71.34 RCW;

29 (iv) Additional noncrisis behavioral health services, within  
30 available resources, to individuals who meet certain criteria set by  
31 the authority in its contracts with the behavioral health  
32 administrative services organization. These services may include  
33 services provided through federal grant funds, provisos, and general  
34 fund state appropriations;

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

1 (vi) Regional coordination, cross-system and cross-jurisdiction  
2 coordination with tribal governments, and capacity building efforts,  
3 such as supporting the behavioral health advisory board(~~(the~~  
4 ~~behavioral health ombuds,~~) and efforts to support access to services  
5 or to improve the behavioral health system;

6 (b) Administer and provide for the availability of an adequate  
7 network of evaluation and treatment services to ensure access to  
8 treatment, investigation, transportation, court-related, and other  
9 services provided as required under chapter 71.05 RCW;

10 (c) Coordinate services for individuals under RCW 71.05.365;

11 (d) Administer and provide for the availability of resource  
12 management services, residential services, and community support  
13 services as required under its contract with the authority;

14 (e) Contract with a sufficient number, as determined by the  
15 authority, of licensed or certified providers for crisis services and  
16 other behavioral health services required by the authority;

17 (f) Maintain adequate reserves or secure a bond as required by  
18 its contract with the authority;

19 (g) Establish and maintain quality assurance processes;

20 (h) Meet established limitations on administrative costs for  
21 agencies that contract with the behavioral health administrative  
22 services organization; and

23 (i) Maintain patient tracking information as required by the  
24 authority.

25 (2) The behavioral health administrative services organization  
26 must collaborate with the authority and its contracted managed care  
27 organizations to develop and implement strategies to coordinate care  
28 with tribes and community behavioral health providers for individuals  
29 with a history of frequent crisis system utilization.

30 (3) The behavioral health administrative services organization  
31 shall:

32 (a) Assure that the special needs of minorities, older adults,  
33 individuals with disabilities, children, and low-income persons are  
34 met;

35 (b) Collaborate with local government entities to ensure that  
36 policies do not result in an adverse shift of persons with mental  
37 illness into state and local correctional facilities; and

38 (c) Work with the authority to expedite the enrollment or  
39 reenrollment of eligible persons leaving state or local correctional  
40 facilities and institutions for mental diseases.

1       **Sec. 16.** RCW 71.24.380 and 2019 c 325 s 1022 are each amended to  
2 read as follows:

3       (1) The director shall purchase behavioral health services  
4 primarily through managed care contracting, but may continue to  
5 purchase behavioral health services directly from providers serving  
6 medicaid clients who are not enrolled in a managed care organization.

7       (2) The director shall require that contracted managed care  
8 organizations have a sufficient network of providers to provide  
9 adequate access to behavioral health services for residents of the  
10 regional service area that meet eligibility criteria for services,  
11 and for maintenance of quality assurance processes. Contracts with  
12 managed care organizations must comply with all federal medicaid and  
13 state law requirements related to managed health care contracting,  
14 including RCW 74.09.522.

15       (3) A managed care organization must contract with the  
16 authority's selected behavioral health administrative services  
17 organization for the assigned regional service area for the  
18 administration of crisis services. The contract shall require the  
19 managed care organization to reimburse the behavioral health  
20 administrative services organization for behavioral health crisis  
21 services delivered to individuals enrolled in the managed care  
22 organization.

23       (4) A managed care organization must contract with the  
24 contracting advocacy organization selected by the state office of  
25 behavioral health consumer advocacy established in section 3 of this  
26 act for the provision of behavioral health consumer advocacy services  
27 delivered to individuals enrolled in the managed care organization.  
28 The contract shall require the managed care organization to reimburse  
29 the office of behavioral health consumer advocacy for behavioral  
30 health consumer advocacy services delivered to individuals enrolled  
31 in the managed care organization.

32       (5) A managed care organization must collaborate with the  
33 authority and its contracted behavioral health administrative  
34 services organization to develop and implement strategies to  
35 coordinate care with tribes and community behavioral health providers  
36 for individuals with a history of frequent crisis system utilization.

37       ~~((+5))~~ (6) A managed care organization must work closely with  
38 designated crisis responders, behavioral health administrative  
39 services organizations, and behavioral health providers to maximize  
40 appropriate placement of persons into community services, ensuring

1 the client receives the least restrictive level of care appropriate  
2 for their condition. Additionally, the managed care organization  
3 shall work with the authority to expedite the enrollment or  
4 reenrollment of eligible persons leaving state or local correctional  
5 facilities and institutions for mental diseases.

6 ~~((+6))~~ (7) As an incentive to county authorities to become early  
7 adopters of fully integrated purchasing of medical and behavioral  
8 health services, the standards adopted by the authority shall provide  
9 for an incentive payment to counties which elect to move to full  
10 integration by January 1, 2016. Subject to federal approval, the  
11 incentive payment shall be targeted at ten percent of savings  
12 realized by the state within the regional service area in which the  
13 fully integrated purchasing takes place. Savings shall be calculated  
14 in alignment with the outcome and performance measures established in  
15 RCW 71.24.435, 70.320.020, and 71.36.025, and incentive payments for  
16 early adopter counties shall be made available for up to a six-year  
17 period, or until full integration of medical and behavioral health  
18 services is accomplished statewide, whichever comes sooner, according  
19 to rules to be developed by the authority.

20 NEW SECTION. **Sec. 17.** RCW 71.24.350 (Behavioral health ombuds  
21 office) and 2019 c 325 s 1020, 2018 c 201 s 4019, 2016 sp.s. c 29 s  
22 523, 2014 c 225 s 41, 2013 c 23 s 189, & 2005 c 504 s 803 are each  
23 repealed.

24 NEW SECTION. **Sec. 18.** Sections 1 through 14 of this act  
25 constitute a new chapter in Title 71 RCW.

26 NEW SECTION. **Sec. 19.** Sections 16 and 17 of this act take  
27 effect July 1, 2022.

28 NEW SECTION. **Sec. 20.** If specific funding for the purposes of  
29 this act, referencing this act by bill or chapter number, is not  
30 provided by June 30, 2021, in the omnibus appropriations act, this  
31 act is null and void."

**OUT OF ORDER 04/07/2021**

1        On page 1, line 2 of the title, after "advocacy;" strike the  
2 remainder of the title and insert "amending RCW 71.24.045 and  
3 71.24.380; adding a new chapter to Title 71 RCW; creating a new  
4 section; repealing RCW 71.24.350; and providing an effective date."

EFFECT: Requires the Department of Commerce to encourage persons with lived experience of behavioral health conditions and family members of persons with behavioral health conditions to apply to fill the role of contracting advocacy organization within the state Office of Behavioral Health Consumer Advocacy. Requires the Office to provide any necessary training to regional behavioral health ombuds programs to meet the requirements to be certified as behavioral health consumer advocates.

Requires the Office to work with the Department of Social and Health Services to establish specialized training, procedures, protocols, and guidelines for behavioral health consumer advocates to work with forensic and criminal justice-involved populations at the state hospitals and existing state employees who serve in an Ombuds or advocate role by July 1, 2023, and prior to deploying behavioral health consumer advocates within the state hospitals.

--- END ---