

Week 1 and Week 2

During the WMHCA lobby day, we met with many legislators to talk about our agenda. There were two bills that stood out on our priority list more than others. One was a bill introduced by Rep. Caldier that would allow “pro-bono” services to be deducted from your B&O taxes. We are working very hard to get this bill a hearing before cut-off (the final date for policy bills to get out of their house of origin.) The first cut off is February 7th. If you would like to assist WMHCA in requesting a hearing, please email Rep. Gael Tarleton at gael.tarleton@leg.wa.gov or Rep. Paul Harris at paul.harris@leg.wa.gov. You can read the full bill here: <http://lawfilesexternal.leg.wa.gov/biennium/2019-20/Pdf/Bills/House%20Bills/2582.pdf?q=20200128190232>

Last year the legislature passed a B&O bill that increased the 1.5% tax to 1.8%. There are many “fix” bills this session, one of which (SB 6452 <https://app.leg.wa.gov/billsummary?BillNumber=6492&Year=2019>, sponsored by Senator Jamie Pedersen) would exempt independent health care providers who make \$100,000 or less from this tax increase. The bill from last year was initiated by the need to fund the state’s student need grant. The student need grant was intended to help students pay for college. The legislature assumed that most students would opt for a community or 2 year college, but it turned out that many students are choosing to attend 4 year colleges. This has caused a major short fall in the budget. Raising the B&O tax, as unfair as it is, is the quickest way for the state to create income in a short amount of time. In partnership with many other health care providers we will continue to push for this legislation to pass, exempting us from this tax increase.

There is another bill to update the children’s mental health group and we discovered that mental health counselors were not appropriately included in the group. We have proposed an amendment (see below) to have us included in the bill language. I can’t see this being an issue moving forward and I will update you once I hear back from the stakeholders working on this bill.

HB 2737 : Updating the children's mental health work group. <https://app.leg.wa.gov/billsummary?BillNumber=2737&Initiative=false&Year=2019> Specifically we would advocate for a change in the representation sections (starting at line 10 on page 2) to include:

"One PROVIDER specializing in child and adolescent mental health"

Here is the response to this issue written by board member Emily Brown:

"I would also advocate that the overall wording in this section does not allow for very many providers, rather for representatives or allies of providers. While there is one for infant and early childhood, one for co-occurring in the region (*Side note: Why is this specified per region and no others are? - also why is there not a specific SUD provider for teens? perhaps one who can articulate the difference in working with teens than the traditional adult model for SUD work*) and one for a psychiatrist, there are NO others who provide actual mental health services in WA state. Having advocates, and representatives and perhaps those that work with the providers (doctors, child advocates, child care, education). While we do find those voices very important and helpful in this conversation, our concerns would be that without providers (experts

even) in the field who are PROVIDING Mental health at all stages of development are missing or minimal at best. This committee from our understanding is set up to improve the quality, workforce and access to services for children' in behavioral health, and if they are going to be working toward things that are not practical, not applicable, or not doable for those in the field for those who provide, that might be a gross oversight.”

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