

Multiple Agency Fiscal Note Summary

Bill Number: 5189 SB	Title: Behavioral health support
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Estimated Cash Receipts

Agency Name	2023-25			2025-27			2027-29		
	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total
Washington State Health Care Authority	0	0	188,000	0	0	108,000	0	0	108,000
Washington State Health Care Authority	In addition to the estimate above, there are additional indeterminate costs and/or savings. Please see individual fiscal note.								
Department of Health	0	0	266,000	0	0	431,000	0	0	438,000
Total \$	0	0	454,000	0	0	539,000	0	0	546,000

Estimated Operating Expenditures

Agency Name	2023-25				2025-27				2027-29			
	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total
Washington State Health Care Authority	1.6	230,000	230,000	418,000	1.3	132,000	132,000	240,000	1.3	132,000	132,000	240,000
Washington State Health Care Authority	In addition to the estimate above, there are additional indeterminate costs and/or savings. Please see individual fiscal note.											
Office of Insurance Commissioner	.5	0	0	167,959	1.0	0	0	258,932	1.0	0	0	258,932
Department of Health	1.4	318,000	318,000	410,000	1.5	41,000	41,000	391,000	1.5	0	0	392,000
University of Washington	.4	156,787	156,787	156,787	.0	0	0	0	.0	0	0	0
Total \$	3.9	704,787	704,787	1,152,746	3.8	173,000	173,000	889,932	3.8	132,000	132,000	890,932

Estimated Capital Budget Expenditures

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

Estimated Capital Budget Breakout

NONE

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Prepared by: Robyn Williams, OFM	Phone: (360) 704-0525	Date Published: Final
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Individual State Agency Fiscal Note

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

No Fiscal Impact

Estimated Cash Receipts to:

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

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

Estimated Operating Expenditures from:

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

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

Estimated Capital Budget Impact:

NONE

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

Check applicable boxes and follow corresponding instructions:

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

Legislative Contact: Kevin Black	Phone: (360) 786-7747	Date: 01/09/2023
Agency Preparation: Marcia Boyle	Phone: 360-725-0850	Date: 01/20/2023
Agency Approval: Madina Cavendish	Phone: 360-725-0902	Date: 01/20/2023
OFM Review: Robyn Williams	Phone: (360) 704-0525	Date: 01/30/2023

Part II: Narrative Explanation

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

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

See attached narrative.

II. B - Cash receipts Impact

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

See attached narrative.

II. C - Expenditures

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

See attached narrative.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

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

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

III. B - Expenditures by Object Or Purpose

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

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

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

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

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

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

NONE

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

NONE

Part V: New Rule Making Required

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

HCA Fiscal Note

Bill Number: SB 5189 Behavioral Health Support

HCA Request #: 23-020

Part II: Narrative Explanation

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

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

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

Section 12 – Adds a new section to RCW 48.43 (Insurance Reform) that states that by July 1, 2025, behavioral health support specialists will be integrated into network access for every provider under 48.43.005 (Definitions). This section will expire on June 30, 2026.

II. B - Cash Receipts Impact

Indeterminate.

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

II. B - Estimated Cash Receipts to:

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

II. C – Expenditures

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

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

HCA Administration

Section 11 will require HCA to work with Medicaid to ensure that the new provider type is covered to provide services. This will require staff effort to prepare a State Plan Amendment (SPA), update billing guides, review and update rules, update policies and procedures, enroll/update new providers, modify ProviderOne as needed, and update forecast models. HCA anticipates needing 1.0 project FTE to work with Medicaid and to support any updates to rules, policies, and procedures to meet legislative requirements. Then, HCA is requiring 1.0 ongoing FTE needed to support provider enrollment and maintenance work.

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

Medicaid Services

Adding an additional mental health provider type will expand access to help alleviate deficits related to a lack of available mental health providers, increased demand due to the effects of the ongoing Covid-19 pandemic, and underserved areas where amenities are limited. Rural areas tend to have a deficit of

HCA Fiscal Note

Bill Number: SB 5189 Behavioral Health Support

HCA Request #: 23-020

available providers which leads to client service access issues and care delays. Expanded access to mental health services due to a greater number of available providers may result in increased benefit costs and related expenses. However, it is unknown how many behavioral health support specialists would enroll to expand access, and therefore, these costs are indeterminate.

Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB)

Section 12 of this bill adds a new section to RCW 48.43 requiring behavioral health support specialists will be integrated into network access for every provider under 48.43.005 by July 1, 2025. This section will expire on June 30, 2026.

RCW 48.43 governs the fully insured health plans offered by the Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) programs. Because this bill will expand network access to behavioral health support specialist as a covered service, there is an assumed increase to benefit utilization. Due to the unknown magnitude of increased utilization and the unknown reimbursement rate for these providers, the fiscal impact of this section of the bill is indeterminate. HCA assumes coverage of these benefits will end upon expiration of this section of the bill, on June 30, 2026.

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

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

II. C - Operating Budget Expenditures

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

II. C - Expenditures by Object Or Purpose

		FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029
FTE		1.0	2.3	1.3	1.3	1.3	1.3
A	Salaries and Wages	90,000	144,000	54,000	54,000	54,000	54,000
B	Employee Benefits	28,000	53,000	25,000	25,000	25,000	25,000
E	Goods and Other Services	2,000	4,000	2,000	2,000	2,000	2,000
T	Intra-Agency Reimbursements	29,000	68,000	39,000	39,000	39,000	39,000
Totals		\$ 149,000	\$ 269,000	\$ 120,000	\$ 120,000	\$ 120,000	\$ 120,000

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

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

Part IV: Capital Budget Impact

None

HCA Fiscal Note

Bill Number: SB 5189 Behavioral Health Support

HCA Request #: 23-020

Part V: New Rule Making Require

None

Individual State Agency Fiscal Note

Bill Number: 5189 SB	Title: Behavioral health support	Agency: 160-Office of Insurance Commissioner
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Part I: Estimates

No Fiscal Impact

Estimated Cash Receipts to:

NONE

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.0	1.0	0.5	1.0	1.0
Account					
Insurance Commissioners Regulatory Account-State 138-1	0	167,959	167,959	258,932	258,932
Total \$	0	167,959	167,959	258,932	258,932

Estimated Capital Budget Impact:

NONE

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

Check applicable boxes and follow corresponding instructions:

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

Legislative Contact: Kevin Black	Phone: (360) 786-7747	Date: 01/09/2023
Agency Preparation: Jane Beyer	Phone: 360-725-7043	Date: 01/12/2023
Agency Approval: Michael Wood	Phone: 360-725-7007	Date: 01/12/2023
OFM Review: Jason Brown	Phone: (360) 742-7277	Date: 01/16/2023

Part II: Narrative Explanation

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

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

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

Section 12 requires the Office of Insurance Commissioner, by July 1, 2025, to integrate behavioral health support specialist into network access standards through enforcement of Every Category of health care Provider (ECoP) requirements in RCW 48.43.045.

II. B - Cash receipts Impact

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

II. C - Expenditures

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

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

Section 12 requires the OIC, by July 1, 2025, to integrate behavioral health support specialist into network access standards through enforcement of Every Category of health care Provider (ECoP) requirements in RCW 48.43.045. This creates a new review standard solely for this provider type which will require a separate review from all other providers licensed per Title 18. 'Complex' rulemaking will be required to address network access standards for behavioral health support specialists. Health carriers will be required to file new network reports to demonstrate compliance with the new network access standard. There are currently 30 health carriers filing 126 active provider networks that will be required to file the new network reports. OIC assumes health carriers will file using the same monthly submission filing requirements, in a combined data set report, as other network access reports resulting in an additional 30 complex network reports each month. The review time for each network access report is approximately 4 hours requiring a total of 1,440 hours (30 network reports x 4 hours x 12 months) of a Functional Program Analyst 3 each year beginning in FY2026. The OIC will also require one-time costs, in FY2025, of 68 hours of a Functional Program Analyst 4 to work with interested parties to develop the network report document, update review standards, update checklist documents and filing instructions, and train industry and staff.

Ongoing Costs:

Salary, benefits and associated costs for 1.03 FTE Functional Program Analyst 3.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
138-1	Insurance Commissioners Regulatory Account	State	0	167,959	167,959	258,932	258,932
Total \$			0	167,959	167,959	258,932	258,932

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years		1.0	0.5	1.0	1.0
A-Salaries and Wages		99,749	99,749	150,916	150,916
B-Employee Benefits		32,218	32,218	56,230	56,230
C-Professional Service Contracts					
E-Goods and Other Services		32,992	32,992	51,786	51,786
G-Travel					
J-Capital Outlays		3,000	3,000		
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services					
P-Debt Service					
S-Interagency Reimbursements					
T-Intra-Agency Reimbursements					
9-					
Total \$	0	167,959	167,959	258,932	258,932

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

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Functional Program Analyst 3	73,260		0.1	0.1	1.0	1.0
Functional Program Analyst 4	99,516		0.2	0.1		
Senior Policy Analyst	108,432		0.7	0.3		
Total FTEs			1.0	0.5	1.0	1.0

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

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

NONE

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

NONE

Part V: New Rule Making Required

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

Section 12 requires the Office of Insurance Commissioner, by July 1, 2025, to integrate behavioral health support specialist into network access standards through enforcement of Every Category of health care Provider (ECoP) requirements in RCW 48.43.045. Network access standards currently do not limit review for any practitioner solely to ECoP requirements; therefore, Section 12 results in a change to how network access reviews for this singular provider type are performed. In FY2025, 'complex' rulemaking will be required to address network access standards for behavioral health support specialists.

Individual State Agency Fiscal Note

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

No Fiscal Impact

Estimated Cash Receipts to:

ACCOUNT	FY 2024	FY 2025	2023-25	2025-27	2027-29
Health Professions Account-State 02G-1		266,000	266,000	431,000	438,000
Total \$		266,000	266,000	431,000	438,000

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.5	2.3	1.4	1.5	1.5
Account					
General Fund-State 001-1	55,000	263,000	318,000	41,000	0
Health Professions Account-State 02G-1	0	92,000	92,000	350,000	392,000
Total \$	55,000	355,000	410,000	391,000	392,000

Estimated Capital Budget Impact:

NONE

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

Check applicable boxes and follow corresponding instructions:

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

Legislative Contact: Kevin Black	Phone: (360) 786-7747	Date: 01/09/2023
Agency Preparation: Donna Compton	Phone: 360-236-4538	Date: 01/17/2023
Agency Approval: Kristin Bettridge	Phone: 3607911657	Date: 01/17/2023
OFM Review: Robyn Williams	Phone: (360) 704-0525	Date: 01/30/2023

Part II: Narrative Explanation

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

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

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

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

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

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

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

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

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

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

II. B - Cash receipts Impact

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

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

For the purpose of this fiscal note, a certified behavioral health support specialist fee may range between \$280 and \$330 every year. This fee range is based on the assumption the department will receive one-time general fund-state (GF-S) in FY 2024 and FY 2025 to implement this bill. During the rulemaking process, a fee study will be prepared with proposed fees and provided for stakeholder input. The department will monitor the program fund balance and adjust fees over a six (6) year period to ensure that fees are sufficient to cover all program expenditures.

Assumption: Revenue estimates are based on the assumption that the department will receive general fund-state (GF-S) in FY 2024 and FY 2025 to implement this bill. If GF-S is not appropriated for implementation in FY 2024 and FY 2025, then the fees may range between \$310 and \$360 per certification in order to recover the implementation costs over a six-year horizon.

Washington Administration Code (WAC) 246-12-020 (3) states the initial credential will expire on the practitioner’s birthday, except for faculty or postgraduate education credentials authorized by law. Initial credentials issued within ninety days of

the practitioner's birthday do not expire until the practitioner's next birthday. Based on this WAC, the department assumes a standard 25 percent of the first-year applications will need to renew their license in the first year as their birthday will fall outside of ninety days from issuance of initial credential. Renewals starting in the second year and each year thereafter are based on the professions current renewal rate.

Estimated revenue for behavioral health support specialists (based on range \$280 - \$330 w/ GF-S):

FY 2025: \$266,000 (700 applications, 172 renewals)

FY 2026: \$215,000 (14 applications; 690 renewals)

FY 2027: \$216,000 (14 applications; 693 renewals)

FY 2028: \$217,000 (14 applications; 696 renewals)

FY 2029: \$221,000 (14 applications; 710 renewals)

FY 2030: \$225,000 (14 applications; 724 renewals)

II. C - Expenditures

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

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

RULEMAKING:

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

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

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

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

HEALTH TECHNOLOGY SOLUTIONS (HTS):

Sections 6 and 8: HTS staff costs of \$24,000 will be required to make a new application to include the certificate for prescribing psychologists in the Healthcare Enforcement and Licensing Modernization Solution (HELMS). HTS work will include configuration of the new certificate and renewal, creation of a new report, creation of a new application, and support. Configuration in HELMS will require approximately 200 additional hours from the integration vendor at a rate of \$262.50 per hour for a total of \$53,000.

FY 2025 costs will be 0.2 FTE and \$77,000 (GF-S).

FY 2026 and ongoing, costs will be 0.1 FTE and \$8,000 (02G).

OFFICE OF CUSTOMER SERVICE (OCS):

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

payments processed by the revenue unit and renewals processed by the renewal unit. Implementation and configuration costs will occur in FY 2024.

FY 2024 costs will be \$2,000 (GF-S).

FY 2025 costs will be 0.9 FTE and \$92,000 (02G).

FY 2026 costs will be \$2,000 (02G).

FY 2027 and ongoing, costs will be \$3,000 (02G).

PROGRAM IMPLEMENTATION AND ADMINISTRATION:

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

FY 2024, costs will be 0.6 FTE and \$70,000 (GF-S).

FY 2025 and ongoing, costs will be 0.7 FTE and \$41,000 (GF-S) and \$41,000 (02G)

DISCIPLINE:

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

The complaint response process includes five steps: 1) intake, 2) assessment, 3) investigation, 4) case disposition, and 5) adjudication. Staff review the complaint, identify the history of the person complained about, and help assess whether an investigation is needed. In more than half the cases, investigation is needed. The investigator obtains information about the complaint and the respondent and prepares a report detailing the findings. After investigation, the disciplining authority decides whether to pursue legal action. Staff attorneys, paralegals, assistant attorney general and other staff work to develop the legal documents and charge the violation. Most cases are settled, and the staff attorney manages that process. If the respondent asks for a hearing, staff must schedule the hearing, and the health law judge considers all legal motions, presides over the hearing, and drafts the final order. The Office of the Attorney General (OAG) will represent the department at hearing and may provide advice throughout the disciplinary process. In FY26, OAG costs of \$17,842 and FY27 and ongoing \$13,887.

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

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

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

FY 2024: 0.4 FTE and \$55,000 (GF-S)

FY 2025: 2.5 FTE and \$263,000 (GF-S) and \$92,000 (02G)

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

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

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
001-1	General Fund	State	55,000	263,000	318,000	41,000	0
02G-1	Health Professions Account	State	0	92,000	92,000	350,000	392,000
Total \$			55,000	355,000	410,000	391,000	392,000

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.5	2.3	1.4	1.5	1.5
A-Salaries and Wages	33,000	180,000	213,000	241,000	242,000
B-Employee Benefits	13,000	71,000	84,000	90,000	90,000
C-Professional Service Contracts		54,000	54,000		
E-Goods and Other Services	7,000	37,000	44,000	44,000	44,000
T-Intra-Agency Reimbursements	2,000	13,000	15,000	16,000	16,000
9-					
Total \$	55,000	355,000	410,000	391,000	392,000

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

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Fiscal Analyst 2	53,000	0.1	0.4	0.3	0.3	0.3
FORMS & RECORDS ANALYST 1	45,852		0.1	0.1		
HEALTH CARE INVESTIGATOR 3	78,900		0.2	0.1	0.2	0.2
HEALTH SERVICES CONSULTAN 1	55,872		0.3	0.2	0.1	0.1
HEALTH SERVICES CONSULTAN 2	66,420		0.1	0.1		
HEALTH SERVICES CONSULTAN 3	75,120		0.2	0.1	0.1	0.1
HEALTH SERVICES CONSULTAN 4	82,896	0.2	0.5	0.4	0.5	0.5
Health Svcs Conslt 1	53,000		0.2	0.1	0.2	0.2
HEARINGS EXAMINER 3	96,156		0.1	0.1	0.1	0.1
MANAGEMENT ANALYST 4	82,896	0.2	0.1	0.2		
WMS02	114,360		0.1	0.1		
Total FTEs		0.5	2.3	1.4	1.5	1.5

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

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

NONE

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

NONE

Part V: New Rule Making Required

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

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

Individual State Agency Fiscal Note

Bill Number: 5189 SB	Title: Behavioral health support	Agency: 360-University of Washington
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Part I: Estimates

No Fiscal Impact

Estimated Cash Receipts to:

NONE

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.5	0.3	0.4	0.0	0.0
Account					
General Fund-State 001-1	95,619	61,168	156,787	0	0
Total \$	95,619	61,168	156,787	0	0

Estimated Capital Budget Impact:

NONE

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

Check applicable boxes and follow corresponding instructions:

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

Legislative Contact: Kevin Black	Phone: (360) 786-7747	Date: 01/09/2023
Agency Preparation: Charlotte Shannon	Phone: 2066858868	Date: 01/12/2023
Agency Approval: Charlotte Shannon	Phone: 2066858868	Date: 01/12/2023
OFM Review: Ramona Nabors	Phone: (360) 742-8948	Date: 01/18/2023

Part II: Narrative Explanation

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

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

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

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

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

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

II. B - Cash receipts Impact

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

II. C - Expenditures

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

FISCAL IMPACTS OF SEC. 3:

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

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

- \$1,250 in both FY24 and FY25 in goods and services for printing and other office-related costs

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

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

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

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

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

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

III. B - Expenditures by Object Or Purpose

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

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

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

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

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

NONE

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

NONE

Part V: New Rule Making Required

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