
Health Care & Wellness Committee

2SSB 5438

Brief Description: Facilitating supportive relationships with family and significant individuals within the behavioral health system.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Warnick, Boehnke, Braun, Dhingra, Van De Wege and Wilson, J.).

Brief Summary of Second Substitute Bill

- Directs the Health Care Authority and the Department of Social and Health Services to consider several principles related to family involvement in their administration of the community behavioral health system and the state hospitals.

Hearing Date: 3/22/23

Staff: Christopher Blake (786-7392).

Background:

The Health Care Authority (Authority) is recognized as the state behavioral health authority which includes recognition as both the single state authority for substance use disorders and the state mental health authority. The Authority administers the state's community behavioral health program through contracts with managed care organizations and behavioral health administrative services organizations (BHASOs). Medicaid services are primarily delivered through the managed care organizations under a comprehensive risk-based contract to provide prepaid health care services to enrollees under the Authority's managed care programs. The BHASOs are regional entities contracted with the Authority to administer crisis and Involuntary Treatment Act services. The BHASOs provide some services contained in the Medicaid State Plan on a limited basis, and within available resources, for low-income individuals who are not eligible for

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Medicaid enrollment.

The Department of Social and Health Services operates three state hospitals for psychiatric treatment: Western State Hospital, the Child Study and Treatment Center in Lakewood, and Eastern State Hospital in Medical Lake. The Child Study and Treatment Center treats minors aged 5 to 17 who are committed or referred for up to six months of inpatient treatment through the Children's Long-Term Inpatient Program, by managed care organizations or BHASOs, or by the courts. The other two state hospitals treat adult involuntary patients who are either civilly committed for treatment through the Involuntary Treatment Act or forensically committed for treatment related to criminal insanity or competency to stand trial through the criminal courts.

Summary of Bill:

In their respective roles related to the oversight of the community behavioral health system and the administration of the state hospitals, the Health Care Authority (Authority) and the Department of Social and Health Services (Department) must conduct their activities in a manner that is aware of, nurtures, and protects significant relationships in the life of the client or hospital patient. The relationships may involve family, friends, and others who play a significant role in the client's or hospital patient's life.

The Authority and the Department must consider the following principles when administering programs and contracts and making policy related to the community behavioral health system and the state hospitals:

- Clients and patients should have a caring, compassionate family member involved in and advocating for their best treatment based on their role in the person's life and personal knowledge of their welfare.
- Families should be included in their children's or relative's behavioral health care when it is in the best interests of the client or patient and parents should be encouraged to be actively engaged and, when appropriate, have decision making rights.
- Policies and practices must not cause unnecessary trauma to a family and family members should be able to participate in care decisions with medical experts without fear of negative consequences.
- Family rights and responsibilities should be maintained through inclusion in decision making related to a patient's residence, supervision, schooling, education, and health care.
- Strong family-like relationships may arise through non-blood relationships.
- It should be recognized that development continues past the age of 18.
- Patients and families need assistance building, reestablishing, and strengthening healthy relationships and every effort should be made to assess and provide for the service needs of family members either separately or in conjunction with the patient.
- Medication use by children should be closely monitored and frequently evaluated and parents should have expert support to understand the risks and benefits of prescribed psychotropic medications.

In addition, the Authority must consider that: (1) the legal system should only be employed as a

last resort; (2) medication management should not be handled through at-risk youth petitions; and (3) parental rights should not be severed without evidence of abuse or neglect, unless it is in the best interests of the child.

The Authority must conduct a review of its policies related to behavioral health and the Department must conduct a review of its policies related to allowing and facilitating family engagement with state hospital patients. Both reviews must be conducted in consultation with stakeholders, family members, and peers. The reviews must identify and eliminate policies that undermine the integrity and health of the family or that discourage family engagement. The reviews must be completed by June 30, 2024, and the agencies may notify the Governor and the appropriate committees of the Legislature of the completion of the review and its outcomes.

The bill does not create a private right of action.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.