
SECOND SUBSTITUTE HOUSE BILL 1168

State of Washington

68th Legislature

2023 Regular Session

By House Appropriations (originally sponsored by Representatives Simmons, Ramel, Callan, Wylie, Davis, and Ormsby)

READ FIRST TIME 02/16/23.

1 AN ACT Relating to providing prevention services, diagnoses,
2 treatment, and support for prenatal substance exposure; amending RCW
3 71.24.610; adding a new section to chapter 43.216 RCW; adding new
4 sections to chapter 71.24 RCW; and creating new sections.

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

6 NEW SECTION. **Sec. 1.** The legislature finds that:

7 (1) Fetal alcohol spectrum disorders are lifelong physical,
8 developmental, behavioral, and intellectual disabilities caused by
9 prenatal alcohol exposure;

10 (2) According to the federal centers for disease control and
11 prevention, fetal alcohol spectrum disorders affect as many as one in
12 20 people in the United States;

13 (3) The health care authority estimates that one percent of
14 births, or approximately 870 children each year, are born with fetal
15 alcohol spectrum disorders;

16 (4) In addition to alcohol use, other substances consumed during
17 pregnancy may result in prenatal substance exposure affecting the
18 physical, developmental, behavioral, and intellectual abilities of
19 the exposed child;

1 (5) Washington has limited diagnostic capacity and currently
2 lacks the capacity to diagnose and treat every child who needs
3 support and treatment due to prenatal substance exposure;

4 (6) Without appropriate treatment and supports, children born
5 with fetal alcohol spectrum disorders and other prenatal substance
6 disorders are likely to experience adverse outcomes. According to
7 current statistics, these children face adverse outcomes such as:

8 (a) 61 percent of children with fetal alcohol spectrum disorders
9 are suspended or expelled from school by age 12;

10 (b) 90 percent of persons with fetal alcohol spectrum disorders
11 develop comorbid mental health conditions; and

12 (c) 60 percent of youth with fetal alcohol spectrum disorders are
13 involved in the justice system;

14 (7) Untreated and unsupported prenatal substance exposure results
15 in higher costs for the state and worse outcomes for children and
16 their families;

17 (8) Investing in prevention and earlier intervention, including
18 diagnostic capacity, treatment, and services for children and
19 supports for families and caregivers will improve school outcomes;
20 and

21 (9) Effective prenatal substance exposure response requires
22 effective and ongoing cross-agency strategic planning and
23 coordination.

24 NEW SECTION. **Sec. 2.** A new section is added to chapter 43.216
25 RCW to read as follows:

26 (1) By January 1, 2024, the department shall contract with a
27 provider with expertise in comprehensive prenatal substance exposure
28 treatment and family supports to offer services to children over the
29 age of three and families who are or have been involved in the child
30 welfare system or who are at risk of becoming involved in the child
31 welfare system. This contract shall maximize the number of families
32 that can be served through referrals by department employees and
33 other community partners in order to keep families together, reduce
34 the number of placements, and prevent adverse outcomes for impacted
35 children.

36 (2) By January 1, 2025, the department shall contract with up to
37 three providers across the state, in addition to the contracted
38 provider in subsection (1) of this section, to offer comprehensive
39 treatment services for prenatal substance exposure and family

1 supports for children who were prenatally exposed to substances and
2 who are, or have been, involved in the child welfare system.

3 (3) Comprehensive treatment and family supports must be trauma-
4 informed and may include:

5 (a) Occupational, speech, and language therapy;

6 (b) Behavioral health counseling and caregiver counseling;

7 (c) Sensory processing support;

8 (d) Educational advocacy, psychoeducation, social skills support,
9 and groups;

10 (e) Linkages to community resources; and

11 (f) Family supports and education, including the programs for
12 parents, caregivers, and families recommended by the federal centers
13 for disease control and prevention.

14 (4) The department shall contract with the provider referenced in
15 subsection (1) of this section to support the providers under
16 contract in subsection (2) of this section by:

17 (a) Creating education and training programs for providers
18 working with children who had prenatal substance exposure; and

19 (b) Offering ongoing coaching and support in creating a safe and
20 healing environment, free from judgment, where families are supported
21 through the challenges of care for children with prenatal substance
22 exposure.

23 (5) The department shall work with the contracted providers and
24 families to collect relevant outcome data and provide a report on the
25 expansion of services under the contracts and the outcomes
26 experienced by persons receiving services under this section. The
27 department shall submit the report to the legislature with any
28 recommendations related to improving availability of and access to
29 services and ways to improve outcomes by June 1, 2028.

30 NEW SECTION. **Sec. 3.** A new section is added to chapter 71.24
31 RCW to read as follows:

32 (1) By June 1, 2024, the authority shall submit to the
33 legislature recommendations on ways to increase access to diagnoses,
34 treatment, services, and supports for children who were exposed to
35 alcohol or other substances during pregnancy and their families and
36 caregivers. In creating the recommendations, the authority shall
37 consult with service providers, medical professionals with expertise
38 in diagnosing and treating prenatal substance exposure, families of
39 children who were exposed to alcohol or other substances during

1 pregnancy, communities affected by prenatal substance exposure, and
2 advocates.

3 (2) The recommendations adopted under subsection (1) of this
4 section shall, at a minimum, address:

5 (a) Increasing the availability of evaluation and diagnosis
6 services for children and youth for fetal alcohol spectrum disorders
7 and other prenatal substance disorders, including assuring an
8 adequate payment rate for the interdisciplinary team required for
9 diagnosis and developing sufficient capacity in rural and urban areas
10 so that every child is able to access diagnosis services; and

11 (b) Increasing the availability of treatment for fetal alcohol
12 spectrum disorders and other prenatal substance disorders for all
13 children and youth including all treatments and services recommended
14 by the federal centers for disease control and prevention. The
15 authority shall review all barriers to accessing treatment and make
16 recommendations on removing those barriers, including recommendations
17 related to the definition of medical necessity, prior authorization
18 requirements for diagnosis and treatment services, and limitations of
19 treatment procedure codes and insurance coverage.

20 NEW SECTION. **Sec. 4.** A new section is added to chapter 71.24
21 RCW to read as follows:

22 Subject to the availability of amounts appropriated for this
23 specific purpose, the authority shall contract with a statewide
24 nonprofit entity with expertise in fetal alcohol spectrum disorders
25 and experience in supporting parents and caregivers to offer free
26 support groups for individuals living with fetal alcohol spectrum
27 disorders and their parents and caregivers.

28 **Sec. 5.** RCW 71.24.610 and 2018 c 201 s 4049 are each amended to
29 read as follows:

30 The authority, the department of social and health services, the
31 department (~~(of health)~~), the department of corrections, the
32 department of children, youth, and families, and the office of the
33 superintendent of public instruction shall execute an interagency
34 agreement to ensure the coordination of identification, prevention,
35 and intervention programs for children who have fetal alcohol
36 exposure and other prenatal substance exposures, and for women who
37 are at high risk of having children with fetal alcohol exposure or
38 other prenatal substance exposures.

1 The interagency agreement shall provide a process for community
2 advocacy groups to participate in the review and development of
3 identification, prevention, and intervention programs administered or
4 contracted for by the agencies executing this agreement.

5 NEW SECTION. **Sec. 6.** If specific funding for the purposes of
6 this act, referencing this act by bill or chapter number, is not
7 provided by June 30, 2023, in the omnibus appropriations act, this
8 act is null and void.

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