Multiple Agency Fiscal Note Summary

Bill Number: 5189 S SB Title: Behavioral health support

Estimated Cash Receipts

Agency Name		2023-25			2025-27		2027-29		
	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total
Washington State	0	0	188,000	0	0	108,000	0	0	108,000
Health Care									
Authority									
Washington State	In addition to	the estimate above	e,there are addit	ional indetermin	ate costs and/or sa	avings. Please se	ee individual fis	cal note.	
Health Care									
Authority									
Department of	0	0	227,000	0	0	366,000	0	0	373,000
Health									
				-					
Total \$	0	0	415,000	0	0	474,000	0	0	481,000

Estimated Operating Expenditures

Agency Name		20	023-25			2	025-27				2027-29	
	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total
Washington State Health Care Authority	1.6	230,000	230,000	418,000	1.3	132,000	132,000	240,000	1.3	132,000	132,000	240,000
Washington State Health Care Authority	In addit	ion to the estin	nate above,there	e are addition	al indeter	minate costs	and/or savings.	Please see in	dividual f	scal note.		
Office of Insurance Commissioner	.1	0	0	19,241	.1	0	0	35,196	.1	0	0	35,196
Department of Health	1.8	332,000	332,000	465,000	1.5	0	0	391,000	1.5	0	0	392,000
University of Washington	.4	156,787	156,787	156,787	.0	0	0	0	.0	0	0	0
Total \$	3.9	718,787	718,787	1,059,028	2.9	132,000	132,000	666,196	2.9	132,000	132,000	667,196

Estimated Capital Budget Expenditures

Agency Name		2023-25			2025-27		2027-29			
	FTEs	Bonds	Total	FTEs	Bonds	Total	FTEs	Bonds	Total	
Washington State Health Care Authority	.0	0	0	.0	0	0	.0	0	0	
Office of Insurance Commissioner	.0	0	0	.0	0	0	.0	0	0	
Department of Health	.0	0	0	.0	0	0	.0	0	0	
University of Washington	.0	0	0	.0	0	0	.0	0	0	
Total \$	Total \$ 0.0 0 0 0.0 0 0 0.0 0 0 0									

Estimated Capital Budget Breakout

NONE

Prepared by: Robyn Williams, OFM	Phone:	Date Published:
	(360) 704-0525	Final 2/16/2023

Individual State Agency Fiscal Note

Bill Number: 5189 S SB Title: Behavioral health support	Agency: 107-Washington State Health Care Authority
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Part I: Estimates

No Fiscal Impa	ct
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Estimated Cash Receipts to:

ACCOUNT			FY 2024	FY 2025	2023-25	2025-27	2027-29
General Fund-Federal	001-2		67,000	121,000	188,000	108,000	108,000
		Total \$	67,000	121,000	188,000	108,000	108,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

Estimated Operating Expenditures from:

		FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years		1.0	2.3	1.6	1.3	1.3
Account						
General Fund-State	001-1	82,000	148,000	230,000	132,000	132,000
General Fund-Federal	001-2	67,000	121,000	188,000	108,000	108,000
	Total \$	149,000	269,000	418,000	240,000	240,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

Χ	If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
	If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
	Capital budget impact, complete Part IV.
	Requires new rule making, complete Part V.

Legislative Contact:		Phone:	Date: 02/11/2023
Agency Preparation:	Marcia Boyle	Phone: 360-725-0850	Date: 02/15/2023
Agency Approval:	Madina Cavendish	Phone: 360-725-0902	Date: 02/15/2023
OFM Review:	Robyn Williams	Phone: (360) 704-0525	Date: 02/16/2023

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

See attached narrative.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

See attached narrative.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

See attached narrative.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
001-1	General Fund	State	82,000	148,000	230,000	132,000	132,000
001-2	General Fund	Federal	67,000	121,000	188,000	108,000	108,000
		Total \$	149,000	269,000	418,000	240,000	240,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	1.0	2.3	1.6	1.3	1.3
A-Salaries and Wages	90,000	144,000	234,000	108,000	108,000
B-Employee Benefits	28,000	53,000	81,000	50,000	50,000
C-Professional Service Contracts					
E-Goods and Other Services	2,000	4,000	6,000	4,000	4,000
G-Travel					
J-Capital Outlays					
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services					
P-Debt Service					
S-Interagency Reimbursements					
T-Intra-Agency Reimbursements	29,000	68,000	97,000	78,000	78,000
9-					·
Total \$	149,000	269,000	418,000	240,000	240,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

III. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Fiscal Analyst 3	65,000	0.2	0.5	0.4	0.3	0.3
Medical Assistance Specialist 3	54,000		1.0	0.5	1.0	1.0
WMS Band 02	119,000	0.8	0.8	0.8		
Total FTEs		1.0	2.3	1.6	1.3	1.3

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

Bill Number: S SB 5189 Behavioral Health Support HCA Request #: 23-132

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

This bill establishes behavioral health support specialists as a new service delivery model in Washington state that is expected to improve access to behavioral health services and ease workforce shortages while helping behavioral health professionals work at the top of their scope of practice.

This bill differs from the original bill by making changes to the following sections:

Section 2 adds a definition for "registered apprenticeship" to RCW 48.43.

Section 3 modifies rules related to implementation of Behavioral Health Support Specialist.

Section 12 removes the requirement that behavioral health support specialists will be integrated into network access for every provider under 48.43.005 and states the Office of the Insurance Commissioner (OIC) shall set minimum network access standards. Further, this version of the bill removes the expiration of this section, previously June 30, 2026.

Section 11 – Requires Washington State Health Care Authority (HCA) to take any steps which are necessary and proper to ensure that the services of behavioral health support specialists are covered under the state Medicaid program by January 1, 2025.

Section 12 – Adds a new section to RCW 48.43 (Insurance Reform) that states that by July 1, 2025, behavioral health support specialists will be integrated into network access to meet network access standards set by the OIC.

II. B - Cash Receipts Impact

Indeterminate.

HCA assumes the fiscal impacts associated with the staff cost will be eligible for a Federal Financial Participation (FFP) of 45%.

II. B - Estimated Cash Receipts to:

ACCOUNT	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029
General Fund-Medicaid 001-C	67,000	121,000	54,000	54,000	54,000	54,000
Totals	\$ 67,000	\$ 121,000	\$ 54,000	\$ 54,000	\$ 54,000	\$ 54,000

II. C – Expenditures

The fiscal impact is greater than \$50,000 but indeterminate to actual cost.

HCA requests 1.6 FTEs and \$418,000 (\$230,000 GF-State) in the 2023-2025 biennium to implement this bill and then \$120,000 per year thereafter (\$54,000 GF-State).

HCA Administration

Section 11 will require HCA to work with Medicaid to ensure that the new provider type is covered to provide services. This will require staff effort to prepare a State Plan Amendment (SPA), update billing

Prepared by: Marcia Boyle Page 1 1:24 PM 02/15/23

HCA Fiscal Note

HCA Request #: 23-132

Bill Number: S SB 5189 Behavioral Health Support

guides, review and update rules, update policies and procedures, enroll/update new providers, modify ProviderOne as needed, and update forecast models. HCA anticipates needing 1.0 project FTE to work with Medicaid and to support any updates to rules, policies, and procedures to meet legislative requirements. Then, HCA is requiring 1.0 ongoing FTE needed to support provider enrollment and maintenance work

Administrative costs are calculated at \$39,000 per 1.0 FTE. This cost is included in Object T based on HCA's federally approved cost allocation plan and are included at the Fiscal Analyst 3 classification.

Medicaid Services

Indeterminate fiscal impact.

Adding an additional mental health provider type will expand access to help alleviate deficits related to a lack of available mental health providers, increased demand due to the effects of the ongoing Covid-19 pandemic, and underserved areas where amenities are limited. Rural areas tend to have a deficit of available providers which leads to client service access issues and care delays. Expanded access to mental health services due to a greater number of available providers may result in increased benefit costs and related expenses. However, it is unknown how many behavioral health support specialists would enroll to expand access, and therefore, these costs are indeterminate.

Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) Indeterminate fiscal impact.

Section 12 of this bill adds a new section to RCW 48.43 that states that by July 1, 2025, behavioral health support specialists will be integrated into network access to meet network access standards set by the OIC.

RCW 48.43 governs the fully insured health plans offered by the Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) programs. Because this bill will expand network access to behavioral health support specialist as a covered service, there is an assumed increase to benefit utilization. Due to the unknown magnitude of increased utilization and the unknown reimbursement rate for these providers, the fiscal impact of this section of the bill is indeterminate.

Due to the historic practice of implementing benefit changes in the self-insured Uniform Medical Plan (UMP) when coverage is required in PEBB and SEBB fully insured plans to ensure alignment of benefits in medical plans to reduce adverse selection. Should the impacts of this bill be implemented in the Uniform Medical Plan (UMP), it is assumed that utilization will increase. Due the unknown magnitude of increased utilization and the unknown reimbursement rate for these providers, the fiscal impact of implementing this change in the UMP is indeterminate.

Implementation of this bill could result in increased premiums for the fully insured and the self-insured UMP medical plans which may impact the state medical benefit contribution and employee contributions for health benefits.

II. C - Operating Budget Expenditures

Account	Account Title	Туре	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029
001-1	General Fund	State	82,000	148,000	66,000	66,000	66,000	66,000
001-C	General Fund	Medicaid	67,000	121,000	54,000	54,000	54,000	54,000
		Totals	\$ 149,000	\$ 269,000	\$ 120,000	\$ 120,000	\$ 120,000	\$ 120,000

HCA Fiscal Note

Bill Number: S SB 5189 Behavioral Health Support

HCA Request #: 23-132

II. C - Expenditures by Object Or Purpose

			FY-2025	FY-2026	FY-2027	FY-2028	FY-2029
FTE		1.0	2.3	1.3	1.3	1.3	1.3
Α	Salaries and Wages	90,000	144,000	54,000	54,000	54,000	54,000
В	Employee Benefits	28,000	53,000	25,000	25,000	25,000	25,000
E	Goods and Other Services	2,000	4,000	2,000	2,000	2,000	2,000
T	Intra-Agency Reimbursements	29,000	68,000	39,000	39,000	39,000	39,000
	Totals	\$ 149,000	\$ 269,000	\$ 120,000	\$ 120,000	\$ 120,000	\$ 120,000

II. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation.

Job title	Salary	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029
FISCAL ANALYST 3	65,000	0.2	0.5	0.3	0.3	0.3	0.3
MEDICAL ASSISTANCE SPECIALIST 3	54,000	0.0	1.0	1.0	1.0	1.0	1.0
WMS BAND 02	119,000	0.8	0.8	0.0	0.0	0.0	0.0
Totals		1.0	2.3	1.3	1.3	1.3	1.3

Part IV: Capital Budget Impact

None

Part V: New Rule Making Require

None

Individual State Agency Fiscal Note

DULY 1 5100 C CD	m.,,	D 1 1 11 14			160.000	CT
Bill Number: 5189 S SB	Title:	Behavioral health	support		Agency: 160-Office of Commission	
					Commission	.161
Part I: Estimates						
No Especial Laurent						
No Fiscal Impact						
Estimated Cash Receipts to:						
NONE						
Estimated Operating Expenditure	es from:					
		FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years		0.0	0.2	0.	.1 0.1	0.1
Account						
Insurance Commissioners Regulate	ory	0	19,241	19,24	35,196	35,196
Account-State 138-1	TF 4 1 ft	0	40.044	10.04	1 25 400	25.400
	Total \$	0	19,241	19,24	35,196	35,196
Estimated Capital Budget Impact:						
NONE						
NONE						
				_		
The cash receipts and expenditure es			ie most likely fiscal ii	mpact. Factors is	mpacting the precision o	f these estimates,
and alternate ranges (if appropriate), are expl	ained in Part II.				
Check applicable boxes and follow	w corresp	onding instructions:				
If fiscal impact is greater than form Parts I-V.	\$50,000	per fiscal year in the	e current biennium	or in subseque	nt biennia, complete e	ntire fiscal note
X If fiscal impact is less than \$5	50 000 pe	r fiscal vear in the ci	urrent hiennium or	in subsequent h	piennia complete this	nage only (Part I)
	-	·		in suosequent c	reima, comprete uns	page only (Fart 1).
Capital budget impact, compl	lete Part I	V.				
Requires new rule making, co	omplete P	art V.				
Legislative Contact:				Phone:	Date: 02	2/11/2023
Agency Preparation: Jane Beyo	er		1	Phone: 360-725	-7043 Date: 02	2/16/2023
Agency Approval: Michael V	Wood]	Phone: 360-725	-7007 Date: 02	2/16/2023
OFM Review: Jason Bro	own]	Phone: (360) 74	2-7277 Date: 02	2/16/2023

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

Section 11 requires the Health Care Authority to take any steps necessary to ensure that the services of behavioral health support specialists are covered under the state Medicaid program by January 1, 2025.

Section 12 requires carriers, by July 1, 2025, to provide access to behavioral health support specialists in a manner sufficient to meet the network access standards set forth in rules by the Office of Insurance Commissioner.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

Section 11 requires the Health Care Authority to take any steps necessary to ensure that the services of behavioral health support specialists are covered under the state Medicaid program by January 1, 2025. The Office of Insurance Commissioner (OIC) is responsible for the review and approval of provider contracts for the Medicaid program and the commercial marketplace. For purposes of this fiscal note, OIC assumes this provision will add a new type of licensed entity that will sign and/or negotiate a provider contract with health carriers who administer Medicaid. There are five health carriers that contract with Washington state as Medicaid managed care organizations who will be required to contract with newly licensed behavioral health specialists prior to January 1, 2025, to assure access to behavioral health specialists on January 1, 2025. Each health carrier files approximately 300 Medicaid provider contracts each year, consisting of multiple provider types. OIC assumes health carriers will use template agreements and behavioral health specialists will follow negotiated trends by filing 1 template agreement and approximately 10 unique negotiated provider contracts each year. Each provider contract filing takes an average of four hours of review time requiring a total of 220 hours (11 filings x 4 hours x 5 carriers) of a Functional Program Analyst 3 beginning in FY2025. The OIC will also require one-time costs, in FY2025, of 8 hours of a Functional Program Analyst 4 to develop new review standards, update checklist documents and filing instructions, and train staff.

Section 12 requires carriers, by July 1, 2025, to provide access to behavioral health support specialists in a manner sufficient to meet the network access standards set forth in rules by the OIC. Although this section extends the new provider type to the fully insured market, health carriers already have approved templates for behavioral health provider types that the OIC expects will be used to meet network access standards. Therefore, no fiscal impact to the OIC.

Ongoing Costs:

Salary, benefits and associated costs for .14 FTE Functional Program Analyst 3.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
138-1	Insurance	State	0	19,241	19,241	35,196	35,196
	Commissioners						
	Regulatory Account						
		Total \$	0	19,241	19,241	35,196	35,196

Bill # 5189 S SB

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years		0.2	0.1	0.1	0.1
A-Salaries and Wages		11,251	11,251	20,512	20,512
B-Employee Benefits		4,142	4,142	7,644	7,644
C-Professional Service Contracts					
E-Goods and Other Services		3,848	3,848	7,040	7,040
G-Travel					
J-Capital Outlays					
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services					
P-Debt Service					
S-Interagency Reimbursements					
T-Intra-Agency Reimbursements					
9-					
Total \$	0	19,241	19,241	35,196	35,196

III. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Functional Program Analyst 3	73,260		0.1	0.1	0.1	0.1
Functional Program Analyst 4	99,516		0.0	0.0		
Total FTEs			0.2	0.1	0.1	0.1

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

Individual State Agency Fiscal Note

Bill Number: 5189 S SB Title: Behavioral health support Agency: 303-D	Department of Health
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Part I: Estimates

	No Fi	iscal	Imp	act
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Estimated Cash Receipts to:

ACCOUNT	FY 2024	FY 2025	2023-25	2025-27	2027-29
Health Professions Account-State		227,000	227,000	366,000	373,000
02G-1					
Total \$		227,000	227,000	366,000	373,000

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	1.0	2.6	1.8	1.5	1.5
Account					
General Fund-State 001-1	125,000	207,000	332,000	0	0
Health Professions Account-State	0	133,000	133,000	391,000	392,000
02G-1					
Total \$	125,000	340,000	465,000	391,000	392,000

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

C1	teek approacte cones and renew corresponding monactions.
Х	If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
	If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
	Capital budget impact, complete Part IV.
Χ	Requires new rule making, complete Part V.

Legislative Contact:		Phone:	Date: 02/11/2023
Agency Preparation:	Donna Compton	Phone: 360-236-4538	Date: 02/16/2023
Agency Approval:	Kristin Bettridge	Phone: 3607911657	Date: 02/16/2023
OFM Review:	Robyn Williams	Phone: (360) 704-0525	Date: 02/16/2023

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

This version of the bill allows applicants for a behavioral health support specialist credential to complete a registered apprenticeship in combination with an approved bachelor's degree to meet educational requirements. Changes in this version of the bill do not change the fiscal impact from the original bill.

Costs associated with the department's Healthcare Enforcement and Licensing Management System have been revised from the fiscal note for the previous version of this bill. As a result of these revisions, the estimated fee and revenue have also been revised.

This bill creates a new chapter in Title 18 RCW to certify Behavioral Health Support Specialists.

Section 3: A new section requiring the Department of Health (department) to partner with the University of Washington Department of Psychiatry and Behavioral Sciences to develop rules to implement this chapter by January 1, 2025.

Section 4: A new section stating a person may not represent themselves as a behavioral health support specialist without being certified by the department.

Section 6: A new section requiring the department adopt rules in consultation with the University of Washington.

Section 7: A new section establishing the behavioral health support specialist program under the authority of chapter 18.130 RCW, uniform disciplinary act.

Section 8: A new section requiring the department establish by rule, behavioral health support specialist certification requirements.

Section 9: A new section requiring the department establish the date and location of written exams and establish by rule the exam application deadline. The Secretary of Health (secretary) or his designees shall administer written exams to each applicant and maintain all exam records for a period of not less than one year after the secretary has made and published the decisions. The secretary may approve a written exam prepared or administered by a qualified private organization.

Section 13 and 14: Amends RCW 18.130.040 (Regulation of Health Professions – Uniform Disciplinary Act – Application to certain professions – Authority of secretary – Grant or denial of licenses – Procedural rules) adding certified behavioral health support specialists to the list of professions under the secretary's authority.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

Current law, RCW 43.70.250 (License fees for professions, occupations, and businesses.), requires the department to charge a fee to generate sufficient revenue to fully support the costs of administering its health professions licensing activities.

For the purpose of this fiscal note, a certified behavioral health support specialist fee may range between \$235 and \$285 every year. This fee range is based on the assumption the department will receive one-time general fund-state (GF-S) in FY 2024 and FY 2025 to implement this bill. During the rulemaking process, a fee study will be prepared with proposed fees and provided for stakeholder input. The department will monitor the program fund balance and adjust fees over a six (6) year period to ensure that fees are sufficient to cover all program expenditures.

Assumption: Revenue estimates are based on the assumption that the department will receive general fund-state (GF-S) in FY 2024 and FY 2025 to implement this bill. If GF-S is not appropriated for implementation in FY 2024 and FY 2025, then the fees may range between \$285 and \$335 per certification in order to recover the implementation costs over a six-year horizon.

Washington Administration Code (WAC) 246-12-020 (3) states the initial credential will expire on the practitioner's birthday, except for faculty or postgraduate education credentials authorized by law. Initial credentials issued within ninety days of the practitioner's birthday do not expire until the practitioner's next birthday. Based on this WAC, the department assumes a standard 25 percent of the first-year applications will need to renew their license in the first year as their birthday will fall outside of ninety days from issuance of initial credential. Renewals starting in the second year and each year thereafter are based on the professions current renewal rate.

Estimated revenue for behavioral health support specialists (based on range \$235 - \$285 w/ GF-S):

FY 2025: \$227,000 (700 applications, 172 renewals)

FY 2026: \$183,000 (14 applications; 690 renewals)

FY 2027: \$183,000 (14 applications; 693 renewals)

FY 2028: \$185,000 (14 applications; 696 renewals)

FY 2029: \$188,000 (14 applications; 710 renewals)

FY 2030: \$192,000 (14 applications; 724 renewals)

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

For purposes of this fiscal note, implementation costs are considered costs associated with establishing the Behavioral Health Support Specialist program. This would include 18 months of rulemaking, licensing system configuration, and application updates.

RULEMAKING:

Sections 3: The department will develop and adopt rules to establish the behavioral health support specialist certification program, fees, and minimum education and experience requirements. The department anticipates this will involve complex rulemaking and will take approximately 18 months to complete. Rulemaking will include six stakeholder meetings as well as one formal rules hearing, all held virtually, which allows for stakeholder participation. The department anticipates providing the rules hearing announcement and materials in both English and Spanish and providing ASL and Spanish interpretation services at the rules hearing. The department anticipates rulemaking will be complete on or around January 1, 2025.

The department anticipates utilizing a team of subject matter experts to implement this bill, this team will consist of the program manager, a community engagement manager, and a project manager. Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), the development and publication of a one-pager and interpretive and translation services by the Health Equity and Inclusion office, and Office of Attorney General support in the amount of \$9,000.

FY 2024 costs will be 0.4 FTE and \$53,000 (GF-S) FY 2025 costs will be 0.2 FTE and \$29,000 (GF-S)

HEALTH TECHNOLOGY SOLUTIONS (HTS):

Sections 6 and 8: HTS staff costs of \$24,000 will be required to make a new application to include the certificate for behavioral health support specialists in the Healthcare Enforcement and Licensing Modernization Solution (HELMS). HTS work will include configuration of the new certificate and renewal, creation of a new report, creation of a new application, and support. Configuration in HELMS will require approximately 100 additional hours from the integration vendor at a rate of \$262.50 per hour for a total of \$26,000.

FY 2025 costs will be 0.2 FTE and \$50,000 (GF-S). FY 2026 and ongoing, costs will be 0.1 FTE and \$8,000 (02G).

OFFICE OF CUSTOMER SERVICE (OCS):

Sections 6 and 8: OCS staff will create new certification credentials to be issued for the new credential certified behavioral health support specialist. This includes developing new paper and online application forms, configuration, testing, implementation, training, and updates of the new credential types in HELMS. The new credentials will generate additional calls to the call center for assistance with applying for the new credential. The new credential will increase the number of payments processed by the revenue unit and renewals processed by the renewal unit. Implementation and configuration costs will occur in FY 2024.

FY 2024 costs will be \$2,000 (GF-S). FY 2025 costs will be 0.9 FTE and \$92,000 (02G). FY 2026 costs will be \$2,000 (02G). FY 2027 and ongoing, costs will be \$3,000 (02G).

PROGRAM IMPLEMENTATION AND ADMINISTRATION:

Section 9: The department assumes a program manager will need to be hired to implement and manage the behavioral health support specialist program. Tasks include preparation and administration of the written exams for certified behavioral health support specialist. Work with customer service (OCS) to develop a new profession webpage, frequently asked questions, fee structure, and all necessary visual and written aids. Work with OCS to develop a new written online application packet. Answer inquires by phone and through e-mail, and ongoing questions regarding continuing education units, renewals, and examination requirements.

FY 2024, costs will be 0.6 FTE and \$70,000 (GF-S). FY 2025, costs will be 0.7 FTE and \$41,000 (GF-S) and \$41,000 (02G) FY 2026 and ongoing, costs will be 0.7 FTE and \$82,000 (02G)

DISCIPLINE:

Sections 7: The department assumes a discipline rate of 5.0 percent, which is similar to certified counselors. Based on this, the department estimates 19 complaints per year.

The complaint response process includes five steps: 1) intake, 2) assessment, 3) investigation, 4) case disposition, and 5) adjudication. Staff review the complaint, identify the history of the person complained about, and help assess whether an investigation is needed. In more than half the cases, investigation is needed. The investigator obtains information about the complaint and the respondent and prepares a report detailing the findings. After investigation, the disciplining authority decides whether to pursue legal action. Staff attorneys, paralegals, assistant attorney general and other staff work to develop the legal documents and charge the violation. Most cases are settled, and the staff attorney manages that process. If the respondent asks for a hearing, staff must schedule the hearing, and the health law judge considers all legal motions,

presides over the hearing, and drafts the final order. The Office of the Attorney General (OAG) will represent the department at hearing and may provide advice throughout the disciplinary process. In FY26, OAG costs of \$17,842 and FY27 and ongoing \$13,887.

Cost estimates for the complaint response process associated with this bill were calculated using the department's Disciplinary Workload Model. Estimated discipline costs include staff and associated costs (including goods and services, intra-agency, attorney general costs, and indirect charges).

FY 2025 costs will be 0.6 FTE and \$87,000 (02G).

FY 2026 and ongoing, costs will be 0.8 FTE and \$103,000 (02G) each year.

TOTAL COSTS TO IMPLEMENT THIS BILL ARE:

FY 2024: 1.0 FTE and \$125,000 (GF-S)

FY 2025: 2.6 FTE and \$207,000 (GF-S) and \$133,000 (02G)

FY 2026: 1.5 FTE and \$195,000 (02G-1)

FY 2027 and ongoing: 1.5 FTE and \$196,000 (02G) each year

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
001-1	General Fund	State	125,000	207,000	332,000	0	0
02G-1	Health Professions Account	State	0	133,000	133,000	391,000	392,000
	7 CCOUNT	Total \$	125,000	340,000	465,000	391,000	392,000

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	1.0	2.6	1.8	1.5	1.5
A-Salaries and Wages	78,000	188,000	266,000	241,000	242,000
B-Employee Benefits	30,000	75,000	105,000	90,000	90,000
C-Professional Service Contracts		27,000	27,000		
E-Goods and Other Services	11,000	36,000	47,000	44,000	44,000
T-Intra-Agency Reimbursements	6,000	14,000	20,000	16,000	16,000
9-					
Total \$	125,000	340,000	465,000	391,000	392,000

III. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Fiscal Analyst 2	53,000	0.1	0.4	0.3	0.3	0.3
FORMS & RECORDS ANALYST 1	45,852		0.1	0.1		
HEALTH CARE INVESTIGATOR 3	78,900		0.2	0.1	0.2	0.2
HEALTH SERVICES CONSULTAN	55,872		0.3	0.2	0.1	0.1
1						
HEALTH SERVICES CONSULTAN	66,420		0.1	0.1		
2						
HEALTH SERVICES CONSULTAN	75,120		0.2	0.1	0.1	0.1
3						
HEALTH SERVICES CONSULTAN	82,896	0.6	0.6	0.6	0.5	0.5
4						
Health Svcs Conslt 1	53,000	0.1	0.4	0.3	0.2	0.2
HEARINGS EXAMINER 3	96,156		0.1	0.1	0.1	0.1
MANAGEMENT ANALYST 4	82,896	0.2	0.1	0.2		
WMS02	114,360		0.1	0.1		
Total FTEs		1.0	2.6	1.8	1.5	1.5

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

Section 3: The department will adopt rules in Title 246 WAC as necessary to implement this bill.

Individual State Agency Fiscal Note

Bill Number: 5189 S SB	Title: Behavioral health	support	Age	ency: 360-Universi	ty of Washingto
Part I: Estimates					
No Fiscal Impact					
Estimated Cash Receipts to:					
NONE					
Estimated Operating Expenditure				1	
THE G. MILE	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.5	0.3	0.4	0.0	0.0
Account General Fund-State 001-1	95,619	61,168	156,787	0	0
	Total \$ 95,619	61,168	156,787	0	0
The cash receipts and expenditure es and alternate ranges (if appropriate) Check applicable boxes and follow	, are explained in Part II. w corresponding instructions:				
If fiscal impact is greater than form Parts I-V.	\$50,000 per fiscal year in the	current biennium	or in subsequent b	iennia, complete ent	tire fiscal note
If fiscal impact is less than \$5	0,000 per fiscal year in the cu	irrent biennium or	in subsequent bien	nia, complete this p	age only (Part I)
Capital budget impact, compl	ete Part IV.				
Requires new rule making, co					
Legislative Contact:		P	hone:	Date: 02/	11/2023
Agency Preparation: Charlotte	Shannon	P	Phone: 2066858868	Date: 02/	/13/2023
Agency Approval: Charlotte	Shannon	P	Phone: 2066858868	B Date: 02/	/13/2023

Ramona Nabors

OFM Review:

Date: 02/14/2023

Phone: (360) 742-8948

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

THE SUBSTITUTE BILL MAKES THE FOLLOWING CHANGES:

- Allows BHSS credential applicants to complete a registered apprenticeship approved by the Washington State Apprenticeship and Training Council in combination with an approved bachelor's degree or post-baccalaureate certificate.
- Clarifies that DOH must approve, instead of accredit, educational programs for behavioral health support specialists.
- Directs DOH to collaborate with the UW Department of Psychiatry and Behavioral Sciences, instead of partnering.
 o Adds language "or registered apprenticeship in combination with an approved bachelor's degree or
- o Adds language "or registered apprenticeship in combination with an approved bachelor's degree or postbaccalaureate certificate."
- Removes language directing the Office of the Insurance Commissioner to integrate behavioral health support specialists into network access standards and instead directs carriers to provide access to behavioral health support specialists in a manner sufficient to meet network access standards by July 1, 2025.

FISCAL IMPACTS RESULTING FROM CHANGES:

The UW does not anticipate changes to our fiscal analysis as a result of the substitute bill.

Overall SSB 5189 requires the Department of Health (DOH) to collaborate with the University of Washington and consult with stakeholders to develop rules for the certification for behavioral health support specialists by January 1, 2025. Behavioral health support specialists are defined as persons certified to deliver brief, evidence-based interventions with a scope of practice that includes behavioral health under the supervision of a Washington state credentialed provider who has the ability to assess, diagnose, and treat identifiable mental and behavior health conditions as part of their scope of practice.

The University of Washington Department of Psychiatry and Behavioral Sciences has been developing a curriculum for behavioral health support specialists to support adult patients through a gift from the Ballmer Group. The philanthropic gift covers the cost of developing curriculum, supporting educational materials, and program implementation with partner educational programs for the adult population. Faculty and staff familiar with the curriculum would collaborate with DOH on the rulemaking for behavioral health support specialist certification.

Section 3 of the legislation calls for the University of Washington to collaborate with the Department of Health to develop rules that are consistent with the curriculum that has been developed using philanthropic funding. The costs for this collaboration with DOH are not covered by philanthropic funding and are detailed below under Expenditures.

While the Ballmer Group gift funds existing work on a curriculum to support adult patients, it does not fund similar curriculum development work for children and adolescents. The language in the legislation does not distinguish between an adult curriculum and one for children and adolescents, and does not explicitly require a child and adolescent curriculum to be developed or a related credential developed by DOH. However, the costs for these activities are included in the expenditures section below, should the legislature interpret the bill language to require curriculum for both adults and children/adolescents.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

FISCAL IMPACTS OF SEC. 3:

To accomplish the work to support DOH rulemaking related to a behavioral health support specialist curriculum for adults, the UW Department of Psychiatry and Behavioral Sciences anticipates the following expenditures for a project period of July 1. 2023 – January 1 2025:

- 0.10 FTE in FY24 and 0.0625 FTE in FY25 for a Professor and Director of the UW Integrated Care Training Program (annual salary: \$255,543 benefits rate: 24.1%)
- 0.20 FTE in FY24 and 0.125 FTE in FY25 for an Associate Professor and Director of the Behavioral Health Support Specialist Clinical Training Program (annual salary: \$157,405 benefits rate: 24.1%)
- 0.20 FTE in FY24 and 0.125 FTE in FY25 for Staff Manager of the Behavioral Health Support Specialist Clinical Training Program (annual salary: \$80,000, benefits rate: 31.8%)
- \$2,500 in both FY24 and FY25 in travel costs for travel to Olympia for regular meetings with the DOH team regarding rulemaking, as well as travel to various locations for stakeholder consultation
- \$1,250 in both FY24 and FY25 in goods and services for printing and other office-related costs

In total, we estimate that complying with this bill would cost the UW approximately \$95,619 in FY24 and \$61,168 in FY25, for a total cost of \$156,787.

If the legislature interprets this language to also require a curriculum for children and adolescents, the UW Department of Psychiatry and Behavioral Sciences estimates the following expenditures in a project period of July 1, 2023-June 30, 2025. The fiscal impact of this is detailed below, but is not currently shown in the determinant expenditures tables without additional clarity on interpretation.

- 0.20 FTE in FY 24 and FY 25 for a professor or associate professor of child and family behavioral health (average annual salary of \$277,070 benefit rates are 24.1%)
- 0.20 FTE in FY 24 and FY 25 for a professor or associate professor of child and family behavioral health (average annual salary of \$192,610, benefit rates are 24.1%)
- 0.20 FTE in FY 24 and .125 FTE in FY 25 for a professor or associate professor of adolescent behavioral health (average annual salary of \$291,387, benefit rates are 24.1%)
- 0.20 FTE in FY 24 and .125 FTE in FY 25 for a professor or associate professor of adolescent behavioral health (average annual salary of \$179,220, benefit rates are 24.1%)
- 0.20 FTE in FY 24 and 25 for a professor or associate professor of mental health with specialization in severe mental illness screening, brief intervention and referral for children and adolescents (average annual salary of \$169,950, benefit rates are 24.1%)
- 0.30 FTE in FY 24 and 25 for an instructional designer (average annual salary of \$95,000, benefit rates are 31.8%)

In total, we estimate the cost of creating a behavioral health support specialist curriculum for child and adolescent behavioral health and supporting associated DOH rulemaking to be \$313,124 in FY 24 and \$269,322 in FY 25, or \$582,446 total.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
001-1	General Fund	State	95,619	61,168	156,787	0	0
		Total \$	95,619	61,168	156,787	0	0

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.5	0.3	0.4		
A-Salaries and Wages	73,035	45,647	118,682		
B-Employee Benefits	18,834	11,771	30,605		
C-Professional Service Contracts					
E-Goods and Other Services	1,250	1,250	2,500		
G-Travel	2,500	2,500	5,000		
J-Capital Outlays					
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services					
P-Debt Service					
S-Interagency Reimbursements					
T-Intra-Agency Reimbursements					
9-					
Total \$	95,619	61,168	156,787	0	0

III. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Associate Professor and Director	157,405	0.2	0.1	0.2		
Professor and Director	255,543	0.1	0.1	0.1		
Staff Manager	80,000	0.2	0.1	0.2		
Total FTEs		0.5	0.3	0.4		0.0

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.



Multiple Agency Ten-Year Analysis Summary

Bill Number	Title
5189 S SB	Behavioral health support

This ten-year analysis is limited to the estimated cash receipts associated with the proposed tax or fee increases.

Estimated Cash Receipts

	Fiscal Year 2024	Fiscal Year 2025	Fiscal Year 2026	Fiscal Year 2027	Fiscal Year 2028	Fiscal Year 2029	Fiscal Year 2030	Fiscal Year 2031	Fiscal Year 2032	Fiscal Year 2033	2024-33 TOTAL
Washington State Health Care Authority	0	0	0	0	0	0	0	0	0	0	0
Office of Insurance Commissioner	0	0	0	0	0	0	0	0	0	0	0
Department of Health	0	227,000	183,000	183,000	185,000	188,000	192,000	193,000	193,000	194,000	1,738,000
University of Washington	0	0	0	0	0	0	0	0	0	0	0
Total	0	227,000	183,000	183,000	185,000	188,000	192,000	193,000	193,000	194,000	1,738,000



Bill Number	Title	Agency
5189 S SB	Behavioral health support	107 Washington State Health Care Authority

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp.

Estimates

χ No Cash Receipts		F	Partially I	ndetermi	nate Cas	h Receip	ots	Indeterm	inate Ca	sh Recei	pts
Name of Tax or Fee	Acct Code										

Agency Preparation: Marcia Boyle	Phone: 360-725-0850	Date: 2/15/2023 1:27:46 pm
Agency Approval: Madina Cavendish	Phone: 360-725-0902	Date: 2/15/2023 1:27:46 pm
OFM Review:	Phone:	Date:



Bill Number	Title	Agency						
5189 S SB	Behavioral health support	160 Office of Insurance Commissioner						
This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management en-year projection can be found at http://www.ofm.wa.gov/tax/default.asp.								
Estimates								

X No Cash Receipts		Partially	Indeterm	inate Cas	h Receip	ts	Indeterm	inate Ca	sh Recei _l	pts
Name of Tax or Fee	Acct Code									

Agency Preparation: Jane Beyer	Phone: 360-725-7043	Date: 2/16/2023 10:34:58 an
Agency Approval: Michael Wood	Phone: 360-725-7007	Date: 2/16/2023 10:34:58 an
OFM Review:	Phone:	Date:



Bill Number	Title	Agency
5189 S SB	Behavioral health support	303 Department of Health

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp.

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	No Cash Receipts		Partially Indeterminate Cash Receipts		Indeterminate Cash Receipts
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Estimated Cash Receipts

Name of Tax or Fee	Acct Code	Fiscal Year 2024	Fiscal Year 2025	Fiscal Year 2026	Fiscal Year 2027	Fiscal Year 2028	Fiscal Year 2029	Fiscal Year 2030	Fiscal Year 2031	Fiscal Year 2032	Fiscal Year 2033	2024-33 TOTAL
Behavioral Health Support Specialists	02G		227,000	183,000	183,000	185,000	188,000	192,000	193,000	193,000	194,000	1,738,000
Total			227,000	183,000	183,000	185,000	188,000	192,000	193,000	193,000	194,000	1,738,000

Biennial Totals 227,000 366,000 373,000 385,000 387,000 1,738,000

Narrative Explanation (Required for Indeterminate Cash Receipts)

Current law RCW 43.70.250 requires that the health professions administered by the Department of Health (department) be fully self-supporting and that sufficient revenue collected through fees to fund expenditures in the Health Professions Account. The calculation of specific fees will occur during rulemaking and a fee proposal presented part of the rules package. Revenue collection will begin January 1, 2025. The department estimates 700 new applications in the first year of the program, with a 98.5% renewal rate, and 14 applications per year after the first year. The revenue projections are based on an annual fee of \$260.

Agency Preparation: Donna Compton	Phone: 360-236-4538	Date: 2/16/2023 8:28:21 am
Agency Approval: Kristin Bettridge	Phone: 3607911657	Date: 2/16/2023 8:28:21 am
OFM Review:	Phone:	Date:



Bill Number	Title	Agency					
Behavioral health support 360 University of Washington							
This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp .							
Estimates							

X No Cash Receipts	Partially I	Partially Indeterminate Cash Receipts				Indeterminate Cash Receipts				
Name of Tax or Fee Acct Code										

Agency Preparation: Charlotte Shannon	Phone: 2066858868	Date: 2/13/2023 4:49:10 pm
Agency Approval: Charlotte Shannon	Phone: 2066858868	Date: 2/13/2023 4:49:10 pm
OFM Review:	Phone:	Date: