

Lobbyist Report

Month October 2021



Meetings/Workgroups attended

10/5 Rep. Mari Leavitt

10/5 Behavioral Health Coalition Meeting/NAMI

10/6 Workforce and Rates Subgroup

10/7 Rep. Jesse Johnson

10/8 WMHCA Board Meeting

10/14 Behavioral Health Coalition Meeting

10/14 Rep. Alicia Rule

10/19 Rep. Jamila Taylor

10/20 Workforce and Rates Subgroup

10/21 Rep. John Lovick

10/25 Rep. Marcus Riccelli

Legislative Summary for Mental Health Specifically (To Send to Members)

With the subgroup and coalition meetings winding down, the final focus topics have been submitted for the 2021 session. The workforce and rates group concluded with the following as their priorities:

Medicaid rate increase – To stabilize the community behavioral health safety net and improve access to care, implement a 7% Medicaid rate increase directed to community behavioral health agencies retroactive to January 1, 2022.

Compensation for people with lived experience – Change RCW 43.330.220 to allow people with lived experience with system services who participate in work groups to be compensated; provide funding to compensate youth and family members who participate in the CYBHWG and its subgroups.

Prenatal to Age 25 Behavioral Health Strategic Plan – Develop a strategic plan to ensure that all Washington children and young people ages 0-25 years and families have timely access to high-quality, equitable, well-resourced behavioral health education, care and supports across the continuum when and where they need it, including prenatal care.

Expand the Parent Support Warm Line – Invest in Perinatal Support Washington's Parent Support Warm Line (the Warm Line) so un- and underserved expectant and new parents have greater and more equitable access to mental health services through peer- to-peer engagement and increased public awareness.

Behavioral health grants (for clinicians in schools) in response to urgent needs of students -- Provide base-level funding grants for 100 school-based licensed behavioral health clinicians in 2022 at \$65,000/FTE. To be eligible, school districts would need to designate matching funds from another source to fund full-time positions, including other district funds, grants, Medicaid billing, etc.

Children, youth and families communications and marketing position at HCA – Fund a full-time staff person at HCA to connect families, providers, educators, and others with current information about behavioral health care legislation.

Provide funding to explore implementation of Certified Community Behavioral Health Clinics -- Develop a sustainable, alternative payment model for comprehensive community behavioral health services by studying the Certified Community Behavioral Health Clinic (CCBHC) model, conducting related actuarial analysis, and proposing a pathway for statewide implementation.

Reimbursement for non-licensed staffing in primary care settings -- Allow reimbursement for non-licensed staff like Community Health Workers, navigators and care coordinators to support kids' behavioral health in primary care settings.

Create a clinical supervision work group - This workgroup shall be made up of individuals with clinical supervision experience to make recommendations for all three masters level licenses on the number of supervision hours, and any specific specialty supervision hours needed. Some funding will be needed to support the workgroup.

WMCHA has been asked to help create the language for a proposed piece of legislation to establish a workgroup to determine the best approach to easing the process of becoming licensed in Washington State. We will share with you the draft of the proposed language once it is available. This is an exciting opportunity for WHMCA to take the lead on a bill in 2021. This bill will be one piece in the puzzle that will need to be completed to increase the workforce across all BH professions.

We had many meetings with prominent legislators this month, most importantly with Rep. Jamila Taylor, D - Federal Way. She is the chair of the Members of Color Caucus and we were grateful that WHMCA had the chance to share our issues with her.

The 2021 legislative "Committee Days" will occur next month - this is a time where legislators convene to discuss topics of importance and to set a plan for 2022.

Meetings Requested

Speaker Laurie Jenkins

Senator Annette Cleveland (Chair, Senate Health Care Committee)

Senator Manka Dhingra (Chair, Behavioral Health Subcommittee)

Senator Judy Warnick

General Legislative News

It is predicted that the 2022 session will be a hybrid session meaning committee hearings will be virtual, floor action will be in person, and there is the potential for the public to be admitted into the building with a proof of vaccine or recent COVID test. Official admittance rules are still yet to be solidified.

The 60 day short session is typically a "fix" focus session, but this next year "fixing" legislation that was passed in 2021 will dominate the short time we have in Olympia. This means that new pieces of legislation will have even more barriers to success for 2022. Police reform, long term health care, and the homelessness crisis will be at the forefront, with mental/behavioral health integrated closely in to all of those topics.

It is going to be an interesting and stressful session as access to the building/legislators continues to be restricted. A handful of legislators have left all together and more moves are likely happen over the next few weeks.

Sara Stewart
Melanie Stewart and Associates
HPC Advocacy
Cascade Government Affairs
360-229-8168