

SENATE BILL REPORT

SB 5710

As of February 18, 2023

Title: An act relating to providing access to behavioral health services to youth in rural and underserved areas.

Brief Description: Providing access to behavioral health services to youth in rural and underserved areas.

Sponsors: Senators Torres, Wellman, Braun, Muzzall, Dozier, Nobles and Wilson, L..

Brief History:

Committee Activity: Early Learning & K-12 Education: 2/13/23, 2/13/23 [DP-WM, w/oRec].

Ways & Means: 2/18/23.

Brief Summary of Bill

- Creates a grant program within the Office of the Superintendent of Public Instruction to provide funding to educational service districts on an ongoing basis to offer students attending schools in rural areas access to a mental health professional using telemedicine.
- Directs the Health Care Authority and other entities to investigate the disproportionately low participation by Eastern Washington families in an existing mental health referral service for children and teens and to report their findings and a mitigation plan to remedy this disparity to the Governor and Legislature by December 1, 2023.

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Majority Report: Do pass and be referred to Committee on Ways & Means.

Signed by Senators Wellman, Chair; Nobles, Vice Chair; Wilson, C., Vice Chair; Hunt and Mullet.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Minority Report: That it be referred without recommendation.

Signed by Senators Hawkins, Ranking Member; Dozier, McCune and Pedersen.

Staff: Ailey Kato (786-7434)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Kayla Hammer (786-7305)

Background: Behavioral Health Coordination within Educational Service Districts. In 2017, the Office of the Superintendent of Public Instruction (OSPI) established a competitive application process to designate two educational service districts (ESDs) to pilot one lead staff person for children's mental health and substance use disorder services. In 2019, regional school safety centers were established at each ESD. Each regional school safety center must provide behavioral health coordination to school districts including:

- facilitating partnerships and coordination between school districts, public schools, and existing regional and local systems of behavioral health care services and supports to increase student and family access;
- assisting school districts and public schools in building capacity to identify and support students in need of behavioral health care services and to link students and families with community-based behavioral health care services; and
- providing Medicaid billing related training, technical assistance, and coordination between school districts.

During the COVID-19 pandemic, ESD 101 in Spokane received non-state grant funding to hire a full-time certified mental health counselor to deliver services to children in five rural school districts in Eastern Washington using telemedicine.

Mental Health Referral Service for Children and Teens. Subject to appropriations, the Health Care Authority (HCA), in collaboration with the University of Washington Department of Psychiatry and Behavioral Sciences and Seattle Children's Hospital, must implement certain access lines. The Mental Health Referral Service for Children and Teens includes:

- assessing the level of services needed by the child;
- identifying mental health professionals who are in-network of the child's health care coverage within an average of seven days from intake;
- coordinating contact between the parent or guardian and the mental health professional; and
- providing post-referral reviews to determine if the child has outstanding needs.

Joint Legislative Audit and Review Committee Report. In 2020, the Legislature directed the Joint Legislative Audit and Review Committee (JLARC) to evaluate the access lines including the Mental Health Referral Service for Children and Teens. According to the final report published in November 2022, 97 percent of calls to the mental health referral

service were from families in Western Washington. The report states it is unclear why families in Eastern Washington are underrepresented in the referral service data.

Mental Health Professional. State law defines mental health professional to mean a psychiatrist, psychologist, physician assistant working with a supervising psychiatrist, psychiatric advanced registered nurse practitioner, psychiatric nurse, or social worker, and such other mental health professionals as may be defined by rules adopted by the Department of Health.

Summary of Bill: Grant Program. Subject to appropriations, a grant program is created within OSPI to either contract with a nonprofit organization or directly provide funding to the ESDs on an ongoing basis to provide students attending school in rural areas with access to a mental health professional using telemedicine. Priority must be given to areas where mental health services are inadequate or nonexistent and hiring an in-person mental health professional is infeasible due to geography.

Participating schools must provide students with a confidential, private location for the students to connect with the mental health professional over a high-speed Internet connection. OSPI or its contractor may provide technology to participating schools to assist in the implementation of this program.

No student may be charged a fee for using this program, but OSPI or its contractor may, to the extent feasible, recover costs for mental health professional services provided through public or private insurance held by the students to extend the reach of the program.

OSPI or its contractor must provide training to school personnel in participating schools to:

- identify students in need of services;
- schedule and support the students; and
- provide a safe hand-off for the students before and after services are provided.

OSPI may adopt rules and procedures to implement this grant program. OSPI must annually report to the Legislature describing the utilization and results of the grant program.

Mental Health Referral Service for Children and Teens. HCA, in collaboration with the University of Washington Department of Psychiatry and Behavioral Sciences and Seattle Children's Hospital, must investigate the disproportionately low participation by Eastern Washington families in the Mental Health Referral Service for Children and Teens. These entities must develop a mitigation plan to remedy this disparity and report their findings and activities to the Governor and Legislature by December 1, 2023.

Appropriation: The bill contains a section or sections to limit implementation to the availability of amounts appropriated for that specific purpose.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony (Early Learning & K-12 Education): PRO: Students need mental health help more than ever, especially after COVID-19. Mental health issues are linked to poor academic performance and often persists into adulthood. This bill expands a successful grant program first launched in Spokane, which provided mental health services to rural school districts. This grant program complements the work that the ESDs are already doing related to mental health and telemedicine. Telemedicine allows students to not miss much class time. Smaller, rural school districts do not have the resources to meet students' mental health needs compared to larger, less rural school districts. Rural school districts struggle to hire mental health providers. This bill addresses an equity issue. All youth should have access to appropriate behavioral health services.

CON: Mental health services are important to students, especially given the mental health crisis that students are experiencing, but these services should not be provided through schools because they could potentially exclude parents. These services should be available in the community for parents to utilize for their children. Investigating the disproportionately low participation by Eastern Washington families makes them feel like lab rights and this data collection is concerning.

Persons Testifying (Early Learning & K-12 Education): PRO: Senator Nikki Torres, Prime Sponsor; Kimberly Headrick, Medical Lake School District; Melissa Gombosky, Association of Educational Service Districts; Mary Lynne Courtney, League of Women Voters WA.; Collin Bannister, ASWSU.

CON: Julie Barrett, Conservative Ladies of Washington.

Persons Signed In To Testify But Not Testifying (Early Learning & K-12 Education):
No one.

Staff Summary of Public Testimony (Ways & Means): PRO: ESDs and school districts are currently using ESSER funding for behavioral health staff. Piloting telemedicine now will complement the work that is underway. Rural students need the same access as the urban schools. Parents have opposition about OSPI being involved, but fine tuning the language may help with parental concerns.

CON: Disagree with incorporating mental health into the public school system. The bill ignores home schooled and private schooled students. Expands OSPI's purview and excludes parents' involvement and can create erosion between parents and students. Agree with and support mental healthcare but not managed by UW and Seattle Children's and OSPI. OSPI has no business getting involved with behavioral health, education needs to stay in its lane and leave it to parents.

Persons Testifying (Ways & Means): PRO: Senator Nikki Torres, Prime Sponsor; Melissa Gombosky, Association of Educational Service Districts; Anthony Mixer.

CON: Shannon Zetelski; Eric pratt, I, America; Nancy Button.

Persons Signed In To Testify But Not Testifying (Ways & Means): No one.