
SECOND SUBSTITUTE SENATE BILL 6312

State of Washington

63rd Legislature

2014 Regular Session

By Senate Ways & Means (originally sponsored by Senators Darneille, Hargrove, Rolfes, McAuliffe, Ranker, Conway, Cleveland, Fraser, McCoy, Keiser, and Kohl-Welles; by request of Governor Inslee)

READ FIRST TIME 02/11/14.

1 AN ACT Relating to state purchasing of mental health and chemical
2 dependency treatment services; amending RCW 71.24.015, 71.24.016,
3 71.24.025, 71.24.035, 71.24.045, 71.24.100, 71.24.110, 71.24.340,
4 71.24.420, 70.96A.020, 70.96A.040, 70.96A.050, 70.96A.080, and
5 70.96A.320; amending 2013 c 338 s 1 (uncodified); adding a new section
6 to chapter 71.24 RCW; adding a new section to chapter 43.20A RCW;
7 providing an effective date; and declaring an emergency.

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

9 **Sec. 1.** 2013 c 338 s 1 (uncodified) is amended to read as follows:
10 (1)(a) Beginning ((May)) April 1, 2014, the legislature shall
11 convene a task force to examine reform of the adult behavioral health
12 system, with voting members as provided in this subsection.
13 (i) The president of the senate shall appoint one member from each
14 of the two largest caucuses of the senate.
15 (ii) The speaker of the house of representatives shall appoint one
16 member from each of the two largest caucuses in the house of
17 representatives.
18 (iii) The governor shall appoint five members consisting of the
19 secretary of the department of social and health services or the

1 secretary's designee, the director of the health care authority or the
2 director's designee, the director of the office of financial management
3 or the director's designee, the secretary of the department of
4 corrections or the secretary's designee, and a representative of the
5 governor.

6 (iv) The Washington state association of counties shall appoint
7 three members.

8 (v) The governor shall request participation by a representative of
9 tribal governments.

10 (b) The task force shall choose two cochairs from among its
11 legislative members.

12 (c) The task force shall adopt a bottom-up approach and welcome
13 input and participation from all stakeholders interested in the
14 improvement of the adult behavioral health system. To that end, the
15 task force must invite participation from, at a minimum, the following:
16 Behavioral health service recipients and their families; local
17 government; representatives of regional support networks;
18 representatives of county coordinators; law enforcement; city and
19 county jails; tribal representatives; behavioral health service
20 providers; housing providers; labor representatives; counties with
21 state hospitals; mental health advocates; public defenders with
22 involuntary mental health commitment or mental health court experience;
23 medicaid managed care plan representatives; long-term care service
24 providers; the Washington state hospital association; and individuals
25 with expertise in evidence-based and research-based behavioral health
26 service practices. Leadership of subcommittees formed by the task
27 force may be drawn from this body of invited participants.

28 (2) The task force shall undertake a systemwide review of the adult
29 behavioral health system and make recommendations for reform
30 concerning, but not limited to, the following:

31 (a) The means by which services are purchased and delivered for
32 adults with mental illness and chemical dependency disorders through
33 the department of social and health services and the health care
34 authority, including:

35 (i) Advice concerning the proposal for the creation of common
36 regional service areas for purchasing behavioral health and medical
37 care services by the department and the authority, taking into

1 consideration any proposal submitted by the Washington state
2 association of counties under section 2 of this act;

3 (ii) Recommendations related to the design and requirements of
4 future medicaid behavioral health and health care delivery systems and
5 purchasing;

6 (iii) Advice regarding state interactions with the federal centers
7 for medicare and medicaid services regarding Washington state's method
8 of purchasing medicaid mental health services, provided that the
9 federal centers provide written guidance to Washington detailing their
10 rationale for changing state purchasing; and

11 (iv) Whether a statewide behavioral health ombuds office should be
12 created;

13 (b) Availability of effective means to promote recovery and prevent
14 harm associated with mental illness;

15 (c) Crisis services, including boarding of mental health patients
16 outside of regularly certified treatment beds;

17 (d) Best practices for cross-system collaboration between
18 behavioral health treatment providers, medical care providers, long-
19 term care service providers, entities providing health home services to
20 high-risk medicaid clients, law enforcement, and criminal justice
21 agencies; and

22 (e) Public safety practices involving persons with mental illness
23 with forensic involvement.

24 (3) Staff support for the task force must be provided by the senate
25 committee services and the house of representatives office of program
26 research.

27 (4) Legislative members of the task force must be reimbursed for
28 travel expenses in accordance with RCW 44.04.120. Nonlegislative
29 members, except those representing an employer or organization, are
30 entitled to be reimbursed for travel expenses in accordance with RCW
31 43.03.050 and 43.03.060.

32 (5) The expenses of the task force must be paid jointly by the
33 senate and house of representatives. Task force expenditures are
34 subject to approval by the senate facilities and operations committee
35 and the house of representatives executive rules committee, or their
36 successor committees.

37 (6) The task force shall report its findings and recommendations to
38 the governor and the appropriate committees of the legislature by

1 January 1, 2015, except that recommendations under subsection (2)(a)(i)
2 through (iii) of this section must be submitted to the governor by
3 October 1, 2014.

4 (7) This section expires June 1, 2015.

5 NEW SECTION. Sec. 2. A new section is added to chapter 71.24 RCW
6 to read as follows:

7 (1) If establishment of regional service areas is recommended by
8 the adult behavioral health system task force established in section 1,
9 chapter 338, Laws of 2013, the department and the health care authority
10 may jointly establish regional service areas by March 1, 2015, or at an
11 earlier date agreed to by the department, the health care authority,
12 and the Washington association of counties, as provided in this
13 section.

14 (2) Counties, through the Washington state association of counties,
15 must be given the opportunity to propose the composition of regional
16 service areas. Each service area must:

17 (a) Include a sufficient number of medicaid lives to support full
18 financial risk managed care contracting for services included in
19 contracts with the department or the health care authority;

20 (b) Include full counties that are contiguous with one another; and

21 (c) Reflect natural medical and behavioral health service referral
22 patterns and shared clinical, health care service, behavioral health
23 service, and behavioral health crisis response resources.

24 (3) The Washington state association of counties may submit its
25 recommendations to the department, the health care authority, and the
26 task force described in section 1 of this act on or before September 1,
27 2014.

28 NEW SECTION. Sec. 3. A new section is added to chapter 43.20A RCW
29 to read as follows:

30 (1) Any agreement or contract by the department or the health care
31 authority to provide behavioral health services as defined under RCW
32 71.24.025 to persons eligible for benefits under medicaid, Title XIX of
33 the social security act, and to persons not eligible for medicaid must
34 include the following:

35 (a) Contractual provisions consistent with the intent expressed in
36 RCW 71.24.015, 71.36.005, 70.96A.010, and 70.96A.011;

1 (b) Standards regarding the quality of services to be provided,
2 including increased use of evidence-based, research-based, and
3 promising practices, as defined in RCW 71.24.025;

4 (c) Accountability for the client outcomes established in RCW
5 43.20A.895 and 71.36.025 and performance measures linked to those
6 outcomes;

7 (d) Standards requiring regional support networks to maintain a
8 network of appropriate providers that is supported by written
9 agreements sufficient to provide adequate access to all services
10 covered under the contract with the department or the health care
11 authority and to protect essential existing behavioral health system
12 infrastructure and capacity;

13 (e) Standards requiring the use of behavioral health service
14 provider reimbursement methods that incentivize improved performance
15 with respect to the client outcomes established in RCW 43.20A.895 and
16 71.36.025, integration of behavioral health and primary care services
17 at the clinical level, and improved care coordination for individuals
18 with complex care needs;

19 (f) Standards related to the financial integrity of the responding
20 organization. The department shall adopt rules establishing the
21 solvency requirements and other financial integrity standards for
22 regional support networks. This subsection does not limit the
23 authority of the department to take action under a contract upon
24 finding that a regional support network's financial status seriously
25 jeopardizes the organization's ability to meet its contractual
26 obligations;

27 (g) Mechanisms for monitoring performance under the contract and
28 remedies for failure to substantially comply with the requirements of
29 the contract including, but not limited to, financial penalties,
30 termination of the contract, receivership, and reprocurement of the
31 contract;

32 (h) Provisions to maintain the decision-making independence of
33 designated mental health professionals; and

34 (i) Provisions stating that public funds appropriated by the
35 legislature may not be used to promote or deter, encourage, or
36 discourage employees from exercising their rights under Title 29,
37 chapter 7, subchapter II, United States Code or chapter 41.56 RCW.

1 (2) The following factors must be given significant weight in any
2 purchasing process:

3 (a) Demonstrated commitment and experience in serving low-income
4 populations;

5 (b) Demonstrated commitment and experience serving persons who have
6 severe mental illness or chemical dependency;

7 (c) Demonstrated commitment to and experience with partnerships
8 with county and municipal criminal justice systems, housing services,
9 and other critical support services necessary to achieve the outcomes
10 established in RCW 43.20A.895 and 71.36.025;

11 (d) Recognition that meeting enrollees' physical and behavioral
12 health care needs is a shared responsibility of contracted regional
13 support networks, managed health care systems, service providers, the
14 state, and communities, and that the delivery of better integrated,
15 person-centered care requires the full spectrum of an individual's
16 health care needs be addressed;

17 (e) Consideration of past and current performance and participation
18 in other state or federal behavioral health programs as a contractor;
19 and

20 (f) The ability to meet requirements established by the department.

21 (3) For purposes of purchasing behavioral health services and
22 medical care services for persons eligible for benefits under medicaid,
23 Title XIX of the social security act and for persons not eligible for
24 medicaid, the department and the health care authority must use common
25 regional service areas. The regional service areas must be established
26 by the department and the health care authority as provided in section
27 2 of this act.

28 (4) Consideration must be given to using multiple-year contracting
29 periods.

30 **Sec. 4.** RCW 71.24.015 and 2005 c 503 s 1 are each amended to read
31 as follows:

32 It is the intent of the legislature to establish a community mental
33 health program which shall help people experiencing mental illness to
34 retain a respected and productive position in the community. This will
35 be accomplished through programs that focus on resilience and recovery,
36 and practices that are evidence-based, research-based, consensus-based,

1 or, where these do not exist, promising or emerging best practices,
2 which provide for:

3 (1) Access to mental health services for adults (~~(of the state who~~
4 ~~are acutely mentally ill, chronically mentally ill,)~~) with acute mental
5 illness, chronic mental illness, or who are seriously disturbed and
6 children (~~(of the state who are acutely mentally ill)~~) with acute
7 mental illness, or who are severely emotionally disturbed, or seriously
8 disturbed, which services recognize the special needs of underserved
9 populations, including minorities, children, the elderly, (~~(disabled)~~)
10 individuals with disabilities, and low-income persons. Access to
11 mental health services shall not be limited by a person's history of
12 confinement in a state, federal, or local correctional facility. It is
13 also the purpose of this chapter to promote the early identification of
14 (~~(mentally ill)~~) children with mental illness and to ensure that they
15 receive the mental health care and treatment which is appropriate to
16 their developmental level. This care should improve home, school, and
17 community functioning, maintain children in a safe and nurturing home
18 environment, and should enable treatment decisions to be made in
19 response to clinical needs in accordance with sound professional
20 judgment while also recognizing parents' rights to participate in
21 treatment decisions for their children;

22 (2) The involvement of persons with mental illness, their family
23 members, and advocates in designing and implementing mental health
24 services that reduce unnecessary hospitalization and incarceration and
25 promote the recovery and employment of persons with mental illness. To
26 improve the quality of services available and promote the
27 rehabilitation, recovery, and reintegration of persons with mental
28 illness, consumer and advocate participation in mental health services
29 is an integral part of the community mental health system and shall be
30 supported;

31 (3) Accountability of efficient and effective services through
32 state-of-the-art outcome and performance measures and statewide
33 standards for monitoring client and system outcomes, performance, and
34 reporting of client and system outcome information. These processes
35 shall be designed so as to maximize the use of available resources for
36 direct care of people with a mental illness and to assure uniform data
37 collection across the state;

38 (4) Minimum service delivery standards;

1 (5) Priorities for the use of available resources for the care of
2 (~~the mentally ill~~) individuals with mental illness consistent with
3 the priorities defined in the statute;

4 (6) Coordination of services within the department, including those
5 divisions within the department that provide services to children,
6 between the department and the office of the superintendent of public
7 instruction, and among state mental hospitals, county authorities,
8 regional support networks, community mental health services, and other
9 support services, which shall to the maximum extent feasible also
10 include the families of (~~the mentally ill~~) individuals with mental
11 illness, and other service providers; and

12 (7) Coordination of services aimed at reducing duplication in
13 service delivery and promoting complementary services among all
14 entities that provide mental health services to adults and children.

15 It is the policy of the state to encourage the provision of a full
16 range of treatment and rehabilitation services in the state for mental
17 disorders including services operated by consumers and advocates. The
18 legislature intends to encourage the development of regional mental
19 health services with adequate local flexibility to assure eligible
20 people in need of care access to the least-restrictive treatment
21 alternative appropriate to their needs, and the availability of
22 treatment components to assure continuity of care. To this end,
23 counties (~~are encouraged to~~) must enter into joint operating
24 agreements with other counties to form regional systems of care that
25 are consistent with the regional service areas established under
26 section 2 of this act. Regional systems of care, whether operated by
27 a county, group of counties, or another entity shall integrate
28 planning, administration, and service delivery duties under chapters
29 71.05 and 71.24 RCW to consolidate administration, reduce
30 administrative layering, and reduce administrative costs. The
31 legislature hereby finds and declares that sound fiscal management
32 requires vigilance to ensure that funds appropriated by the legislature
33 for the provision of needed community mental health programs and
34 services are ultimately expended solely for the purpose for which they
35 were appropriated, and not for any other purpose.

36 It is further the intent of the legislature to integrate the
37 provision of services to provide continuity of care through all phases

1 of treatment. To this end, the legislature intends to promote active
2 engagement with ~~((mentally ill))~~ persons with mental illness and
3 collaboration between families and service providers.

4 **Sec. 5.** RCW 71.24.016 and 2006 c 333 s 102 are each amended to
5 read as follows:

6 (1) The legislature intends that eastern and western state
7 hospitals shall operate as clinical centers for handling the most
8 complicated long-term care needs of patients with a primary diagnosis
9 of mental disorder. It is further the intent of the legislature that
10 the community mental health service delivery system focus on
11 maintaining ~~((mentally ill))~~ individuals with mental illness in the
12 community. The program shall be evaluated and managed through a
13 limited number of outcome and performance measures ~~((designed to hold
14 each regional support network accountable for program success))~~, as
15 provided in RCW 43.20A.895 and 71.36.025.

16 (2) The legislature intends to address the needs of people with
17 mental disorders with a targeted, coordinated, and comprehensive set of
18 evidence-based practices that are effective in serving individuals in
19 their community and will reduce the need for placements in state mental
20 hospitals. The legislature further intends to explicitly hold regional
21 support networks accountable for serving people with mental disorders
22 within the boundaries of their ~~((geographic boundaries))~~ procurement
23 regions and for not exceeding their allocation of state hospital beds.
24 Within funds appropriated by the legislature for this purpose, regional
25 support networks shall develop the means to serve the needs of people
26 with mental disorders within ~~((their geographic))~~ the boundaries of
27 their procurement region. Elements of the program may include:

- 28 (a) Crisis ~~((triage))~~ diversion services;
29 (b) Evaluation and treatment and community hospital beds;
30 (c) Residential beds;
31 (d) Programs for community treatment teams; ~~((and))~~
32 (e) Outpatient services;
33 (f) Peer support services;
34 (g) Community support services;
35 (h) Resource management services; and
36 (i) Supported housing and supported employment services.

1 (3) The regional support network shall have the flexibility, within
2 the funds appropriated by the legislature for this purpose and the
3 terms of their contract, to design the mix of services that will be
4 most effective within their service area of meeting the needs of people
5 with mental disorders and avoiding placement of such individuals at the
6 state mental hospital. Regional support networks are encouraged to
7 maximize the use of evidence-based practices and alternative resources
8 with the goal of substantially reducing and potentially eliminating the
9 use of institutions for mental diseases.

10 **Sec. 6.** RCW 71.24.025 and 2013 c 338 s 5 are each amended to read
11 as follows:

12 Unless the context clearly requires otherwise, the definitions in
13 this section apply throughout this chapter.

14 (1) "Acutely mentally ill" means a condition which is limited to a
15 short-term severe crisis episode of:

16 (a) A mental disorder as defined in RCW 71.05.020 or, in the case
17 of a child, as defined in RCW 71.34.020;

18 (b) Being gravely disabled as defined in RCW 71.05.020 or, in the
19 case of a child, a gravely disabled minor as defined in RCW 71.34.020;
20 or

21 (c) Presenting a likelihood of serious harm as defined in RCW
22 71.05.020 or, in the case of a child, as defined in RCW 71.34.020.

23 (2) "Available resources" means funds appropriated for the purpose
24 of providing community mental health programs, federal funds, except
25 those provided according to Title XIX of the Social Security Act, and
26 state funds appropriated under this chapter or chapter 71.05 RCW by the
27 legislature during any biennium for the purpose of providing
28 residential services, resource management services, community support
29 services, and other mental health services. This does not include
30 funds appropriated for the purpose of operating and administering the
31 state psychiatric hospitals.

32 (3) "Behavioral health services" means mental health services as
33 described in this chapter and chemical dependency treatment services as
34 described in chapter 70.96A RCW.

35 (4) "Child" means a person under the age of eighteen years.

36 ((+4)) (5) "Chronically mentally ill adult" or "adult who is

1 chronically mentally ill" means an adult who has a mental disorder and
2 meets at least one of the following criteria:

3 (a) Has undergone two or more episodes of hospital care for a
4 mental disorder within the preceding two years; or

5 (b) Has experienced a continuous psychiatric hospitalization or
6 residential treatment exceeding six months' duration within the
7 preceding year; or

8 (c) Has been unable to engage in any substantial gainful activity
9 by reason of any mental disorder which has lasted for a continuous
10 period of not less than twelve months. "Substantial gainful activity"
11 shall be defined by the department by rule consistent with Public Law
12 92-603, as amended.

13 ~~((+5))~~ (6) "Clubhouse" means a community-based program that
14 provides rehabilitation services and is certified by the department of
15 social and health services.

16 ~~((+6))~~ (7) "Community mental health program" means all mental
17 health services, activities, or programs using available resources.

18 ~~((+7))~~ (8) "Community mental health service delivery system" means
19 public or private agencies that provide services specifically to
20 persons with mental disorders as defined under RCW 71.05.020 and
21 receive funding from public sources.

22 ~~((+8))~~ (9) "Community support services" means services authorized,
23 planned, and coordinated through resource management services
24 including, at a minimum, assessment, diagnosis, emergency crisis
25 intervention available twenty-four hours, seven days a week,
26 prescreening determinations for persons who are mentally ill being
27 considered for placement in nursing homes as required by federal law,
28 screening for patients being considered for admission to residential
29 services, diagnosis and treatment for children who are acutely mentally
30 ill or severely emotionally disturbed discovered under screening
31 through the federal Title XIX early and periodic screening, diagnosis,
32 and treatment program, investigation, legal, and other nonresidential
33 services under chapter 71.05 RCW, case management services, psychiatric
34 treatment including medication supervision, counseling, psychotherapy,
35 assuring transfer of relevant patient information between service
36 providers, recovery services, and other services determined by regional
37 support networks.

1 ~~((9))~~ (10) "Consensus-based" means a program or practice that has
2 general support among treatment providers and experts, based on
3 experience or professional literature, and may have anecdotal or case
4 study support, or that is agreed but not possible to perform studies
5 with random assignment and controlled groups.

6 ~~((10))~~ (11) "County authority" means the board of county
7 commissioners, county council, or county executive having authority to
8 establish a community mental health program, or two or more of the
9 county authorities specified in this subsection which have entered into
10 an agreement to provide a community mental health program.

11 ~~((11))~~ (12) "Department" means the department of social and
12 health services.

13 ~~((12))~~ (13) "Designated mental health professional" means a
14 mental health professional designated by the county or other authority
15 authorized in rule to perform the duties specified in this chapter.

16 ~~((13))~~ (14) "Emerging best practice" or "promising practice"
17 means a program or practice that, based on statistical analyses or a
18 well established theory of change, shows potential for meeting the
19 evidence-based or research-based criteria, which may include the use of
20 a program that is evidence-based for outcomes other than those listed
21 in subsection ~~((14))~~ (15) of this section.

22 ~~((14))~~ (15) "Evidence-based" means a program or practice that has
23 been tested in heterogeneous or intended populations with multiple
24 randomized, or statistically controlled evaluations, or both; or one
25 large multiple site randomized, or statistically controlled evaluation,
26 or both, where the weight of the evidence from a systemic review
27 demonstrates sustained improvements in at least one outcome.
28 "Evidence-based" also means a program or practice that can be
29 implemented with a set of procedures to allow successful replication in
30 Washington and, when possible, is determined to be cost-beneficial.

31 ~~((15))~~ (16) "Licensed service provider" means an entity licensed
32 according to this chapter or chapter 71.05 RCW or an entity deemed to
33 meet state minimum standards as a result of accreditation by a
34 recognized behavioral health accrediting body recognized and having a
35 current agreement with the department, that meets state minimum
36 standards or persons licensed under chapter 18.57, 18.71, 18.83, or
37 18.79 RCW, as it applies to registered nurses and advanced registered
38 nurse practitioners.

1 ~~((16))~~ (17) "Long-term inpatient care" means inpatient services
2 for persons committed for, or voluntarily receiving intensive treatment
3 for, periods of ninety days or greater under chapter 71.05 RCW. "Long-
4 term inpatient care" as used in this chapter does not include: (a)
5 Services for individuals committed under chapter 71.05 RCW who are
6 receiving services pursuant to a conditional release or a court-ordered
7 less restrictive alternative to detention; or (b) services for
8 individuals voluntarily receiving less restrictive alternative
9 treatment on the grounds of the state hospital.

10 ~~((17))~~ (18) "Mental health services" means all services provided
11 by regional support networks and other services provided by the state
12 for persons who are mentally ill.

13 ~~((18))~~ (19) "Mentally ill persons," "persons who are mentally
14 ill," and "the mentally ill" mean persons and conditions defined in
15 subsections (1), ~~((4), (27), and (28))~~ (5), (28), and (29) of this
16 section.

17 ~~((19))~~ (20) "Recovery" means the process in which people are able
18 to live, work, learn, and participate fully in their communities.

19 ~~((20))~~ (21) "Regional support network" means a county authority
20 or group of county authorities or other entity recognized by the
21 secretary in contract in a defined ~~((region))~~ regional service area.

22 ~~((21))~~ (22) "Registration records" include all the records of the
23 department, regional support networks, treatment facilities, and other
24 persons providing services to the department, county departments, or
25 facilities which identify persons who are receiving or who at any time
26 have received services for mental illness.

27 ~~((22))~~ (23) "Research-based" means a program or practice that has
28 been tested with a single randomized, or statistically controlled
29 evaluation, or both, demonstrating sustained desirable outcomes; or
30 where the weight of the evidence from a systemic review supports
31 sustained outcomes as described in subsection ~~((14))~~ (15) of this
32 section but does not meet the full criteria for evidence-based.

33 ~~((23))~~ (24) "Residential services" means a complete range of
34 residences and supports authorized by resource management services and
35 which may involve a facility, a distinct part thereof, or services
36 which support community living, for persons who are acutely mentally
37 ill, adults who are chronically mentally ill, children who are severely
38 emotionally disturbed, or adults who are seriously disturbed and

1 determined by the regional support network to be at risk of becoming
2 acutely or chronically mentally ill. The services shall include at
3 least evaluation and treatment services as defined in chapter 71.05
4 RCW, acute crisis respite care, long-term adaptive and rehabilitative
5 care, and supervised and supported living services, and shall also
6 include any residential services developed to service persons who are
7 mentally ill in nursing homes, assisted living facilities, and adult
8 family homes, and may include outpatient services provided as an
9 element in a package of services in a supported housing model.
10 Residential services for children in out-of-home placements related to
11 their mental disorder shall not include the costs of food and shelter,
12 except for children's long-term residential facilities existing prior
13 to January 1, 1991.

14 ~~((+24))~~ (25) "Resilience" means the personal and community
15 qualities that enable individuals to rebound from adversity, trauma,
16 tragedy, threats, or other stresses, and to live productive lives.

17 ~~((+25))~~ (26) "Resource management services" mean the planning,
18 coordination, and authorization of residential services and community
19 support services administered pursuant to an individual service plan
20 for: (a) Adults and children who are acutely mentally ill; (b) adults
21 who are chronically mentally ill; (c) children who are severely
22 emotionally disturbed; or (d) adults who are seriously disturbed and
23 determined solely by a regional support network to be at risk of
24 becoming acutely or chronically mentally ill. Such planning,
25 coordination, and authorization shall include mental health screening
26 for children eligible under the federal Title XIX early and periodic
27 screening, diagnosis, and treatment program. Resource management
28 services include seven day a week, twenty-four hour a day availability
29 of information regarding enrollment of adults and children who are
30 mentally ill in services and their individual service plan to
31 designated mental health professionals, evaluation and treatment
32 facilities, and others as determined by the regional support network.

33 ~~((+26))~~ (27) "Secretary" means the secretary of social and health
34 services.

35 ~~((+27))~~ (28) "Seriously disturbed person" means a person who:

36 (a) Is gravely disabled or presents a likelihood of serious harm to
37 himself or herself or others, or to the property of others, as a result
38 of a mental disorder as defined in chapter 71.05 RCW;

1 (b) Has been on conditional release status, or under a less
2 restrictive alternative order, at some time during the preceding two
3 years from an evaluation and treatment facility or a state mental
4 health hospital;

5 (c) Has a mental disorder which causes major impairment in several
6 areas of daily living;

7 (d) Exhibits suicidal preoccupation or attempts; or

8 (e) Is a child diagnosed by a mental health professional, as
9 defined in chapter 71.34 RCW, as experiencing a mental disorder which
10 is clearly interfering with the child's functioning in family or school
11 or with peers or is clearly interfering with the child's personality
12 development and learning.

13 ((+28)) (29) "Severely emotionally disturbed child" or "child who
14 is severely emotionally disturbed" means a child who has been
15 determined by the regional support network to be experiencing a mental
16 disorder as defined in chapter 71.34 RCW, including those mental
17 disorders that result in a behavioral or conduct disorder, that is
18 clearly interfering with the child's functioning in family or school or
19 with peers and who meets at least one of the following criteria:

20 (a) Has undergone inpatient treatment or placement outside of the
21 home related to a mental disorder within the last two years;

22 (b) Has undergone involuntary treatment under chapter 71.34 RCW
23 within the last two years;

24 (c) Is currently served by at least one of the following child-
25 serving systems: Juvenile justice, child-protection/welfare, special
26 education, or developmental disabilities;

27 (d) Is at risk of escalating maladjustment due to:

28 (i) Chronic family dysfunction involving a caretaker who is
29 mentally ill or inadequate;

30 (ii) Changes in custodial adult;

31 (iii) Going to, residing in, or returning from any placement
32 outside of the home, for example, psychiatric hospital, short-term
33 inpatient, residential treatment, group or foster home, or a
34 correctional facility;

35 (iv) Subject to repeated physical abuse or neglect;

36 (v) Drug or alcohol abuse; or

37 (vi) Homelessness.

1 (~~(+29+)~~) (30) "State minimum standards" means minimum requirements
2 established by rules adopted by the secretary and necessary to
3 implement this chapter for: (a) Delivery of mental health services;
4 (b) licensed service providers for the provision of mental health
5 services; (c) residential services; and (d) community support services
6 and resource management services.

7 (~~(+30+)~~) (31) "Treatment records" include registration and all
8 other records concerning persons who are receiving or who at any time
9 have received services for mental illness, which are maintained by the
10 department, by regional support networks and their staffs, and by
11 treatment facilities. Treatment records do not include notes or
12 records maintained for personal use by a person providing treatment
13 services for the department, regional support networks, or a treatment
14 facility if the notes or records are not available to others.

15 (~~(+31+)~~) (32) "Tribal authority," for the purposes of this section
16 and RCW 71.24.300 only, means: The federally recognized Indian tribes
17 and the major Indian organizations recognized by the secretary insofar
18 as these organizations do not have a financial relationship with any
19 regional support network that would present a conflict of interest.

20 **Sec. 7.** RCW 71.24.035 and 2013 c 200 s 24 are each amended to read
21 as follows:

22 (1) The department is designated as the state mental health
23 authority.

24 (2) The secretary shall provide for public, client, and licensed
25 service provider participation in developing the state mental health
26 program, developing contracts with regional support networks, and any
27 waiver request to the federal government under medicaid.

28 (3) The secretary shall provide for participation in developing the
29 state mental health program for children and other underserved
30 populations, by including representatives on any committee established
31 to provide oversight to the state mental health program.

32 (4) The secretary shall be designated as the regional support
33 network if the regional support network fails to meet state minimum
34 standards or refuses to exercise responsibilities under RCW 71.24.045,
35 until such time as a new regional support network is designated under
36 RCW 71.24.320.

37 (5) The secretary shall:

1 (a) Develop a biennial state mental health program that
2 incorporates regional biennial needs assessments and regional mental
3 health service plans and state services for adults and children with
4 mental illness(~~(. The secretary shall also develop a six-year state~~
5 ~~mental health plan))~~);

6 (b) Assure that any regional support network or county community
7 mental health program provides (~~(access to treatment for the region's~~
8 ~~residents, including parents who are respondents in dependency cases,~~
9 ~~in the following order of priority: (i) Persons with acute mental~~
10 ~~illness; (ii) adults with chronic mental illness and children who are~~
11 ~~severely emotionally disturbed; and (iii) persons who are seriously~~
12 ~~disturbed. Such programs shall provide:~~

13 ~~(A) Outpatient services;~~

14 ~~(B) Emergency care services for twenty-four hours per day;~~

15 ~~(C) Day treatment for persons with mental illness which includes~~
16 ~~training in basic living and social skills, supported work, vocational~~
17 ~~rehabilitation, and day activities. Such services may include~~
18 ~~therapeutic treatment. In the case of a child, day treatment includes~~
19 ~~age-appropriate basic living and social skills, educational and~~
20 ~~prevocational services, day activities, and therapeutic treatment;~~

21 ~~(D) Screening for patients being considered for admission to state~~
22 ~~mental health facilities to determine the appropriateness of admission;~~

23 ~~(E) Employment services, which may include supported employment,~~
24 ~~transitional work, placement in competitive employment, and other work-~~
25 ~~related services, that result in persons with mental illness becoming~~
26 ~~engaged in meaningful and gainful full or part-time work. Other~~
27 ~~sources of funding such as the division of vocational rehabilitation~~
28 ~~may be utilized by the secretary to maximize federal funding and~~
29 ~~provide for integration of services;~~

30 ~~(F) Consultation and education services; and~~

31 ~~(G) Community support services))~~ medically necessary services to
32 medicaid recipients consistent with the state's medicaid state plan or
33 federal waiver authorities, and nonmedicaid services consistent with
34 priorities established by the department;

35 (c) Develop and adopt rules establishing state minimum standards
36 for the delivery of mental health services pursuant to RCW 71.24.037
37 including, but not limited to:

1 (i) Licensed service providers. These rules shall permit a county-
2 operated mental health program to be licensed as a service provider
3 subject to compliance with applicable statutes and rules. The
4 secretary shall provide for deeming of compliance with state minimum
5 standards for those entities accredited by recognized behavioral health
6 accrediting bodies recognized and having a current agreement with the
7 department;

8 (ii) Regional support networks; and

9 (iii) Inpatient services, evaluation and treatment services and
10 facilities under chapter 71.05 RCW, resource management services, and
11 community support services;

12 (d) Assure that the special needs of persons who are minorities,
13 elderly, disabled, children, low-income, and parents who are
14 respondents in dependency cases are met within the priorities
15 established in this section;

16 (e) Establish a standard contract or contracts, consistent with
17 state minimum standards, RCW 71.24.320 and 71.24.330, which shall be
18 used in contracting with regional support networks. The standard
19 contract shall include a maximum fund balance, which shall be
20 consistent with that required by federal regulations or waiver
21 stipulations;

22 (f) Establish, to the extent possible, a standardized auditing
23 procedure which is designed to assure compliance with contractual
24 agreements authorized by this chapter and minimizes paperwork
25 requirements of regional support networks and licensed service
26 providers. The audit procedure shall focus on the outcomes of service
27 (~~and not the processes for accomplishing them~~) as provided in RCW
28 43.20A.895 and 71.36.025;

29 (g) Develop and maintain an information system to be used by the
30 state and regional support networks that includes a tracking method
31 which allows the department and regional support networks to identify
32 mental health clients' participation in any mental health service or
33 public program on an immediate basis. The information system shall not
34 include individual patient's case history files. Confidentiality of
35 client information and records shall be maintained as provided in this
36 chapter and chapter 70.02 RCW;

37 (h) License service providers who meet state minimum standards;

1 (i) ~~((Certify regional support networks that meet state minimum~~
2 ~~standards;~~
3 ~~(j))~~ Periodically monitor the compliance of certified regional
4 support networks and their network of licensed service providers for
5 compliance with the contract between the department, the regional
6 support network, and federal and state rules at reasonable times and in
7 a reasonable manner;
8 ~~((k))~~ (j) Fix fees to be paid by evaluation and treatment centers
9 to the secretary for the required inspections;
10 ~~((l))~~ (k) Monitor and audit regional support networks and
11 licensed service providers as needed to assure compliance with
12 contractual agreements authorized by this chapter;
13 ~~((m))~~ (l) Adopt such rules as are necessary to implement the
14 department's responsibilities under this chapter;
15 ~~((n))~~ (m) Assure the availability of an appropriate amount, as
16 determined by the legislature in the operating budget by amounts
17 appropriated for this specific purpose, of community-based,
18 geographically distributed residential services;
19 ~~((o))~~ (n) Certify crisis stabilization units that meet state
20 minimum standards;
21 ~~((p))~~ (o) Certify clubhouses that meet state minimum standards;
22 and
23 ~~((q))~~ (p) Certify triage facilities that meet state minimum
24 standards.
25 (6) The secretary shall use available resources only for regional
26 support networks, except:
27 (a) To the extent authorized, and in accordance with any priorities
28 or conditions specified, in the biennial appropriations act; or
29 (b) To incentivize improved performance with respect to the client
30 outcomes established in RCW 43.20A.895 and 71.36.025, integration of
31 behavioral health and primary care services at the clinical level, and
32 improved care coordination for individuals with complex care needs.
33 (7) Each certified regional support network and licensed service
34 provider shall file with the secretary, on request, such data,
35 statistics, schedules, and information as the secretary reasonably
36 requires. A certified regional support network or licensed service
37 provider which, without good cause, fails to furnish any data,

1 statistics, schedules, or information as requested, or files fraudulent
2 reports thereof, may have its certification or license revoked or
3 suspended.

4 (8) The secretary may suspend, revoke, limit, or restrict a
5 certification or license, or refuse to grant a certification or license
6 for failure to conform to: (a) The law; (b) applicable rules and
7 regulations; (c) applicable standards; or (d) state minimum standards.

8 (9) The superior court may restrain any regional support network or
9 service provider from operating without certification or a license or
10 any other violation of this section. The court may also review,
11 pursuant to procedures contained in chapter 34.05 RCW, any denial,
12 suspension, limitation, restriction, or revocation of certification or
13 license, and grant other relief required to enforce the provisions of
14 this chapter.

15 (10) Upon petition by the secretary, and after hearing held upon
16 reasonable notice to the facility, the superior court may issue a
17 warrant to an officer or employee of the secretary authorizing him or
18 her to enter at reasonable times, and examine the records, books, and
19 accounts of any regional support network or service provider refusing
20 to consent to inspection or examination by the authority.

21 (11) Notwithstanding the existence or pursuit of any other remedy,
22 the secretary may file an action for an injunction or other process
23 against any person or governmental unit to restrain or prevent the
24 establishment, conduct, or operation of a regional support network or
25 service provider without certification or a license under this chapter.

26 (12) The standards for certification of evaluation and treatment
27 facilities shall include standards relating to maintenance of good
28 physical and mental health and other services to be afforded persons
29 pursuant to this chapter and chapters 71.05 and 71.34 RCW, and shall
30 otherwise assure the effectuation of the purposes of these chapters.

31 (13) The standards for certification of crisis stabilization units
32 shall include standards that:

33 (a) Permit location of the units at a jail facility if the unit is
34 physically separate from the general population of the jail;

35 (b) Require administration of the unit by mental health
36 professionals who direct the stabilization and rehabilitation efforts;
37 and

1 (c) Provide an environment affording security appropriate with the
2 alleged criminal behavior and necessary to protect the public safety.

3 (14) The standards for certification of a clubhouse shall at a
4 minimum include:

5 (a) The facilities may be peer-operated and must be
6 recovery-focused;

7 (b) Members and employees must work together;

8 (c) Members must have the opportunity to participate in all the
9 work of the clubhouse, including administration, research, intake and
10 orientation, outreach, hiring, training and evaluation of staff, public
11 relations, advocacy, and evaluation of clubhouse effectiveness;

12 (d) Members and staff and ultimately the clubhouse director must be
13 responsible for the operation of the clubhouse, central to this
14 responsibility is the engagement of members and staff in all aspects of
15 clubhouse operations;

16 (e) Clubhouse programs must be comprised of structured activities
17 including but not limited to social skills training, vocational
18 rehabilitation, employment training and job placement, and community
19 resource development;

20 (f) Clubhouse programs must provide in-house educational programs
21 that significantly utilize the teaching and tutoring skills of members
22 and assist members by helping them to take advantage of adult education
23 opportunities in the community;

24 (g) Clubhouse programs must focus on strengths, talents, and
25 abilities of its members;

26 (h) The work-ordered day may not include medication clinics, day
27 treatment, or other therapy programs within the clubhouse.

28 (15) The department shall distribute appropriated state and federal
29 funds in accordance with any priorities, terms, or conditions specified
30 in the appropriations act.

31 (16) The secretary shall assume all duties assigned to the
32 nonparticipating regional support networks under chapters 71.05 and
33 71.34 RCW and this chapter. Such responsibilities shall include those
34 which would have been assigned to the nonparticipating counties in
35 regions where there are not participating regional support networks.

36 The regional support networks, or the secretary's assumption of all
37 responsibilities under chapters 71.05 and 71.34 RCW and this chapter,
38 shall be included in all state and federal plans affecting the state

1 mental health program including at least those required by this
2 chapter, the medicaid program, and P.L. 99-660. Nothing in these plans
3 shall be inconsistent with the intent and requirements of this chapter.

4 (17) The secretary shall:

5 (a) Disburse funds for the regional support networks within sixty
6 days of approval of the biennial contract. The department must either
7 approve or reject the biennial contract within sixty days of receipt.

8 (b) Enter into biennial contracts with regional support networks.
9 The contracts shall be consistent with available resources. No
10 contract shall be approved that does not include progress toward
11 meeting the goals of this chapter by taking responsibility for: (i)
12 Short-term commitments; (ii) residential care; and (iii) emergency
13 response systems.

14 (c) Notify regional support networks of their allocation of
15 available resources at least sixty days prior to the start of a new
16 biennial contract period.

17 (d) Deny all or part of the funding allocations to regional support
18 networks based solely upon formal findings of noncompliance with the
19 terms of the regional support network's contract with the department.
20 Regional support networks disputing the decision of the secretary to
21 withhold funding allocations are limited to the remedies provided in
22 the department's contracts with the regional support networks.

23 (18) The department, in cooperation with the state congressional
24 delegation, shall actively seek waivers of federal requirements and
25 such modifications of federal regulations as are necessary to allow
26 federal medicaid reimbursement for services provided by freestanding
27 evaluation and treatment facilities certified under chapter 71.05 RCW.
28 The department shall periodically report its efforts to the appropriate
29 committees of the senate and the house of representatives.

30 **Sec. 8.** RCW 71.24.045 and 2006 c 333 s 105 are each amended to
31 read as follows:

32 The regional support network shall:

33 (1) Contract as needed with licensed service providers. The
34 regional support network may, in the absence of a licensed service
35 provider entity, become a licensed service provider entity pursuant to
36 minimum standards required for licensing by the department for the

1 purpose of providing services not available from licensed service
2 providers;

3 (2) Operate as a licensed service provider if it deems that doing
4 so is more efficient and cost effective than contracting for services.
5 When doing so, the regional support network shall comply with rules
6 promulgated by the secretary that shall provide measurements to
7 determine when a regional support network provided service is more
8 efficient and cost effective;

9 (3) Monitor and perform biennial fiscal audits of licensed service
10 providers who have contracted with the regional support network to
11 provide services required by this chapter. The monitoring and audits
12 shall be performed by means of a formal process which insures that the
13 licensed service providers and professionals designated in this
14 subsection meet the terms of their contracts;

15 (4) Assure that the special needs of minorities, the elderly,
16 ~~((disabled))~~ individuals with disabilities, children, and low-income
17 persons are met within the priorities established in this chapter;

18 (5) Maintain patient tracking information in a central location as
19 required for resource management services and the department's
20 information system;

21 (6) Collaborate to ensure that policies do not result in an adverse
22 shift of ~~((mentally ill))~~ persons with mental illness into state and
23 local correctional facilities;

24 (7) Work with the department to expedite the enrollment or re-
25 enrollment of eligible persons leaving state or local correctional
26 facilities and institutions for mental diseases;

27 ~~((If a regional support network is not operated by the
28 county,))~~ Work closely with the county designated mental health
29 professional or county designated crisis responder to maximize
30 appropriate placement of persons into community services; and

31 (9) Coordinate services for individuals who have received services
32 through the community mental health system and who become patients at
33 a state mental hospital to ensure they are transitioned into the
34 community in accordance with mutually agreed upon discharge plans and
35 upon determination by the medical director of the state mental hospital
36 that they no longer need intensive inpatient care.

1 **Sec. 9.** RCW 71.24.100 and 2012 c 117 s 442 are each amended to
2 read as follows:

3 A county authority or a group of county authorities may enter into
4 a joint operating agreement to form a regional support network whose
5 boundaries are consistent with the regional service areas established
6 under section 2 of this act. Any agreement between two or more county
7 authorities for the establishment of a regional support network shall
8 provide:

9 (1) That each county shall bear a share of the cost of mental
10 health services; and

11 (2) That the treasurer of one participating county shall be the
12 custodian of funds made available for the purposes of such mental
13 health services, and that the treasurer may make payments from such
14 funds upon audit by the appropriate auditing officer of the county for
15 which he or she is treasurer.

16 **Sec. 10.** RCW 71.24.110 and 1999 c 10 s 7 are each amended to read
17 as follows:

18 An agreement (~~((for the establishment of a community mental health~~
19 ~~program))~~ to contract with the state to operate a regional support
20 network under RCW 71.24.100 may also provide:

21 (1) For the joint supervision or operation of services and
22 facilities, or for the supervision or operation of service and
23 facilities by one participating county under contract for the other
24 participating counties; and

25 (2) For such other matters as are necessary or proper to effectuate
26 the purposes of this chapter.

27 **Sec. 11.** RCW 71.24.340 and 2005 c 503 s 13 are each amended to
28 read as follows:

29 The secretary shall require the regional support networks to
30 develop (~~((interlocal agreements pursuant to RCW 74.09.555. To this~~
31 ~~end, the regional support networks shall))~~ agreements with city and
32 county jails to accept referrals for enrollment on behalf of a confined
33 person, prior to the person's release.

34 **Sec. 12.** RCW 71.24.420 and 2001 c 323 s 2 are each amended to read
35 as follows:

1 The department shall operate the community mental health service
2 delivery system authorized under this chapter within the following
3 constraints:

4 (1) The full amount of federal funds for mental health services,
5 plus qualifying state expenditures as appropriated in the biennial
6 operating budget, shall be appropriated to the department each year in
7 the biennial appropriations act to carry out the provisions of the
8 community mental health service delivery system authorized in this
9 chapter.

10 (2) The department may expend funds defined in subsection (1) of
11 this section in any manner that will effectively accomplish the outcome
12 measures (~~((defined in section 5 of this act))~~) established in RCW
13 43.20A.895 and 71.36.025 and performance measures linked to those
14 outcomes.

15 (3) The department shall implement strategies that accomplish the
16 outcome measures (~~((identified in section 5 of this act that are within~~
17 ~~the funding constraints in this section))~~) established in RCW 43.20A.895
18 and 71.36.025 and performance measures linked to those outcomes.

19 (4) The department shall monitor expenditures against the
20 appropriation levels provided for in subsection (1) of this section.

21 **Sec. 13.** RCW 70.96A.020 and 2001 c 13 s 1 are each amended to read
22 as follows:

23 For the purposes of this chapter the following words and phrases
24 shall have the following meanings unless the context clearly requires
25 otherwise:

26 (1) "Alcoholic" means a person who suffers from the disease of
27 alcoholism.

28 (2) "Alcoholism" means a disease, characterized by a dependency on
29 alcoholic beverages, loss of control over the amount and circumstances
30 of use, symptoms of tolerance, physiological or psychological
31 withdrawal, or both, if use is reduced or discontinued, and impairment
32 of health or disruption of social or economic functioning.

33 (3) "Approved treatment program" means a discrete program of
34 chemical dependency treatment provided by a treatment program certified
35 by the department of social and health services as meeting standards
36 adopted under this chapter.

1 (4) "Behavioral health services" means mental health services as
2 described in chapter 71.24 RCW and chemical dependency treatment
3 services as described in this chapter.

4 (5) "Chemical dependency" means: (a) Alcoholism; (b) drug
5 addiction; or (c) dependence on alcohol and one or more other
6 psychoactive chemicals, as the context requires.

7 (~~(+5)~~) (6) "Chemical dependency program" means expenditures and
8 activities of the department designed and conducted to prevent or treat
9 alcoholism and other drug addiction, including reasonable
10 administration and overhead.

11 (~~(+6)~~) (7) "Department" means the department of social and health
12 services.

13 (~~(+7)~~) (8) "Designated chemical dependency specialist" or
14 "specialist" means a person designated by the county alcoholism and
15 other drug addiction program coordinator designated under RCW
16 70.96A.310 to perform the commitment duties described in RCW 70.96A.140
17 and qualified to do so by meeting standards adopted by the department.

18 (~~(+8)~~) (9) "Director" means the person administering the chemical
19 dependency program within the department.

20 (~~(+9)~~) (10) "Drug addict" means a person who suffers from the
21 disease of drug addiction.

22 (~~(+10)~~) (11) "Drug addiction" means a disease characterized by a
23 dependency on psychoactive chemicals, loss of control over the amount
24 and circumstances of use, symptoms of tolerance, physiological or
25 psychological withdrawal, or both, if use is reduced or discontinued,
26 and impairment of health or disruption of social or economic
27 functioning.

28 (~~(+11)~~) (12) "Emergency service patrol" means a patrol established
29 under RCW 70.96A.170.

30 (~~(+12)~~) (13) "Gravely disabled by alcohol or other psychoactive
31 chemicals" or "gravely disabled" means that a person, as a result of
32 the use of alcohol or other psychoactive chemicals: (a) Is in danger
33 of serious physical harm resulting from a failure to provide for his or
34 her essential human needs of health or safety; or (b) manifests severe
35 deterioration in routine functioning evidenced by a repeated and
36 escalating loss of cognition or volitional control over his or her
37 actions and is not receiving care as essential for his or her health or
38 safety.

1 (~~(13)~~) (14) "History of one or more violent acts" refers to the
2 period of time ten years prior to the filing of a petition under this
3 chapter, excluding any time spent, but not any violent acts committed,
4 in a mental health facility, or a long-term alcoholism or drug
5 treatment facility, or in confinement.

6 (~~(14)~~) (15) "Incapacitated by alcohol or other psychoactive
7 chemicals" means that a person, as a result of the use of alcohol or
8 other psychoactive chemicals, is gravely disabled or presents a
9 likelihood of serious harm to himself or herself, to any other person,
10 or to property.

11 (~~(15)~~) (16) "Incompetent person" means a person who has been
12 adjudged incompetent by the superior court.

13 (~~(16)~~) (17) "Intoxicated person" means a person whose mental or
14 physical functioning is substantially impaired as a result of the use
15 of alcohol or other psychoactive chemicals.

16 (~~(17)~~) (18) "Licensed physician" means a person licensed to
17 practice medicine or osteopathic medicine and surgery in the state of
18 Washington.

19 (~~(18)~~) (19) "Likelihood of serious harm" means:

20 (a) A substantial risk that: (i) Physical harm will be inflicted
21 by an individual upon his or her own person, as evidenced by threats or
22 attempts to commit suicide or inflict physical harm on one's self; (ii)
23 physical harm will be inflicted by an individual upon another, as
24 evidenced by behavior that has caused the harm or that places another
25 person or persons in reasonable fear of sustaining the harm; or (iii)
26 physical harm will be inflicted by an individual upon the property of
27 others, as evidenced by behavior that has caused substantial loss or
28 damage to the property of others; or

29 (b) The individual has threatened the physical safety of another
30 and has a history of one or more violent acts.

31 (~~(19)~~) (20) "Medical necessity" for inpatient care of a minor
32 means a requested certified inpatient service that is reasonably
33 calculated to: (a) Diagnose, arrest, or alleviate a chemical
34 dependency; or (b) prevent the worsening of chemical dependency
35 conditions that endanger life or cause suffering and pain, or result in
36 illness or infirmity or threaten to cause or aggravate a handicap, or
37 cause physical deformity or malfunction, and there is no adequate less
38 restrictive alternative available.

1 ~~((+20+))~~ (21) "Minor" means a person less than ~~((eighteen))~~
2 nineteen years of age.

3 ~~((+21+))~~ (22) "Parent" means the parent or parents who have the
4 legal right to custody of the child. Parent includes custodian or
5 guardian.

6 ~~((+22+))~~ (23) "Peace officer" means a law enforcement official of
7 a public agency or governmental unit, and includes persons specifically
8 given peace officer powers by any state law, local ordinance, or
9 judicial order of appointment.

10 ~~((+23+))~~ (24) "Person" means an individual, including a minor.

11 ~~((+24+))~~ (25) "Professional person in charge" or "professional
12 person" means a physician or chemical dependency counselor as defined
13 in rule by the department, who is empowered by a certified treatment
14 program with authority to make assessment, admission, continuing care,
15 and discharge decisions on behalf of the certified program.

16 ~~((+25+))~~ (26) "Regional support network" means a county authority,
17 group of county authorities, or other entity recognized by the
18 secretary in a defined regional service area.

19 (27) "Secretary" means the secretary of the department of social
20 and health services.

21 ~~((+26+))~~ (28) "Treatment" means the broad range of emergency,
22 detoxification, residential, and outpatient services and care,
23 including diagnostic evaluation, chemical dependency education and
24 counseling, medical, psychiatric, psychological, and social service
25 care, vocational rehabilitation and career counseling, which may be
26 extended to alcoholics and other drug addicts and their families,
27 persons incapacitated by alcohol or other psychoactive chemicals, and
28 intoxicated persons.

29 ~~((+27+))~~ (29) "Treatment program" means an organization,
30 institution, or corporation, public or private, engaged in the care,
31 treatment, or rehabilitation of alcoholics or other drug addicts.

32 ~~((+28+))~~ (30) "Violent act" means behavior that resulted in
33 homicide, attempted suicide, nonfatal injuries, or substantial damage
34 to property.

35 **Sec. 14.** RCW 70.96A.040 and 1989 c 270 s 5 are each amended to
36 read as follows:

1 The department, in the operation of the chemical dependency program
2 may:

3 (1) Plan, establish, and maintain prevention and treatment programs
4 as necessary or desirable;

5 (2) Make contracts necessary or incidental to the performance of
6 its duties and the execution of its powers, including contracts for
7 behavioral health services, contracts entered into under RCW 74.09.522,
8 or contracts with public and private agencies, organizations, and
9 individuals to pay them for services rendered or furnished to
10 alcoholics or other drug addicts, persons incapacitated by alcohol or
11 other psychoactive chemicals, or intoxicated persons;

12 (3) Enter into agreements for monitoring of verification of
13 qualifications of counselors employed by approved treatment programs;

14 (4) Adopt rules under chapter 34.05 RCW to carry out the provisions
15 and purposes of this chapter and contract, cooperate, and coordinate
16 with other public or private agencies or individuals for those
17 purposes;

18 (5) Solicit and accept for use any gift of money or property made
19 by will or otherwise, and any grant of money, services, or property
20 from the federal government, the state, or any political subdivision
21 thereof or any private source, and do all things necessary to cooperate
22 with the federal government or any of its agencies in making an
23 application for any grant;

24 (6) Administer or supervise the administration of the provisions
25 relating to alcoholics, other drug addicts, and intoxicated persons of
26 any state plan submitted for federal funding pursuant to federal
27 health, welfare, or treatment legislation;

28 (7) Coordinate its activities and cooperate with chemical
29 dependency programs in this and other states, and make contracts and
30 other joint or cooperative arrangements with state, local, or private
31 agencies in this and other states for the treatment of alcoholics and
32 other drug addicts and their families, persons incapacitated by alcohol
33 or other psychoactive chemicals, and intoxicated persons and for the
34 common advancement of chemical dependency programs;

35 (8) Keep records and engage in research and the gathering of
36 relevant statistics;

37 (9) Do other acts and things necessary or convenient to execute the
38 authority expressly granted to it;

1 (10) Acquire, hold, or dispose of real property or any interest
2 therein, and construct, lease, or otherwise provide treatment programs.

3 **Sec. 15.** RCW 70.96A.050 and 2001 c 13 s 2 are each amended to read
4 as follows:

5 The department shall:

6 (1) Develop, encourage, and foster statewide, regional, and local
7 plans and programs for the prevention of alcoholism and other drug
8 addiction, treatment of alcoholics and other drug addicts and their
9 families, persons incapacitated by alcohol or other psychoactive
10 chemicals, and intoxicated persons in cooperation with public and
11 private agencies, organizations, and individuals and provide technical
12 assistance and consultation services for these purposes;

13 (2) Assure that any regional support network contract for
14 behavioral health services or program for the treatment of persons with
15 alcohol or drug use disorders provides medically necessary services to
16 medicaid recipients consistent with the state's medicaid plan or
17 federal waiver authorities, and nonmedicaid services consistent with
18 priorities established by the department;

19 (3) Coordinate the efforts and enlist the assistance of all public
20 and private agencies, organizations, and individuals interested in
21 prevention of alcoholism and drug addiction, and treatment of
22 alcoholics and other drug addicts and their families, persons
23 incapacitated by alcohol or other psychoactive chemicals, and
24 intoxicated persons;

25 ~~((3))~~ (4) Cooperate with public and private agencies in
26 establishing and conducting programs to provide treatment for
27 alcoholics and other drug addicts and their families, persons
28 incapacitated by alcohol or other psychoactive chemicals, and
29 intoxicated persons who are clients of the correctional system;

30 ~~((4))~~ (5) Cooperate with the superintendent of public
31 instruction, state board of education, schools, police departments,
32 courts, and other public and private agencies, organizations and
33 individuals in establishing programs for the prevention of alcoholism
34 and other drug addiction, treatment of alcoholics or other drug addicts
35 and their families, persons incapacitated by alcohol or other
36 psychoactive chemicals, and intoxicated persons, and preparing
37 curriculum materials thereon for use at all levels of school education;

1 (~~(+5)~~) (6) Prepare, publish, evaluate, and disseminate educational
2 material dealing with the nature and effects of alcohol and other
3 psychoactive chemicals and the consequences of their use;

4 (~~(+6)~~) (7) Develop and implement, as an integral part of treatment
5 programs, an educational program for use in the treatment of alcoholics
6 or other drug addicts, persons incapacitated by alcohol or other
7 psychoactive chemicals, and intoxicated persons, which program shall
8 include the dissemination of information concerning the nature and
9 effects of alcohol and other psychoactive chemicals, the consequences
10 of their use, the principles of recovery, and HIV and AIDS;

11 (~~(+7)~~) (8) Organize and foster training programs for persons
12 engaged in treatment of alcoholics or other drug addicts, persons
13 incapacitated by alcohol or other psychoactive chemicals, and
14 intoxicated persons;

15 (~~(+8)~~) (9) Sponsor and encourage research into the causes and
16 nature of alcoholism and other drug addiction, treatment of alcoholics
17 and other drug addicts, persons incapacitated by alcohol or other
18 psychoactive chemicals, and intoxicated persons, and serve as a
19 clearinghouse for information relating to alcoholism or other drug
20 addiction;

21 (~~(+9)~~) (10) Specify uniform methods for keeping statistical
22 information by public and private agencies, organizations, and
23 individuals, and collect and make available relevant statistical
24 information, including number of persons treated, frequency of
25 admission and readmission, and frequency and duration of treatment;

26 (~~(+10)~~) (11) Advise the governor in the preparation of a
27 comprehensive plan for treatment of alcoholics and other drug addicts,
28 persons incapacitated by alcohol or other psychoactive chemicals, and
29 intoxicated persons for inclusion in the state's comprehensive health
30 plan;

31 (~~(+11)~~) (12) Review all state health, welfare, and treatment plans
32 to be submitted for federal funding under federal legislation, and
33 advise the governor on provisions to be included relating to alcoholism
34 and other drug addiction, persons incapacitated by alcohol or other
35 psychoactive chemicals, and intoxicated persons;

36 (~~(+12)~~) (13) Assist in the development of, and cooperate with,
37 programs for alcohol and other psychoactive chemical education and

1 treatment for employees of state and local governments and businesses
2 and industries in the state;

3 ((+13+)) (14) Use the support and assistance of interested persons
4 in the community to encourage alcoholics and other drug addicts
5 voluntarily to undergo treatment;

6 ((+14+)) (15) Cooperate with public and private agencies in
7 establishing and conducting programs designed to deal with the problem
8 of persons operating motor vehicles while intoxicated;

9 ((+15+)) (16) Encourage general hospitals and other appropriate
10 health facilities to admit without discrimination alcoholics and other
11 drug addicts, persons incapacitated by alcohol or other psychoactive
12 chemicals, and intoxicated persons and to provide them with adequate
13 and appropriate treatment;

14 ((+16+)) (17) Encourage all health and disability insurance
15 programs to include alcoholism and other drug addiction as a covered
16 illness; and

17 ((+17+)) (18) Organize and sponsor a statewide program to help
18 court personnel, including judges, better understand the disease of
19 alcoholism and other drug addiction and the uses of chemical dependency
20 treatment programs.

21 **Sec. 16.** RCW 70.96A.080 and 1989 c 270 s 18 are each amended to
22 read as follows:

23 (1) In coordination with the health care authority, the department
24 shall establish by ((all)) appropriate means, including contracting
25 ((for)), behavioral health services, including a comprehensive and
26 coordinated ((discrete)) program for the treatment of ((alcoholics and
27 other drug addicts and their families, persons incapacitated by alcohol
28 or other psychoactive chemicals, and intoxicated)) persons with alcohol
29 and drug use disorders.

30 (2) The program shall include, but not necessarily be limited to:

31 (a) Detoxification;

32 (b) Residential treatment; and

33 (c) Outpatient treatment.

34 (3) All appropriate public and private resources shall be
35 coordinated with and used in the program when possible.

36 (4) The department may contract for the use of an approved

1 treatment program or other individual or organization if the secretary
2 considers this to be an effective and economical course to follow.

3 **Sec. 17.** RCW 70.96A.320 and 2013 c 320 s 8 are each amended to
4 read as follows:

5 (1) A county legislative authority, or two or more counties acting
6 jointly, may establish an alcoholism and other drug addiction program.
7 If two or more counties jointly establish the program, they shall
8 designate one county to provide administrative and financial services.

9 (2) To be eligible for funds from the department for the support of
10 the county alcoholism and other drug addiction program, the county
11 legislative authority shall establish a county alcoholism and other
12 drug addiction board under RCW 70.96A.300 and appoint a county
13 alcoholism and other drug addiction program coordinator under RCW
14 70.96A.310.

15 (3) The county legislative authority may apply to the department
16 for financial support for the county program of alcoholism and other
17 drug addiction. To receive financial support, the county legislative
18 authority shall submit a plan that meets the following conditions:

19 (a) It shall describe the prevention, early intervention, or
20 recovery support services and activities to be provided;

21 (b) It shall include anticipated expenditures and revenues;

22 (c) It shall be prepared by the county alcoholism and other drug
23 addiction program board and be adopted by the county legislative
24 authority;

25 (d) It shall reflect maximum effective use of existing services and
26 programs; and

27 (e) It shall meet other conditions that the secretary may require.

28 (4) The county may accept and spend gifts, grants, and fees, from
29 public and private sources, to implement its program of alcoholism and
30 other drug addiction.

31 (5) The department shall require that any agreement to provide
32 financial support to a county that performs the activities of a service
33 coordination organization for alcoholism and other drug addiction
34 services must incorporate the expected outcomes and criteria to measure
35 the performance of service coordination organizations as provided in
36 chapter 70.320 RCW.

1 (6) The county may subcontract for prevention, early intervention,
2 or recovery support services with approved prevention or treatment
3 programs.

4 (7) To continue to be eligible for financial support from the
5 department for the county alcoholism and other drug addiction program,
6 an increase in state financial support shall not be used to supplant
7 local funds from a source that was used to support the county
8 alcoholism and other drug addiction program before the effective date
9 of the increase.

10 NEW SECTION. **Sec. 18.** Section 1 of this act is necessary for the
11 immediate preservation of the public peace, health, or safety, or
12 support of the state government and its existing public institutions,
13 and takes effect immediately.

14 NEW SECTION. **Sec. 19.** Sections 4 through 17 of this act take
15 effect April 1, 2016.

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