SENATE BILL REPORT
SB 5273

As of February 20, 2025

Title: An act relating to the availability of community violence prevention and intervention services.

Brief Description: Concerning the availability of community violence prevention and intervention services.

Sponsors: Senators Orwall, Cleveland, Dhingra, Hasegawa, Krishnadasan, Nobles, Saldaña, Salomon, Shewmake, Slatter and Wilson, C..

Brief History:
Committee Activity: Health & Long-Term Care: 2/20/25.

Brief Summary of Bill

- Directs the Health Care Authority to administer funding for community violence prevention and intervention programs.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Rohan Bhattacharjee (786-7534)

Background: Community violence intervention is an approach that uses evidence-informed strategies to reduce violence through tailored community-centered initiatives. These multidisciplinary strategies engage individuals and groups to prevent and disrupt cycles of violence and retaliation and establish relationships between individuals and community assets to deliver services aimed at saving lives, addressing trauma, and providing opportunity and improve the physical, and social and economic conditions that drive violence.

Medicaid is a federal-state partnership with programs established in the federal Social Security Act and implemented at the state level with federal matching funds. The Health

---

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.

Care Authority (HCA) administers the Medicaid Program for health care for low-income state residents who meet certain eligibility criteria.

Summary of Bill: Subject to appropriation, the Health Care Authority (HCA) must administer funding for programs that offer community violence prevention and intervention services. The programs must be offered to youth and adults:

- who have been violently injured;
- are at risk of experiencing violent injury; or
- have experienced chronic exposure to community violence.

The programs may be based at a hospital or at a community organization to which clients are referred by a licensed health care provider. The programs are required to coordinate with school districts in the area.

Number of Programs. The HCA will fund a minimum of four programs, including at least one program located east of the crest of the Cascade mountains and at least one program located west of the crest of the Cascade mountains. Priority shall be given to communities with high rates of firearm violence.

Training Timeline. By January 1, 2026, the Department of Health (DOH) is required to consult with Harborview Medical Center and establish standards for curricula for education programs that train persons to serve as community violence professionals.

Beginning July 1, 2026, the programs are required to coordinate with DOH to ensure community violence professionals employed by the program to receive training in accordance with the curricula standards established in this act.

Beginning January 1, 2027, all community violence professionals must complete training in accordance with established curriculum standards.

Training Curricula. The training curricula must include, at a minimum, instruction in basic trauma-informed care, community-based prevention and intervention strategies, case management, referral practices, advocacy practices, and state and federal privacy requirements. Education programs may be private or public entities that operate on a local, state, or national basis. DOH may adopt rules to establish the curricula standards.

Medicaid. By July 1, 2026, the HCA shall seek approval from the Centers for Medicare and Medicaid Services (CMS) to secure federal funding in the costs of providing community violence prevention and intervention services for youth and adults enrolled in a Medicaid program upon referral by a licensed health care provider.

Upon program approval, the programs must prepare to transition to billing Medicaid for community violence prevention and intervention services. HCA may establish time limits for the receipt of funds to allow for the establishment of new programs.

<u>Definitions.</u> Community violence prevention and intervention service means evidence-informed, trauma-informed, culturally responsive, supportive and nonpsychotherapeutic services provided by a community violence professional. Purposes include promoting improved health outcomes and positive behavioral change, preventing injury recidivism, and reducing the likelihood that victims of acts of community violence may commit or promote violence themselves.

Community violence professional is an individual identified as a mentor, violence interrupter, community member, credible messenger, advocate, peer, activist, community health worker, or health professional licensed or certified by the DOH who has behavioral health in their scope of practice, who has completed the requisite training under this act.

The scope of practice of a community violence professional includes facilitating behavior change, providing social-emotional support, peer support and peer counseling, mentorship, conflict mediation and crisis intervention, care coordination, targeted case management, referrals to credentialed health care providers or social services providers, community and school support services, patient education and screening services, group and individual health education and health coaching, health navigation, transitions of care support, and screening and assessment for nonclinical and social needs.

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.