

## Department of Social and Health Services – mental health

### **Mental health rate adjustment**

*\$58.6 million General Fund-State; \$216.8 million General Fund-Federal*

Integrates mental health and substance abuse services under managed care and requires a combined behavioral health organization rate. Under federal Medicaid law, rate ranges must be developed by an independent actuary and certified as being actuarially sound. Funding adjustments are made to certify actuarial rates for integrated mental health and substance abuse services.

### **Psychiatric staff recruitment and retention**

*\$9.5 million GF-S; \$993,000 GF-F*

Pays salary raises and bonuses to recruit and retain psychiatrists and other psychiatric staff. Offering bonuses and higher pay, in addition to other items included in the Governor's budget, will increase staffing and decrease reliance on overtime and private contracting.

### **Western State Hospital RN staff**

*\$6.8 million GF-S*

Hires 51 additional registered nurses for day and evening shifts at Western State Hospital. Having more nurses will promote staff and patient safety as well as improve care provided to residents.

### **Expand crisis triage beds**

*\$5.2 million GF-S; \$2.6 million GF-F*

Funds operation of four new 16-bed crisis triage facilities. Two facilities will be located in Western Washington and two in Eastern Washington. Each facility will be designed to promote assessment, diagnosis and treatment of individuals experiencing an acute mental health crisis without using long-term hospitalization.

### **Regulatory compliance**

*\$5.0 million GF-S*

Funds 38 new staff to complete maintenance projects recommended by the Joint Commission for Hospital

Accreditation. Completed projects will ensure resident safety and maintain accreditation at Western and Eastern State hospitals necessary for the receipt of federal funds.

### **Expand mobile crisis teams**

*\$3.1 million GF-S; \$936,000 GF-F*

Launches three new mobile crisis teams and expands outreach and engagement activities for all such teams. These deliver mental health services to stabilize an individual in crisis to prevent further deterioration and provide immediate treatment and intervention in a location best suited to meet individual needs. Services will be provided in the least-restrictive environment and made available 24/7.

### **Housing support and step-down services**

*\$2.8 million GF-S*

Sets up four new housing and recovery services teams. Each team will provide supportive housing services and short-term rental assistance for individuals leaving inpatient behavioral health treatment or at risk of needing inpatient behavioral health services.

### **Department of Labor and Industries settlement agreement**

*\$2.2 million GF-S*

Funds 11.2 new staff at Eastern and Western State hospitals to attain adequate 24/7 staffing level. This will allow some staff to leave ward duty for additional annual safety training to fulfill recommendations of an ad hoc safety committee on strategies to decrease violence at state psychiatric hospitals.

### **Peer bridging programs**

*\$1.8 million GF-S*

Adds 22 peer bridge team members to the state psychiatric hospital liaison teams in the regional support networks. These team members assist in hospital discharge planning activities and promote service continuity as individuals return to their communities. This will enhance patient long-term recovery and reduce hospital readmissions.

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### **UW psychiatry collaboration**

*\$500,000 GF-S*

Funds a contract with the University of Washington's Department of Psychiatry and Behavioral Sciences, in collaboration with Western State Hospital, for an analysis and a plan to implement a high-quality forensic teaching unit. The university will make recommendations to the Governor and Legislature by November 2017.

### **Diversion task force**

*\$250,000 GF-S*

Provides staff support for a diversion task force to recommend how to keep people with mental illness — and with issues related to competency to stand trial — from entering jails and prisons. The task force will make recommendations to the Governor and the Legislature by December 2016.

### **Department of Social and Health Services – other**

#### **Individual provider overtime**

*\$34.1 million GF-S; \$40.6 million GF-F*

Funds individual provider home care worker overtime in accordance with a recent rule from the U.S. Department of Labor. Funding is available April 2016.

#### **Individual provider informal supports**

*\$19.3 million GF-S; \$43.7 million GF-F*

Funds additional home care client hours previously considered informal supports. This change is consistent with the Department of Labor's recent rule upheld by the U.S. Federal Court of Appeals, D.C. Circuit.

#### **Child Protective Services**

*\$1.9 million GF-S; \$39,000 GF-F*

Hires 21.4 additional Child Protective Services staff to make face-to-face contact with children within 24 hours for those at imminent risk of harm and within 72 hours when the threat is not imminent. Also helps ensure all investigations are completed within 90 days.

### **Braam compliance**

*\$1.8 million GF-S; \$36,000 GF-F*

Hires 25.8 Child and Family Welfare Services staff to improve the conditions and treatment of children in the state foster care system. Allows for compliance with measures required under the 2011 Braam settlement, such as locating runaway foster care children; conducting monthly health and safety checks for children in out-of-home care; and providing foster parents with adequate information, training and support for children placed in their homes.

### **Planned respite**

*\$834,000 GF-S; \$833,000 GF-F*

Funds 15 staff and eight planned respite beds at Yakima Valley School, which serves individuals with developmental disabilities. These beds are funded in addition to all previously funded planned and emergent respite services offered both in institutional and community settings. This service provides families with a break in caregiving and with an individualized service plan to enable their loved one to remain in a community setting, and the individual with the opportunity for behavioral stabilization.

### **Redesign in-home system**

*\$91,000 GF-S; \$90,000 GF-F*

Funds a study to examine the individual provider home care program and make recommendations to improve quality, oversight and efficiency, and to reduce potential state liability as Washington's long-term care needs increase with an aging population.

### **Health Care Authority**

#### **Healthier Washington savings restoration**

*\$42.7 million GF-S; \$54.3 million GF-F*

Healthier Washington is a project that allows the Health Care Authority and the Department of Social and Health Services to establish integrated clinical models of physical and behavioral health care. This improves the effectiveness of health care purchasing and delivery. Due to delayed efforts in integrating the clinical models, savings assumed in the 2015–17 budget will not be realized this biennium.

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### **Waiver savings restoration**

*\$16.7 million GF-S; \$18.5 million GF-F*

Restores savings assumed in the 2015–17 budget that will not be realized. A waiver request to the federal Centers for Medicare & Medicaid Innovation, directed by Senate Bill 5596, enacted in 2011, was not approved.

### **Rate increases**

#### **Medically Intensive Care Program**

*\$3.1 million GF-S; \$3.2 million GF-F*

Increases the reimbursement rate by \$10 per hour for registered nurses and licensed practical nurses working in a home setting for children who require four to 16 hours of medically intensive care. Access to this type of skilled nursing care supports prompt hospital discharge and lessens need for hospital admissions.

#### **Private duty nursing**

*\$883,000 GF-S; \$884,000 GF-F*

Increases the reimbursement rate by \$10 per hour for private duty nurses working in a home setting for adults who require four to 16 hours of skilled nursing care. Access to this type of skilled nursing care supports prompt hospital discharge and lessens need for hospital admissions.

#### **Interpreter services rate increase**

*\$848,000 GF-S; \$1.3 million GF-F*

Funds the interpreter services administrative rate at 15 percent of the total interpreter service program cost. This increase from 9.3 percent will allow the service provider to continue support for two offices and perform required administrative activities, including outreach for difficult-to-fill rare language needs, hard-to-serve rural regions and same-day urgent requests.

#### **Home health nursing**

*\$151,000 GF-S; \$308,000 GF-F*

Increases the reimbursement rate by \$10 per visit for registered nurses and licensed practical nurses working as intermittent skilled home health nurses. These nurses work with individuals who have been

recently released from a hospital or in lieu of a hospital admission.

### **Inpatient cost avoidance**

*\$(4.2 million) GF-S; \$(4.4 million) GF-F*

Achieves savings by increasing home access to skilled registered nurses and licensed practical nurses. This will result in prompt hospital discharges and help prevent inpatient admissions.

### **Special Commitment Center**

#### **High-acuity client interventions and health services**

*\$3.2 million GF-S*

Hires 18.2 new staff to address treatment and rehabilitative care requirements for high-acuity residents of the Special Commitment Center. With additional staff, the center will provide individualized treatment, rehabilitative support and resident advocacy for approximately 30 civilly committed individuals with disabilities and multiple serious mental health issues. Also funds 8.3 new positions to improve health care services and supports and to allow for a more therapeutic response to behavioral issues.

### **Department of Early Learning**

#### **ECLIPSE sustainability**

*\$2.2 million GF-S*

Replaces federal funds no longer available for the Early Childhood Intervention and Prevention Services program. This program provides services and treatment in a child care setting for more than 350 children ages birth through 5 with significant developmental, behavioral and mental health challenges. Use of federal Medicaid funds for this program was prohibited in 2014.

#### **Seasonal child care 12-month eligibility**

*\$1.7 million GF-S*

Supports continuity of care for more than 3,400 children receiving subsidized child care through the Seasonal Child Care program by implementing 12-month eligibility. The Seasonal Child Care program provides licensed child care for children

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with parents who work in agricultural settings. This aligns eligibility for the Seasonal Child Care program with the 12-month eligibility rules for the Working Connections Child Care program.

### **Child care health and safety**

*\$1.1 million GF-S*

Hires 9.6 social and health program consultants to complete annual in-home health and safety checks and fingerprint background checks for unlicensed family, friends and neighbors providing subsidized child care for nearly 16,000 children in the Working Connection Child Care program.

### **Department of Health**

#### **Public health reporting for schools**

*\$511,000 GF-S*

Funds a medical record validation tool to interface with the state's immunization information system. With the new tool, schools will be able to determine if a child meets all immunization requirements.

#### **Suicide prevention**

*\$280,000 GF-S*

Funds a statewide Internet and radio campaign to connect those who are struggling with depression to support systems that will help reduce suicides.

### **Department of Corrections**

#### **Retain Bellingham work release beds**

*\$789,000 GF-S*

Funds a 20-bed expansion at the Bellingham work release facility. These beds serve as a bridge between life in prison and life in the community. Expansion costs are offset by prison savings of \$11.78 per day, per offender, as it costs less for a work release bed than a prison bed.

### **Supervision of offenders**

*\$(2.3 million) GF-S*

In March 2015, the Washington Supreme Court issued a ruling in the State v. Bruch case. The decision will result in some offenders serving longer periods of community custody and increase the community supervision caseload average daily population by 500 offenders. This reduction is achieved by changing the length of community supervision to the court-imposed community custody term, which was practice prior to the court decision.

#### **Concurrent supervision**

*\$(1.5 million) GF-S*

A reduction to the offender caseload in community supervision is achieved through a sentencing change (RCW 9.94A.589) that requires terms of supervision to be served concurrently unless the court expressly orders the terms to be served consecutively. This change simplifies supervision and will allow the department to more accurately track adherence with conditions and ensure treatment for the offender is delivered at the most appropriate time, rather than based on when a term of community supervision begins.