## **Multiple Agency Fiscal Note Summary**

Bill Number:	1134 E 2S HB
Din rounder.	1151625110

Title: 988 system

## **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	0	0	240,000	0	0	192,000	0	0	192,000
Health Care									
Authority									
Washington State	In addition to	the estimate abov	e,there are addit	ional indetermir	ate costs and/or s	avings. Please se	ee individual fiso	cal note.	
Health Care						-			
Authority									
Total \$	0	0	240,000	0	0	192,000	0	0	192,000

Agency Name	2023-25		2025	-27	2027-29	
	GF- State	Total	GF- State	Total	GF- State	Total
Local Gov. Courts						
Loc School dist-SPI						
Local Gov. Other	Non-zero but indeterminate cost and/or savings. Please see discussion.					
Local Gov. Total						

## **Estimated Operating Expenditures**

Agency Name			20	23-25				2025-27					2027-29	
	FTEs	GF-Stat	e	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Tot	al	FTEs	GF-State	NGF-Outlook	Total
Office of Financial Management	.0		0	0	0	.0	(	) (	)	0	.0	0	0	0
Washington State Health Care Authority	5.4		0	0	1,922,000	5.9	(	) (	) 1,542	2,000	5.9	0	0	1,542,000
Washington State Health Care Authority	In addit	ion to the e	stim	ate above,there	e are additiona	al indete	rminate cost	s and/or saving	s. Please	see in	dividual fi	scal note.		
Department of Revenue	.0		0	0	0	.0	(	) (	)	0	.0	0	0	0
Criminal Justice Training Commission	.0		0	0	0	.0	(	) (	)	0	.0	0	0	0
Department of Health	8.1		0	0	9,795,000	3.8	(	) (	8,786	6,000	3.8	0	0	8,786,000
University of Washington	3.8	1,334,7	734	1,334,734	1,334,734	.0	(	) (	)	0	.0	0	0	0
Total \$	17.3	1,334,7	734	1,334,734	13,051,734	9.7	(	) (	) 10,32	8,000	9.7	0	0	10,328,000
Agency Name				2023-25				2025-27				2027-29		
		FTEs	G	F-State	Total	FТ	'Es GF	-State	Total		FTEs	GF-State	Total	
Local Gov. Cou Loc School dist-														
Local Gov. Othe		Non-ze	ero	but indetern	ninate cost	and/or	savings. 1	Please see d	iscussio	n.	<u> </u>			
Local Gov. Tota	1													

## **Estimated Capital Budget Expenditures**

Agency Name	2023-25				2025-27			2027-29			
	FTEs	Bonds	Total	FTEs	Bonds	Total	FTEs	Bonds	Total		
Office of Financial	.0	0	0	.0	0	0	.0	0	0		
Management											
Washington State Health	.0	0	0	.0	0	0	.0	0	0		
Care Authority											
Department of Revenue	.0	0	0	.0	0	0	.0	0	0		
Criminal Justice Training	.0	0	0	.0	0	0	.0	0	0		
Commission											
Department of Health	.0	0	0	.0	0	0	.0	0	0		
University of Washington	.0	0	0	.0	0	0	.0	0	0		
T ( 10		0		0.0	0	0	0.0	0	0		
Total \$	0.0	0	<u> </u>	0.0	0	U	0.0	U	U		

Agency Name	2023-25			2025-27			2027-29		
	FTEs	GF-State	Total	FTEs	GF-State	Total	FTEs	GF-State	Total
Local Gov. Courts									
Loc School dist-SPI									
Local Gov. Other	Non-z	Non-zero but indeterminate cost and/or savings. Please see discussion.							
Local Gov. Total									

## **Estimated Capital Budget Breakout**

Prepared by: Arnel Blancas, OFM	Phone:	Date Published:
	(360) 000-0000	Final 3/14/2023

## **Individual State Agency Fiscal Note**

Bill Number:	1134 E 2S HB	Title:	988 system	Agency:	105-Office of Financial Management
Part I: Estin	mates				
X No Fiscal	l Impact				
Estimated Cash	Receipts to:				

NONE

# **Estimated Operating Expenditures from:** NONE

**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:	Andy Toulon	Phone: 360-786-7178	Date: 03/07/2023
Agency Preparation:	Keith Thunstedt	Phone: 360-810-1271	Date: 03/09/2023
Agency Approval:	Jamie Langford	Phone: 360-902-0422	Date: 03/09/2023
OFM Review:	Cheri Keller	Phone: (360) 584-2207	Date: 03/09/2023

## 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.

Changes in this engrossed second substitute version compared to the second substitute: In this engrossed second substitute version, Section 8 (11) requires HCA to consult with OFM staff when conducting an analysis on Medicaid managed care rates related to the bill. This change had no effect of OFM's fiscal impact assumptions from previous versions.

Engrossed Second Substitute version:

Section 6 removes the directive for OFM to contract with the Behavioral Health Insitute at Harborview Medical Center to facilitate and provide staff support to the crisis response improvement strategy committee. OFM has not incurred contract costs related to this directive, therefore its removal has no fiscal impact.

Section 8 (11) requires HCA to consult with OFM staff when completing an analysis on Medicaid managed care rates, payment mechanisms, and levels for rate enhancements related to the bill. HCA's analysis must be submitted to OFM and the Legislature by December 1, 2023. OFM assumes the consultation and receipt of this analysis can be completed within current staffing and resources, and therefore this section has no fiscal impact.

#### 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.

## Part III: Expenditure Detail

**III. A - Operating Budget Expenditures** NONE

III. B - Expenditures by Object Or Purpose

NONE

**III. C - Operating FTE Detail:** *FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.* NONE

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.

## **Individual State Agency Fiscal Note**

Bill Number:1134 E 2S HBTitle:988 system	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	144,000	96,000	240,000	192,000	192,000				
Total \$	144,000	96,000	240,000	192,000	192,000				
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	4.9	5.9	5.4	5.9	5.9			
Account								
General Fund-Federal 001-2	144,000	96,000	240,000	192,000	192,000			
Stwd 988 Behav Hlth & Suicide Prev	1,007,000	675,000	1,682,000	1,350,000	1,350,000			
Line-State 25N-1								
Total \$	1,151,000	771,000	1,922,000	1,542,000	1,542,000			
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:

 $\times$  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:	Andy Toulon	Phone: 360-786-7178	Date: 03/07/2023
Agency Preparation:	Kathryn Kingman	Phone: 360-725-0455	Date: 03/14/2023
Agency Approval:	Carl Yanagida	Phone: 360-725-5755	Date: 03/14/2023
OFM Review:	Arnel Blancas	Phone: (360) 000-0000	Date: 03/14/2023

## 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.

Please 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.

Please see attached narrative.

## Part III: Expenditure Detail

#### III. A - Operating Budget Expenditures

	eral Fund	Federal	144,000	00.000	0 10 000		
			144,000	96,000	240,000	192,000	192,000
-	l 988 Behav Hlth iicide Prev Line	State	1,007,000	675,000	1,682,000	1,350,000	1,350,000
		Total \$	1,151,000	771,000	1,922,000	1,542,000	1,542,000

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	4.9	5.9	5.4	5.9	5.9
A-Salaries and Wages	371,000	436,000	807,000	872,000	872,000
B-Employee Benefits	124,000	149,000	273,000	298,000	298,000
C-Professional Service Contracts	500,000		500,000		
E-Goods and Other Services	10,000	10,000	20,000	20,000	20,000
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	146,000	176,000	322,000	352,000	352,000
9-					
Total \$	1,151,000	771,000	1,922,000	1,542,000	1,542,000

# **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
Contracts Specialist 3	81,000	0.3	0.5	0.4	0.5	0.5
Fiscal Analyst 3	65,000	1.1	1.4	1.3	1.4	1.4
IT Business Analyst -	111,000	1.0	1.0	1.0	1.0	1.0
Senior/Specialist						
IT Data Management -	111,000	1.0	1.0	1.0	1.0	1.0
Senior/Specialist						
Medical Assistance Program	83,000	1.0	1.0	1.0	1.0	1.0
Specialist 3						
Medical Program Specialist 3	90,000	0.5	1.0	0.8	1.0	1.0
Total FTEs		4.9	5.9	5.4	5.9	5.9

#### III. D - Expenditures By Program (optional)

Program	FY 2024	FY 2025	2023-25	2025-27	2027-29
Community Behavioral Health (150)	1,151,000	771,000	1,922,000	1,542,000	1,542,000
Total \$	1,151,000	771,000	1,922,000	1,542,000	1,542,000

### 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

See attached narrative

## Part V: New Rule Making Required

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

Bill Number: 1134 E2S HB

## Part II: Narrative Explanation

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

An act relating to the 988 Behavioral Health (BH) system that establishes standards for endorsed teams, inclusive of staffing, response times and training requirements and also changes the timeline for establishing designated 988 crisis contact center hubs.

This engrossed second substitute bill differs from the original bill as follows:

**Section 5 (1)(b)** requires the Department of Health (DOH) and the Washington State Health Care Authority (HCA) to enter into data sharing agreements with the crisis call centers and regional behavioral health administrative service organizations (BH-ASOs) to provide reports and client level data as allowed by existing law to coordinate care for individuals with a history of frequent crisis system utilization.

**Section 5 subsections (2)(b), (4)(b)(ix), (4)(b)(x) and (7)(f)** require that HCA and DOH enter into data-sharing agreements to provide reports and client level data regarding 988 crisis hotline calls. It requires that DOH and HCA enter into data sharing agreement with designated 988 contract hubs requiring the hubs to report data to regional BH-ASOs for multiple purposes including maximizing Medicaid reimbursements and administering services and the number of providers. HCA is required to monitor trends in 988 crisis hotline caller data as reported by the hubs and submit an annual report to the governor and the legislature beginning December 1,2027.

**New Section 8 (1)** provides that becoming endorsed will allow a mobile rapid response crisis team to be eligible for performance payments as described in Section 8 (10).

**New Section 8 (10)** HCA will establish an endorsed mobile rapid response crisis team performance program. HCA will issue performance payments in the form of an enhanced case rate to mobile rapid response crisis teams and community-based crisis teams that have been endorsed and have met the response time standards for the previous three months. HCA shall design this program to maximize the matching federal funds.

**New Section 8 (11)** requires HCA to contract with actuaries to conduct and analysis and develop options for payment mechanisms and levels for rate enhancements in Section 8 (10) to meet several goals, including maximizing federal Medicaid match. HCA will submit a report summarizing this information to the Office of Financial Management and the legislature by December 1, 2023.

**New Section 8 (12)** requires HCA to conduct a review of the endorsed teams and report to the governor and the legislature by December 1, 2028.

In total (including the sections highlighted above), the following sections impact HCA:

Section 5 (1)(b) requires DOH and HCA to enter into data sharing agreements with the crisis call centers and regional behavioral health administrative service organizations (BH-ASOs) to provide reports and client level data as allowed by existing law to coordinate care for individuals with a history of frequent crisis system utilization.

## HCA Fiscal Note

Bill Number: 1134 E2S HB

HCA Request #: 23-197

Section 5 (5) Inclusion of 988 call centers and crisis hubs in system decision-making. Requires that the HCA include the 988 call centers and designated 988 crisis contact center hubs in the decision making process for selecting technology platforms that will be used to operate the system.

Section 5 subsections (2)(b), (4)(b)(ix), (4)(b)(x) and (7)(f) require that HCA and DOH enter into data-sharing agreements to provide reports and client level data regarding 988 crisis hotline calls. It requires that DOH and HCA enter into data sharing agreement with designated 988 contract hubs requiring the hubs to report data to regional BH-ASOs for multiple purposes including maximizing Medicaid reimbursements and administering services and the number of providers. HCA is required to monitor trends in 988 crisis hotline caller data as reported by the hubs and submit an annual report to the governor and the legislature beginning December 1,2027.

Section 6 (8) Inclusion of a 988 geolocation subcommittee. This subcommittee will examine privacy issues in routing 988 crisis hotline calls based on the person's location.

**New Section 8 (1-5) HCA will establish endorsement standards, issue and renew endorsements** of the mobile rapid response crisis teams. HCA will conduct on-site surveys of the mobile rapid response teams prior to issuing endorsements, issuing and renewing endorsements, renewal of endorsements and procedures for denial, suspension and revocation of endorsements.

**New Section 8 (10) Response Time Standards.** Requires HCA to establish standards to endorse mobile rapid response crisis teams with response time standards between January 1, 2025 and December 1, 2026 within 30 minutes for urban areas, 40 minutes for suburban areas and enroute within 15 minutes of being dispatched for rural areas at least 80 percent of the time. Those response requirements change to within 20 minutes for urban areas, 30 minutes for suburban areas and enroute within 10 minutes of being dispatched for rural areas at least 80 percent of the time beginning January 1, 2027. It also provides that becoming endorsed will allow a mobile rapid response crisis team to be eligible for performance payments as described in Section 8 (10).

New Section 8 (10) HCA will establish an Endorsed Mobile Rapid Response Crisis Team performance program. HCA will issue establishment grants, performance payments and supplemental performance payments.

The establishment grants will be issued to support mobile rapid response crisis teams seeking to meet standards to become endorsed.

Performance payments will be in the form of an enhanced case rate to mobile rapid response crisis teams and community-based crisis teams that have been endorsed and have met the response time standards for the previous three months. HCA shall design this program to maximize the matching federal funds.

**New Section 8 (11) requires HCA to contract with actuaries** to conduct and analysis and develop options for payment mechanisms and levels for rate enhancements in Section 8 (10) to meet several goals, including maximizing federal Medicaid match. HCA will submit a report summarizing this information to the Office of Financial Management and the legislature by December 1, 2023.

**New Section 8 (12) requires HCA** to conduct a review of the endorsed teams and report to the governor and the legislature by December 1, 2028.

**New Section 10 Crisis Training and Secondary Trauma Program.** Requires the University of Washington (UW) to establish a crisis training and secondary trauma program to support the development of high-quality training for crisis responders for the 988 BH crisis response.

#### II. B - Cash Receipts Impact

Indeterminate.

HCA assumes the fiscal impacts associated with the staff cost will be eligible for a blended federal match rate of 12 percent.

ACCOUNT		FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
General Fund-Medicaid	001-C	144,000	96,000	96,000	96,000	96,000	96,000	240,000	192,000	192,000
	Tot	ils \$ 144,000	\$ 96,000	\$ 96,000	\$ 96,000	\$ 96,000	\$ 96,000	\$ 240,000	\$ 192,000	\$ 192,000

#### II. C – Expenditures

This fiscal note is indeterminate but with costs greater than \$50,000.

Job title	Salary	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
CONTRACTS SPECIALIST 3	81,000	0.3	0.5	0.5	0.5	0.5	0.5	0.4	0.5	0.5
FISCAL ANALYST 3	65,000	1.1	1.4	1.4	1.4	1.4	1.4	1.2	1.4	1.4
IT BUSINESS ANALYST - SENIOR/SPECIALIST	111,000	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
IT DATA MANAGEMENT - SENIOR/SPECIALIST	111,000	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
MEDICAL ASSISTANCE PROGRAM SPECIALIST 3	83,000	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
MEDICAL PROGRAM SPECIALIST 3	90,000	0.5	1.0	1.0	1.0	1.0	1.0	0.8	1.0	1.0
	Totals	4.9	5.9	5.9	5.9	5.9	5.9	5.4	5.9	5.9

Account	Account Title	Туре	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
001-C	General Fund	Medicaid	144,000	96,000	96,000	96,000	96,000	96,000	240,000	192,000	192,000
25N-1	Stwd 988 BH & Suicide Prev Line	State	1,007,000	675,000	675,000	675,000	675,000	675,000	1,682,000	1,350,000	1,350,000
		Totals	\$ 1,151,000	\$ 771,000	\$ 771,000	\$ 771,000	\$ 771,000	\$ 771,000	\$ 1,922,000	\$ 1,542,000	\$ 1,542,000

		FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
FTE		4.9	5.9	5.9	5.9	5.9	5.9	5.4	5.9	5.9
A	Salaries and Wages	371,000	436,000	436,000	436,000	436,000	436,000	807,000	872,000	872,000
В	Employee Benefits	124,000	149,000	149,000	149,000	149,000	149,000	273,000	298,000	298,000
С	Professional Service Contracts	500,000	-	-	-	-	-	500,000	-	-
E	Goods and Other Services	10,000	10,000	10,000	10,000	10,000	10,000	20,000	20,000	20,000
Т	Intra-Agency Reimbursements	146,000	176,000	176,000	176,000	176,000	176,000	322,000	352,000	352,000
	Totals	\$ 1,151,000	\$ 771,000	\$ 771,000	\$ 771,000	\$ 771,000	\$ 771,000	\$ 1,922,000	\$ 1,542,000	\$ 1,542,000

#### HCA Administrative Costs

HCA requests \$1,922,000 and 5.9 Full Time Equivalent (FTE) staff in the 2023-25 Biennium.

1.0 FTE Medical Program Specialist 3 (permanent). Support and track the establishment grants HCA will issue in Section 10 (a)(i). Annual salary and benefit cost \$122,000.

1.0 FTE Medical Assistance Program Specialist 3 (permanent). Establish and routinely maintain endorsement standards and processes for mobile rapid response crisis teams as required in Section 8 (1) including program oversight. Annual salary and benefit cost \$133,000.

0.5 FTE Contracts Specialist 3 (permanent). Contracts support for grants program. Annual salary and benefit cost \$56,000.

## HCA Fiscal Note

Bill Number: 1134 E2S HB

#### HCA Request #: 23-197

1.0 FTE IT-Data Management Senior/Specialist (permanent) – to monitor trends in 988 crisis hotline caller data and submit annual report, support set up/data analysis of data sharing agreements and provide other data and reports for quality improvement activities in Section 5. Annual salary and benefit cost \$147,000.

1.0 FTE IT-Business Analyst Senior/Specialist (permanent) – will define the requirements for the use of caller geolocation data and related privacy issues. Annual salary and benefit cost \$147,000.

#### Other FTE costs

5.9 FTE. 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 captured and/or included as Fiscal Analyst 3 classification. Total annual cost \$176,000.

Other costs

\$500,000 one-time actuarial costs in FY24.

#### <u>Assumption</u>

As the UW is the only agency addressed in Section 10 HCA assumes that there will not be a fiscal impact to HCA.

#### HCA Costs to Issue/Renew Endorsements for Mobile Rapid Response Crisis Teams

Indeterminate but greater than \$50,000.

This bill requires HCA to issue endorsements (both initial and renewals every three years) for the mobile rapid response crisis teams. HCA is unable to estimate a total cost for these endorsements as the number of teams that will choose to be endorsed is unknown as are their locations.

HCA anticipates that the cost to endorse a single team within the local area would have an average cost of \$4,700 and to endorse a team further away could increase to \$8,900 per site visit.

#### HCA Costs to Make Performance Payments and Supplemental Performance Payments

Indeterminate but greater than \$50,000

This bill requires HCA to establish an endorsed mobile rapid response crisis team performance program and issue performance payments and supplemental performance payments.

HCA is unable to estimate these costs given the unknowns including the number of teams that will choose to be endorsed.

#### HCA Costs for Mobile Rapid Response Crisis Teams

Indeterminate but greater than \$50,000.

While this bill would require HCA to establish endorsement standards for mobile rapid response crisis teams, it would not require existing or new, future teams to be endorsed as a condition to participate in the crisis response system. Given this, HCA expects existing statewide demand and the response time provisions of this bill would drive the need for additional provider capacity. However, in the end, HCA is

Bill Number: 1134 E2S HB

unable to estimate the total number of teams that would exist, and the number of those teams that would elect to be endorsed, if this bill were to pass.

Despite this uncertainty, HCA anticipates existing teams would have incentives to meet the endorsement standards over time, and any newly established teams would similarly choose to meet the endorsement standards upon formation. HCA assumes this for two reasons.

First, existing teams are structured to meet the response times based on the Substance Abuse and Mental Health Services (SAMHSA) toolkit, which is 60 minutes or less. The new standards proposed in this bill would require additional service capacity to allow for shorter response times. HCA expects this additional capacity could only come from expanding existing teams and the formation of new teams.

Second, providers with different service capacities (endorsed vs non-endorsed) would overlap within the same service areas. The BH-ASOs and the managed care organizations (MCO) would be required to manage this disparity of provider endorsement, and the corresponding differences in contract expectations and reimbursement levels to prevent duplications of effort. Ultimately, HCA assumes the contractual requirements it will place on the BH-ASOs and MCOs to meet the proposed response times will trickle down to providers and create natural incentives for participating teams to homogenize to meet the proposed endorsement standards.

#### Assumptions on Cost Drivers

Despite not knowing the number of teams (endorsed and non-endorsed) that would exist if this bill were to pass, HCA can define drivers to help define the cost to support an ideal state... where provider capacity is sufficient to meet the statewide demand within the response time requirements of the bill.

HCA assumes endorsed rapid response teams for both adult and children would be needed. Considering Washington State's population and geography, HCA estimates it would require the equivalent of 78 total endorsed teams (20 child and 58 adult teams) to meet the needs of the state within the response time requirements of this bill. HCA estimates there are currently 63 non-endorsed teams (10 child and 53 adult) within the state.

Therefore, the easiest means to estimate the total cost to bring the state to capacity sufficient to meet the response times in this bill is to calculate the cost to bring the existing 63 non-endorsed teams to meet endorsement requirements and to calculate the cost of 15 new endorsed teams.

#### **Cost Differential for Existing Teams**

Since the bill does not require any participating team to become endorsed, HCA assumes the conversion from non-endorsed to endorsed will happen over time. For the purposes of this fiscal note, HCA assumes a four-year ramp up period is appropriate:

		Year 1	Year 2	Year 3	Year 4	Total
Ect # of Evicting Teams that	Child	2.5	2.5	2.5	2.5	10
Est # of Existing Teams that will Endorse Each Year	Adult	10	12	14	17	53
will Elidorse Each Fear	Total	12.5	14.5	16.5	19.5	63

## HCA Fiscal Note

#### Bill Number: 1134 E2S HB

Current (non-endorsed) team personnel levels are 11 staff. HCA assumes an endorsed team would need about 24 staff. Therefore, the cost difference between a non-endorsed and an endorsed team is about \$1.2 million per year for the child and adult teams.

#### **Cost of Newly Established Teams**

In addition, HCA estimates the state would need 15 new teams. HCA also assumes a four-year ramp up period is appropriate:

		Year 1	Year 2	Year 3	Year 4	Total
Est # of Now Endorsod	Child	2.5	2.5	2.5	2.5	10
Est # of New, Endorsed Teams Each Year	Adult	1.25	1.25	1.25	1.25	5
	Total	3.75	3.75	3.75	3.75	15

As noted earlier, HCA assumes an endorsed team would need about 24 staff. HCA estimates this will cost about \$2.4 million (adult team) to \$2.5 million (child team) per year.

#### **Anticipated Federal Match**

The mix of the additional Medicaid and non-Medicaid populations that would be served is unknown. Since the state can receive federal match only on the cost of services provided to Medicaid clients, only a portion of the services costs would be eligible for federal match. Even within the Medicaid population, different subpopulations receive different percentages of federal match. As a result, it would be difficult to exactly determine the federal revenue that could cover these mobile response costs. Given this complex population mix, HCA estimates the state could receive about 36 percent of the adult team costs and about 44 percent of the child team costs in federal match.

#### **Disclaimer**

While this fiscal note only addresses the incremental funding needed to support the changes proposed in this bill, HCA's ability to implement these new provisions is dependent on its ability to implement other functionality within existing 988 law. This means funding to cover the cost impacts in this fiscal note would – alone – be insufficient to meet what would be the entirety of the 988 law if this bill were to be enacted. HCA would also require the additional funding to support existing 988 law as proposed by the Governor (KB Enhance Crisis System - 988 Line).

### Part IV: Capital Budget Impact

None

### Part V: New Rule Making Requirements (leave blank if no changes)

## **Department of Revenue Fiscal Note**

Bill Number:	1134 E 2S HB	Title: 988 system	Agency:	140-Department of Revenue
Part I: Estin				
X No Fisca				
Estimated Cash NONE				
Estimated Expe	nditures from:			
NONE				
Estimated Car	ital 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:	Andy Toulon	Phone:60-786-7178	Date: 03/07/2023
Agency Preparation:	Beth Leech	Phon&60-534-1513	Date: 03/08/2023
Agency Approval:	Marianne McIntosh	Phon&60-534-1505	Date: 03/08/2023
OFM Review:	Cheri Keller	Phon(360) 584-2207	Date: 03/08/2023

## **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.

Note: This fiscal note reflects language in E2SHB 1134, 2023 Legislative Session.

This fiscal note only addresses section 9 of the bill, which impact the Department of Revenue (department).

#### COMPARISION OF ENGROSSED SECOND SUBSTITUTE BILL WITH SECOND SUBSTITUTE BILL:

The engrossed second substitute bill makes changes to those activities to which the revenues from the statewide 988 behavioral health crisis response and suicide prevention line tax must be dedicated to.

#### CURRENT LAW:

Collections from the statewide 988 behavior health crisis response and suicide prevention line tax are deposited in the statewide 988 behavioral health crisis response and suicide prevention line account. Moneys may only be spent after appropriation.

Expenditures from this account may only be used for:

- Ensuring efficient and effective routing of calls made to the 988 crisis hotline.
- Acute behavioral health, crisis outreach, and crisis stabilization services.

#### PROPOSAL:

Funds from the statewide 988 behavioral health crisis response and suicide prevention line tax are to be used for mobile rapid response crisis teams and community-based crisis teams.

Ten percent of the revenues from the statewide 988 behavioral health crisis response and suicide prevention line tax must be dedicated to the establishment grants, performance payments, and supplemental performance payments for mobile rapid response crisis teams and community-based crisis teams.

#### EFFECTIVE DATE:

The bill takes effect 90 days after final adjournment of the session.

#### 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.

This legislation results in no revenue impact to taxes administered by the department.

#### 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.

This legislation results in no expenditure impact to taxes administered by the department.

### Part III: Expenditure Detail

#### III. A - Expenditures by Object Or Purpose

NONE

III. B - Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

#### III. C - 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

## Part V: New Rule Making Required

## **Individual State Agency Fiscal Note**

<b>Bill Number:</b> 1134 E 28 H	B Title: 988 system	Agency: 227-Criminal Justice Training Commission
Part I: Estimates		
Estimated Cash Receipts to:		

NONE

# **Estimated Operating Expenditures from:** NONE

**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:	Andy Toulon	Phone: 360-786-7178	Date: 03/07/2023
Agency Preparation:	Brian Elliott	Phone: 206-835-7337	Date: 03/09/2023
Agency Approval:	Brian Elliott	Phone: 206-835-7337	Date: 03/09/2023
OFM Review:	Cynthia Hollimon	Phone: (360) 810-1979	Date: 03/09/2023

## 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 has no fiscal impact on the Washington State Criminal Justice Training Commission.

#### 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.

This bill has no cash receipt impact.

#### 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.

This bill has no expenditure impact.

## Part III: Expenditure Detail

- **III. A Operating Budget Expenditures** NONE
- III. B Expenditures by Object Or Purpose NONE

**III. C - Operating FTE Detail:** *FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.* NONE

#### 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.

## **Individual State Agency Fiscal Note**

Bill Number:	1134 E 2S HB	Title:	988 system	Agency: 303-Department of Health
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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	9.0	7.2	8.1	3.8	3.8
Account					
Stwd 988 Behav Hlth & Suicide Prev Line-State 25N-1	5,009,000	4,786,000	9,795,000	8,786,000	8,786,000
Total \$	5,009,000	4,786,000	9,795,000	8,786,000	8,786,000

#### **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:

X 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.

X Requires new rule making, complete Part V.

Legislative Contact:	Andy Toulon	Phone: 360-786-7178	Date: 03/07/2023
Agency Preparation:	Sharilynn Boelk	Phone: 3602363000	Date: 03/09/2023
Agency Approval:	Kristin Bettridge	Phone: 3607911657	Date: 03/09/2023
OFM Review:	Arnel Blancas	Phone: (360) 000-0000	Date: 03/10/2023

## 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 engrossed second substitute bill does not change fiscal impact for the Department of Health from the previous version.

Section 2(18): Amends RCW 71.24.037 (Licensed or Certified Behavioral Health Agencies and Providers—Minimum Standards—Investigations and Enforcement Actions—Inspections) requiring all outpatient behavioral health agencies to display the 988 crisis hotline number in common areas on premises and include the number as a calling option on any phone messages.

Section 2(19): Amends RCW 71.24.037 (Licensed or Certified Behavioral Health Agencies and Providers—Minimum Standards—Investigations and Enforcement Actions—Inspections) requiring all inpatient or residential behavioral health agencies to include the 988 crisis hotline number on discharge paperwork.

Section 3: Requires the Department of Health (department) to consult with tribes, the American Indian health commission of Washington state, the native and strong lifeline, the Washington state department of veterans affairs, and representatives of agricultural communities to develop informational materials and a social media campaign related to the 988 crisis hotline, including call, text, and chat options, and other crisis hotline lines for veterans, American Indians and Alaska Natives, and other populations.

Section 4(6)(C): Adds new requirements for the department to add minimum requirements to the six-hour and three-hour instruction to include content specific to the 988 behavioral health crisis response hotline and suicide prevention system, the services that are provided, and best practices for assisting someone with accessing the hotline or system. It requires the department to review and approve the required training, and all subsequent trainings, starting September 1, 2024.

Section 4. (6)(a): This subsection has been updated to include minimum standards for content which must be met by July 1, 2024.

Revision of training programs usually takes place every few years for each training establishment, and each establishment is on a different schedule depending on its start date. The new requirements will require all training establishments to update their content and therefore have it reviewed by Department of Health, by July 1, 2024. This will cause an influx of all training providers to submit plans for Department of Health's review increasing normal workloads.

Section 5 (2)(a) & (b): These subsections add requirements for contractors, which would require the department to amend and add to its contracts with call center contractors, and to "...establish requirements that the crisis call centers report data to regional behavioral health administrative services organizations."

Section 5 (3): The department shall adopt rules by January 1, 2025, to establish standards for designation for crisis call centers as designated 988 crisis center hubs.

Section 5 (4)(b)(iv): Creates indeterminate fiscal impacts, due to feasibility issues with directions and call center requirements which conflicts with current standards set by the national call center administrator, Vibrant.

Section 6 (11): Requires the CRIS Steering committee to provide a progress report and comprehensive assessment to the governor and legislature. This bill amends to extend how long committee continues its work. The department currently provides support of two FTEs for this work and funding ends June 30, 2023. Carryforward level budget process removed the FY24 funding.

Section 8 (1)(d)(i): Creates indeterminate fiscal impacts because the requirements cannot be met in the timeline specified,

as the tech platform required does not currently exist.

#### 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.

Sections 2(18) & 2(19): The department will develop and adopt rules to update requirements for behavioral health agencies and residential treatment facilities to display the 988 crisis hotline phone number. Existing staff will accomplish the rulemaking required within their normal workload. No fiscal impact to the department for this section.

Section 3 Directs the department to develop informational materials and a social media campaign related to the 988 crisis hotline including call, test, and chat lines, and other crisis hotlines for veterans, American Indians, Alaska Natives, and other populations. In compliance with RCW 43.03.220, Compensation of Members of Part-Time Boards and Commissions – Class one groups, this bill would require compensation of community members with lived experience and/or those living in poverty. All community engagement activities at the department must be in compliance with Title II of the Americans with Disabilities Act, the Heal Act Community Engagement Guide, and possibly the Open Public Meeting Act. In addition to the cost of compensation, observance of these statutory obligations includes providing reimbursement for travel, lodging, and dependent care; translation and interpretation services for all meetings and materials; and the staffing to support managing resources and associated program activities.

1.0 FTE HEALTH SERVICES CONSULTANT 3 will provide contract management, be the liaison between the contractor and department subject matter experts, review and inform the contractor of best practices in behavior change through communication techniques, review contractor products to ensure department standards and accessibility standards are met.

Outsourcing of the social media requirements of the bill will be done by contract. Language in the bill indicates a requirement to segment the campaign; therefore, costs have been broken down by target market in the table below. Cost was estimated using historical expenses for similar work. The estimated contractor's cost includes account management, audience research, printing costs, transcreation and translation costs for 40 languages. Please note, lower estimates do not reflect lower priority. Campaigns cost less money when the audience segment is narrower.

Youth (under 18)	\$250,000
Young adults	\$250,000
General adult	\$300,000
American Indian adults	\$150,000
American Indian youth	\$100,000
Agricultural workers	\$100,000
Veterans	\$100,000
Additional vendor fees*	\$750,000
Total	\$2,000,000

\*Additional vendor fees include account management, audience research, print costs, transcreation and translation costs per 40 languages, etc.

FY 2024 will be 1.4 FTE and \$2,161,000 (25N-STWD 988). FY 2025 and ongoing will be 1.4 FTE and \$2,159,000 (25N-STWD 988).

Section 3 Requires staff from Department of Health to consult with stakeholders.

0.5 FTE HEALTH SERVICES CONSULTANT 3 will provide subject matter expertise and consultation supporting the stakeholder engagement process and campaign development for 988. The position will schedule and attend meetings between communications office staff and 988 implementation partners, assist in developing and attend stakeholder meetings, provide consultation on and reviews of messaging and materials, and assist the communications office staff with situational awareness.

FY 2024 will be 0.7 FTE and \$78,000 (25N-STWD 988). FY 2025 and ongoing will be 0.7 FTE and \$76,000 (25N-STWD 988).

Section 4(6)(C) The department will develop and adopt rules to add minimum requirements to the six-hour and three-hour instruction. The department anticipates utilizing a team of subject matter experts to implement this bill. This team will consist of the program manager and a community engagement specialist to identify underreached communities and engage them in the rulemaking process. This process will include two meetings with interested parties as well as one formal rules hearing, all held virtually, and will take approximately 12 months to complete. The department anticipates providing the rules hearing announcement and materials in both English and Spanish and providing American Sign Language (ASL) and Spanish interpretation services at the rules hearing.

Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$4,000.

FY 2024 one-time costs will be 0.2 FTE and \$29,000 (25N-STWD 988).

Section 4(6)(C) Requires the department to review and approve the required training, and all subsequent trainings, starting September 1, 2024.

0.5 FTE HEALTH SERVICES CONSULTANT 3 will lead the process to add 988 related criteria stipulated in the bill to the current standards for the Washington State Suicide Prevention Training Model List for Health Professionals. The position will collaborate with University of Washington to ensure recommendations related to 988 are incorporated into Model List standards, develop and implement a dissemination and communication plan for the new standards, communicate with training developers and stakeholders on updated standards, collaborate with affected disciplinary and professional associations to roll out the updated standards, coordinate and review training program applications, and collaborate with internal stakeholders to ensure standards related to this bill are met.

FY 2024 costs will be 0.7 FTE and \$78,000 (25N-STWD 988). FY 2025 and ongoing will be 0.7 FTE and \$76,000 (25N-STWD 988).

Section 5(2)(a) & (b) Allows the department to amend or create additional contracts with the 988 crisis call centers to include funding for 988 counselors to be co-located at Public Safely Answering Points. Should this be needed, the cost estimates are as follows. The department will need to add department staff time to manage the additional contract funds. Funding for the additional contracts include staffing, equipment and technology, training, etc.\$1,985,641 for two call center contactors and a ten percent increase for the third call center which serves a larger area. [(1,985,641x2=3,971,282) + (1,985,641x1.1=2,184,205) = 6,155,487]

FY 2024 costs will be 0.9 FTE and \$2,083,000 (25N-STWD 988). FY 2025 and ongoing will be 0.9 FTE and \$2,082,000 (25N-STWD 988).

Section 5 (3) Requires the department to develop and adopt rules creating standards for crisis call center hubs and update requirements for behavioral health agencies to display the 988 crisis hotline phone number. A more detailed cost breakdown is provided under Part V: New Rule Making below.

The department anticipates utilizing a team of subject matter experts and policy analysts to implement this rulemaking. Rulemaking will also require a tribal government to government collaboration and community engagement to ensure equitable of rulemaking. This process will include at least four meetings with interested parties as well as three meetings with tribal partners and at least one formal rules hearing. Some of these meetings are anticipated to be in-person and will take approximately 18 months to complete. 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. Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$5,000.

FY 2024 costs will be 2.2 FTE and \$267,000 (25N-STWD 988). FY 2025 costs will be 0.7 FTE and \$83,000 (25N-STWD 988).

Section 5 (4)(b)(iv) creates indeterminate fiscal impacts. This subsection requires the 988 contact center hubs to train staff to screen callers to determine if they are associated with the agricultural community to be routed to a specified Agricultural worker line. Currently, there is no Agriculture line used nationally or endorsed by Vibrant, the National 988 Administrator.

Requiring a 988 contact center hub to "screen" callers is not an allowable practice for a National Suicide Prevention Line. It breaks confidentiality and safe call standards. To implement this subsection would require creating a separate call line for Washington. That cost is indeterminate.

Section 6 (11) Requires the CRIS Steering committee to provide a progress report and comprehensive assessment to the governor and legislature each year. This bill amends the dates for the required reports. Department of Health requires funding for two years of its current staff supporting the CRIS steering committee.

2.0 FTE HEALTH SERVICES CONSULTANT 3 Provide subject matter content leadership and work collaboratively with the program unit supervisor to provide information and resources to the CRIS Committee and 988 Steering Committee. Serve as a Department of Health representative, as requested, on CRIS Committee subcommittees providing status updates and action steps to the program unit supervisor and division leadership. Provide requested content and information regarding the implementation, progress, and monitoring of 988 crisis call center hubs.

FY 2024 costs will be 2.8 FTE and \$313,000 (25N-STWD 988). FY 2025 costs will be 2.8 FTE and \$310,000 (25N-STWD 988).

Section 8 (1)(d)(i) creates indeterminate fiscal impacts. This section requires mobile rapid response crisis teams to meet specific dispatch times based on geographic location and would require 988 contact centers to dispatch mobile response teams as early as Jan 2025, which is not feasible because there is not a tech platform that will be available for dispatch services at that time.

Other Costs:

Estimated expenditures include salary, benefit, and related costs to assist with administrative workload activities. These activities include policy and legislative relations; information technology; budget and accounting services; human resource; contracts; procurement, risk management, and facilities management.

Total costs to implement this bill are: FY24 – 9.0 FTE and \$5,009,000 (25N-STWD 988) FY25 – 7.2 FTE and \$4,786,000 (25N-STWD 988) FY26 and ongoing – 3.7 FTE and \$4,393,000 (25N-STWD 988)

## Part III: Expenditure Detail

#### **III. A - Operating Budget Expenditures**

Account	Account Title	Туре	FY 2024	FY 2025	2023-25	2025-27	2027-29
25N-1	Stwd 988 Behav Hlth	State	5,009,000	4,786,000	9,795,000	8,786,000	8,786,000
	& Suicide Prev Line						
		Total \$	5,009,000	4,786,000	9,795,000	8,786,000	8,786,000

#### III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	9.0	7.2	8.1	3.8	3.8
A-Salaries and Wages	638,000	522,000	1,160,000	530,000	530,000
B-Employee Benefits	253,000	205,000	458,000	208,000	208,000
C-Professional Service Contracts	2,001,000	2,000,000	4,001,000	4,000,000	4,000,000
E-Goods and Other Services	54,000	34,000	88,000	36,000	36,000
G-Travel	6,000		6,000		
J-Capital Outlays	24,000		24,000		
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services	1,986,000	1,986,000	3,972,000	3,972,000	3,972,000
P-Debt Service					
T-Intra-Agency Reimbursements	47,000	39,000	86,000	40,000	40,000
9-					
Total \$	5,009,000	4,786,000	9,795,000	8,786,000	8,786,000

**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	1.8	1.5	1.7	1.0	1.0
HEALTH SERVICES CONSULTAN 3	75,120	4.5	4.5	4.5	2.5	2.5
HEALTH SERVICES CONSULTAN 4	82,896	0.1		0.1		
Health Svcs Conslt 1	53,000	1.0	0.7	0.9	0.3	0.3
MANAGEMENT ANALYST 4	82,896	1.6	0.5	1.1		
Total FTEs		9.0	7.2	8.1	3.8	3.8

#### 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 NONE

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 2(18), 4(6)(C) & 8 Direct the department to adopt rules in WAC 246-12-630 (Training Content) and 246-341 WAC (Behavioral Health Agency Licensing and Certification Requirements) as necessary to implement the bill. Rulemaking for Section 2(18) may require adopting rules under 246-337 WAC (Residential Treatment Facility), 246-320 WAC (Hospital Licensing Regulations), and 246-322 WAC (Private Psychiatric and Alcoholism Hospitals) in addition to 246-341 WAC (Behavioral Health Agency Licensing and Certification Requirements) to implement the bill.

Section 5 (3) Requires the department to develop and adopt rules creating standards for crisis call center hubs and update requirements for behavioral health agencies to display the 988 crisis hotline phone number. The department anticipates utilizing a team of subject matter experts and policy analysts to implement this rulemaking. Rulemaking will also require a tribal government to government collaboration and community engagement to ensure equitable of rulemaking. This process will include at least four meetings with interested parties as well as three meetings with tribal partners and at least one formal rules hearing. Some of these meetings are anticipated to be in-person and will take approximately 18 months to complete. 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. Costs include staff, associated expenses (including goods and services, travel, intra-agency, and indirect charges), and Office of Attorney General support in the amount of \$5,000.

## **Individual State Agency Fiscal Note**

Bill Number:	1134 E 2S HB	Title:	988 system	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		3.5	4.2	3.8	0.0	0.0
Account						
General Fund-State	001-1	617,571	717,163	1,334,734	0	0
	Total \$	617,571	717,163	1,334,734	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:

X 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:	Andy Toulon	Phone: 360-786-7178	Date: 03/07/2023
Agency Preparation:	Charlotte Shannon	Phone: 2066858868	Date: 03/09/2023
Agency Approval:	Charlotte Shannon	Phone: 2066858868	Date: 03/09/2023
OFM Review:	Ramona Nabors	Phone: (360) 742-8948	Date: 03/10/2023

## 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.

The engrossed second substitute bill makes no significant changes to the section pertaining to the University of Washington (UW), compared to the second substitute bill. Therefore the UW is submitting the same fiscal note as the second substitute bill.

Overall 2SHB 1134 Overall SHB 1134 Further implements the 988 behavioral health crisis response and suicide prevention system.

#### 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 6**

This section extends the work of the Behavioral Health Institute at Harborview Medical Center to facilitate and provide staff support to the steering committee and to the crisis response improvement strategy committee by one year (June 30, 2025), and adds language allowing them to contract for the provision of these services. It also adds a Geolocation Subcommittee to examine privacy issues related to federal planning efforts to route 988 crisis hotline calls based on the person's location, rather than area code, and provides some membership requirements.

#### FISCAL IMPACTS OF SECTION 6:

The UW assumes the following FTE will be required to support the work of the committee:

- .1 FTE Director Government Relations (salary \$263,508, benefits 31.8%) in FY24 and FY25.
- .1 FTE Director BHI (salary \$230,004, benefits 31.8%) in FY24 and FY25.
- \$588,956 in professional service contracts to provide staff support to the committees in FY24 and FY25.
- TOTALLING \$621,479 in FY24 and \$621,479 in FY25.

Totaling \$24,676 in salaries and wages and \$7,847 FY24 in benefits.

The Ballmer Group has expressed interest in funding the extension of the committee's work, and therefore the UW is leaving these fiscal impacts as indeterminate and reflected in the narrative only.

#### SECTION 10:

This section directs the University of Washington School of Social Work UW SSW), in concert with the Washington Council on Behavioral Health and the state's behavioral health administrative services organizations along with key stakeholders, shall plan for regional collaboration among behavioral health providers and first responders working within the 988 crisis response and suicide prevention system, standardize practices and protocols, and develop a needs assessment for trainings. The University of Washington school of social work, in collaboration with the stakeholder groups, shall develop recommendations for establishing crisis workforce and resilience training collaboratives that would offer voluntary regional trainings for behavioral health providers, peers, first responders, co-responders, 988 contact center personnel, designated

988 contact hub personnel, 911 operators, and interested members of the public, specific to a geographic region and the population they serve as informed by the needs assessment. The collaboratives shall encourage the development of foundational and advanced skills and practices in crisis response as well as foster regional collaboration. The training needs assessment, mapping of crisis providers, and research on existing training requirements must be completed by June 30, 2024.

The collaboratives shall encourage the development of foundational and advanced skills and practices in crisis response as well as foster regional collaboration. The recommendations must:

(a) Include strategies for better coordination and integration of 988-specific training into the broader scope of behavioral health trainings that are already required;

(b) Identify effective trainings to explain how the 988 system works with the 911 emergency response system, trauma-informed care, secondary trauma, suicide protocols and practices for crisis responders, supervisory best practices for first responders, lethal means safety, violence assessments, cultural competency, and essential care for serving individuals with serious mental illness, substance use disorder, or co-occurring disorders;

(c) Identify best practice approaches to working with veterans, intellectually and developmentally disabled populations, youth, LGBTQ populations, communities of color, agricultural communities, and American Indian and Alaska Native populations;

(d) Identify ways to provide the designated 988 contact hubs and other crisis providers with training that is tailored to the agricultural community using training that is agriculture-specific with information relating to the stressors unique to persons connected with the agricultural community such as weather conditions, financial obligations, market conditions, and other relevant issues. When developing the recommendations, consideration must be given to national experts, such as the AgriSafe network and other entities;

(e) Identify ways to promote a better informed and more involved community on topics related to the behavioral health crisis system by increasing public access to and participation in trainings on the topics identified in (b) and (c) of this subsection (2), including through remote audiovisual technology;

(f) Establish suggested protocols for ways to sustain the collaboratives as new endorsed 988 rapid response crisis teams, co-responder teams, and crisis facilities are funded and operationalized;

(g) Discuss funding needs to sustain the collaboratives and support participation in attending the trainings; and

(h) Offer a potential timeline for implementing the collaboratives on a region-by-region

#### FISCAL IMPACTS OF SECTION 10:

Planning for collaboration to standardize practices and protocols while implementing a needs assessment for establishing crisis workforce and resilience training collaboratives among different constituent groups across the state. The collaborative effort in needs assessment and planning will require a full 18 months with additional follow-up to encourage the development of foundational and advanced skills and practices in crisis response as well as foster regional collaboration.

The budget requires 3.45 FTE to support needs assessments of SHB 1134. The key personnel are experts in the field of behavioral mental health needs assessment strategies. This would include:

• .4 FTE Associate Professor to provide overall assessment and recommendations on the development of strategies for coordination based on previous statewide experience on suicide prevention and 988 efforts. (salary \$165,747, benefits 24.1%)

• .05 FTE Associate Dean to provide overall state strategy on state departmental coordination for behavioral health. (salary \$264,551, benefits 24.1%)

• 1.0 FTE Trainer Supervisor who has led statewide training programs in behavioral mental health. (salary \$120,000, benefits 31.8%)

• 1 FTE Data Analyst would review all prevailing information for the survey of training and establish a needs assessment to be administered. (salary 86,520, benefits 31.8%)

• .5 FTE Program Operations Specialist would provide all scheduling logistics statewide between UW, the State of Washington, and representative groups from travel and meetings developing communications standards to ensure

collaboration is robust among all participants. (salary \$74,031, benefits 31.8%)

• .5 FTE Program Coordinator would assist in procurement, including reimbursements for travel of participants, payment of supplies and contracts for the effort. (\$60,000, benefits 39.5%)

Additional costs include:

The UW SSW assumes they would contract with the UW Trauma Recovery & Resilience Innovations Center (TRI) within the UW Department of Psychiatry and Behavioral Sciences to develop and deliver trainings focused on trauma to support 988 crisis responders, including trauma-informed care, and supporting crisis responder's mental health care and resilience in the context of acute and chronic stressors and repeated trauma exposure, totaling \$92,905 in FY25. The FTE required to develop and deliver training, provide technical assistance for creating content for training, and assist during training:

- .40 FTE in FY 25 Research Coordinator (\$63,600 salary, 39.5% benefits)
- .12 FTE in FY25 and .05 FTE in FY25 Professor (Psych) (\$186,912 salary, 24.1% benefits)
- .12 FTE in FY25 Associate Professor (Psych) (\$136,296 salary, 24.1% benefits)
- .07 FTE in FY25 Assistant Professor (Psych); (\$106,872 salary, 24.1% benefits)

In addition, the UW SSW assesses the following additional costs:

• FY24-25 \$100,000 annually for two professional service contracts (\$50,000 each) with the Washington Council for Behavioral Health and to ASOS for staff support of the collaborative efforts for both the needs assessments and in the development of recommendations for strategies.

• A web developer would be contracted in FY24 for \$10,000 and maintenance of \$5,000 in FY25 to create the web portal.

• Travel of \$35,580 would be budgeted annually for collaboration with the committee of 10 to travel to Olympia 6 times annually. Costs include federally approved per diem for lodging and meals along with either mileage or air reimbursement. Additional meetings monthly would be remote.

- Light refreshments for in-person meetings would total \$200/session for \$1,200 annually both for FY24 and FY25.
- Supplies of \$8,250 in FY24 and \$1,500 in FY25 would cover costs of a laptop, program software licenses for web hosting, and incidentals related to the delivery of training statewide.

TOTAL FISCAL IMPACTS:

FY 24: \$617,571 FY 25: \$717,163

## Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Туре	FY 2024	FY 2025	2023-25	2025-27	2027-29
001-1	General Fund	State	617,571	717,163	1,334,734	0	0
		Total \$	617,571	717,163	1,334,734	0	0

#### III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	3.5	4.2	3.8		
A-Salaries and Wages	353,062	434,495	787,557		
B-Employee Benefits	109,479	132,638	242,117		
C-Professional Service Contracts	110,000	105,000	215,000		
E-Goods and Other Services	9,450	9,450	18,900		
G-Travel	35,580	35,580	71,160		
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 \$	617,571	717,163	1,334,734	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
Assistant Professor (Psych)	106,872		0.1	0.0		
Associate Dean	264,551	0.1	0.1	0.1		
Associate Professor	165,747	0.4	0.4	0.4		
Associate Professor (Psych)	136,296		0.1	0.1		
Data Policy Analyst	86,520	1.0	1.0	1.0		
Professor (Psych)	186,912		0.1	0.1		
Program Coordinator	74,031	0.5	0.5	0.5		
Program Operations Specialist	60,000	0.5	0.5	0.5		
Research Coordinator	63,600		0.4	0.2		
Trainer Supervisor	120,000	1.0	1.0	1.0		
Total FTEs		3.5	4.2	3.8		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.

## LOCAL GOVERNMENT FISCAL NOTE

Department of Commerce

Bill Number:	1134 E 2S HB	Title:	988 system							
Part I: Juri	Part I: Jurisdiction-Location, type or status of political subdivision defines range of fiscal impacts.									
X Counties: X Special Dist	ies may participate of Same as above ricts: Behavioral hea Washington (U services, and 1 crisis hotline c contact hubs f sdictions only: curs due to:	alth administ JW) to devel aw enforcem lisplays. BH/	pid response crisis teams. strative services organizations (BHASO) would have to coordinate with the University of elop and implement training for mobile rapid response crisis teams, emergency medical ment personnel. Every licensed or certified behavioral health agency will have to post 988 IASOs are required to enter into data-sharing agreements with crisis call centers and 988 ose of maximizing Medicaid reimbursement.							
No fiscal in	npacts.									
Expenditure	es represent one-time	costs:								
X Legislation	provides local option	: Not all c	cities and counties may elect to apply for grant funding							
X Key variabl	es cannot be estimate	d with certain	ainty at this time: The cost of posting the 988 crisis hotline number in the common areas of every licensed or certified behavioral health agency; BHASOs to coordinate with UW to develop and implement training; cost of applying to grants for mobile rapid response crisis teams and community-based crisis teams; cost to BHASOs for processing data shared with them from crisis call centers and 988 contact hubs.							
Estimated reve	Estimated revenue impacts to:									
	Non-zero	but indeter	erminate cost and/or savings. Please see discussion.							

Estimated expenditure impacts to:

Non-zero but indeterminate cost and/or savings. Please see discussion.

## Part III: Preparation and Approval

Fiscal Note Analyst: Brandon Rountree	Phone: (360) 999-7103	Date:	03/14/2023
Leg. Committee Contact: Andy Toulon	Phone: 360-786-7178	Date:	03/07/2023
Agency Approval: Alice Zillah	Phone: 360-725-5035	Date:	03/14/2023
OFM Review: Arnel Blancas	Phone: (360) 000-0000	Date:	03/14/2023

Bill Number: 1134 E 2S HB

FNS060 Local Government Fiscal Note

## Part IV: Analysis A. SUMMARY OF BILL

Description of the bill with an emphasis on how it impacts local government.

CHANGES BETWEEN THIS VERSION AND PREVIOUS BILL VERSION:

The bill changed section 8 (3) to require the authority to adjust the standards for issuing an endorsement for community-based crisis team comprised solely of an emergency medical services organization and located in a rural county in eastern Washington with a population of less than 60,000 residents. BHASOs are required to enter into data-sharing agreements with crisis call centers and 988 contact hubs for the purpose of maximizing Medicaid reimbursement. Endorsed mobile rapid response crisis teams and community-based crisis teams can qualify for performance payments and supplemental performance payments.

#### SUMMARY OF CURRENT BILL:

Expands the endorsement process for mobile rapid response crisis teams that meet staffing, vehicle, and response time standards, as well as a grant program to support them. Directs the University of Washington to cooperatively develop recommendations for the creation of crisis workforce and resilience training collaborative to offer voluntary regional trainings for personnel in the behavioral health crisis system. Establishes liability protection for several entities and personnel for activities related to the dispatching decisions of 988 crisis hotline staff and the transfer of calls between the 911 line and the 988 crisis hotline.

Sec. 1: (2) Removed definition for "988 rapid response crisis team".

(17) Added definition for "community-based crisis team".

Sec. 5: (2) Expanded on requirements and authorities of the department when contracting with crisis call centers.

(4) (b) (viii) Remove "988" and replaced it with "mobile". Added "community-based crisis teams" to the list of services which would require 988 contact hubs to jointly develop dispatching protocols with regional behavioral health administrative services organizations (BHASO).

(2) (b) (x) Requires crisis call centers to enter into data-sharing agreements with the department, the authority, and applicable regional BHASOs. The department and the authority shall establish requirements that the crisis call centers report the data identified in this subsection (2) (b) to regional BHASOs for the purposes of maximizing Medicaid reimbursement.

Sec. 8: (1) Adds language which authorizes the authority to issue an endorsement to any mobile rapid response crisis team or community-based crisis team that meets the criteria under either subsection (2) or (3) of this section. The endorsement is a voluntary credential that a mobile rapid response crisis team or community-based crisis team can obtain to signify that it maintains the capacity to respond to persons who are experiencing a significant behavioral health emergency requiring an urgent, in-person response. The attainment of an endorsement allows the mobile rapid response crisis team or community-based crisis team to become eligible for performance payments.

(2) Outlines the authority's standards for issuing an endorsement to a mobile rapid response crisis team or a community-based crisis team.(2) (d) Removed

(3) Removed and added language which directed the authority adjust the standards for issuing an endorsement to a community-based crisis team if the team is comprised solely of an emergency medical services agency and is located in a rural county in eastern Washington with a population of less than 60,000 residents. Additionally, this subsection (3) authorizes the authority to exempt a team from the personnel standards under subsection (2)(a) of this section and issue an endorsement to a team until January 1, 2030.

(4) Requires the authority to conduct an on-site survey of the applicant's operation before issuing an initial endorsement or renewing an endorsement.

(5) An endorsement must be renewed every three years.

(6) Requires the authority to establish forms and procedures for issuing and renewing an endorsement.

(8) (a) Changes "988 rapid repose crisis team" to "mobile rapid response crisis team or community-based crisis team to seek endorsement".

(8) (b) Establishes that an unendorsed mobile rapid response crisis team are not exempt from the obligation to comply with any standards adopted by the authority with respect to mobile rapid response crisis teams.

(8) (c) Establishes that an unendorsed mobile rapid response crisis team are not exempt from the responsibilities and reimbursement for services as they may be defined in contracts with managed care organizations or BHASOs.

(10) Directs the authority to establish an endorsed mobile rapid response crisis team and community-based crisis team performance program with receipts from the statewide 988 behavioral health crisis response and suicide prevention line account.

(10) (a) Outlines the requirements for the performance program.

(10) (a) (i) Creates an establishment grant to support mobile rapid response crisis teams and community-based crisis teams seeking to meet the elements necessary to become endorsed.

(10) (a) (ii) Establishes performance payments in the form of an enhanced case rate to mobile rapid response crisis teams and community-based crisis teams that have received an endorsement from the authority.

(10) (a) (iii) Establishes supplemental performance payments in the form of an enhanced case rate higher than that available in (a)(ii) to mobile rapid response crisis teams and community-based crisis teams that have received an endorsement and demonstrate to the authority that for the previous three months they met the requirements in (10) (a) (iii) (A-C).

#### **B. SUMMARY OF EXPENDITURE IMPACTS**

Expenditure impacts of the legislation on local governments with the expenditure provisions identified by section number and when appropriate, the detail of expenditures. Delineated between city, county and special district impacts.

#### CHANGES IN EXPENDITURE IMPACTS BETWEEN THIS VERSION AND PREVIOUS BILL VERSION:

The engrossed second substitute expands the data sharing requirements for 988 contact hub contracts and mobile rapid response crisis teams, and changes community-based crisis team endorsement requirements.

#### EXPENDITURE IMPACTS OF CURRENT BILL:

This legislation would have an indeterminate expenditure impact on behavioral health administrative services organizations (BHASO) and local government.

#### IMPACT ON HBASO

BH-ASOs can expect a minimal indeterminate increase in expenditures because of the legislations requirement to post 988 information in all common areas.

BHASOs would also see indeterminate expenditures due to required participation of two BHASOs representatives in the University of Washington School of Social Work development of a needs assessment for training and a plan for regional collaboration among noted stakeholders (Sec. 10 (1) (a)).

BHASOs would see additional indeterminate costs BHASOs from the substitute bills requirement for them to collaborate with the University of Washington School of Social Work to develop recommendations for establishing crisis workforce and resilience training collaboratives that would offer voluntary regional trainings specific to a geographic region and the population they serve as informed by the needs assessment

BHASOs can expect an indeterminate expenditure increase due to the changes made to 988 contact hub contact

Page 3 of 4

FNS060 Local Government Fiscal Note

requirements and crisis call centers which now require them to enter into data-sharing agreements with the department, the authority, and applicable regional BHASOs. As a result of the data sharing requirements, BHASOs would see an increase in work hour demand or a need for new data processing procedures for the purposes of maximizing Medicaid reimbursement.

#### C. SUMMARY OF REVENUE IMPACTS

*Revenue impacts of the legislation on local governments, with the revenue provisions identified by section number, and when appropriate, the detail of revenue sources. Delineated between city, county and special district impacts.* 

#### CHANGES IN REVENUE IMPACTS BETWEEN THIS VERSION AND PREVIOUS BILL VERSION:

The engrossed second substitute adds performance payments and supplemental performance payment which would be awarded to mobile rapid response crisis teams and community-based crisis teams if they are endorsed by the authority and meet other requirements.

#### REVENUE IMPACTS OF CURRENT BILL:

This legislation would have an indeterminate revenue impact on behavioral health administrative services organizations (BHASO) and local governments. The amount of grant money that will be available is unknown and cannot be projected. Commerce also cannot project how the money will be distributed because the amount of grant money available and the number of crisis teams that will apply for grant money is unknown at the time. Additionally, performance payments and supplemental performance payments that will be awarded to mobile rapid response crisis teams and community-based crisis teams is unknown at the time because not all crisis teams will be endorsed by the authority and may not meet the requirements outlined in subsections (10) (a) (iii) (A-C).

Sources:

Local Government Fiscal Note, HB 1134, (2023) Local Government Fiscal Note, S HB 1134, (2023) Local Government Fiscal Note, 2S HB 1134, (2023) House Bill Report, HB 1134, Health Care & Wellness Committee House Bill Report, SHB 1134, Health Care & Wellness Committee Washington State Hospital Association



# Multiple Agency Ten-Year Analysis Summary

Bill Number	Title
1134 E 2S HB	988 system

This ten-year analysis is limited to the estimated cash receipts associated with the proposed tax or fee increases.

### **Estimated Cash Receipts**

Office of Financial Management	0	0	0	0	0	0	0	0	0	0	0
Washington State Health Care Authority	0	0	0	0	0	0	0	0	0	0	0
Department of Revenue	0	0	0	0	0	0	0	0	0	0	0
Criminal Justice Training Commission	0	0	0	0	0	0	0	0	0	0	0
Department of Health	0	0	0	0	0	0	0	0	0	0	0
University of Washington	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0	0



Bill Number	Title	Agency
1134 E 2S HB	988 system	105 Office of Financial Management

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp .

X No Cash Receipts	Io Cash Receipts Partia			Ily Indeterminate Cash Receipts					Indeterminate Cash Receipts			
Name of Tax or Fee	Acct Code											

Agency Preparation: Keith Thunstedt	Phone: 360-810-1271	Date: 3/9/2023 12:24:09 pm
Agency Approval: Jamie Langford	Phone: 360-902-0422	Date: 3/9/2023 12:24:09 pm
OFM Review:	Phone:	Date:



Bill Number	Title	Agency
1134 E 2S HB	988 system	107 Washington State Health Care Authority

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp .

X No Cash Receipts		F	Partially Indeterminate Cash Receipts					Indeterminate Cash Receipts					
Name of Tax or Fee	Acct Code												

Agency Preparation: Kathryn Kingman	Phone: 360-725-0455	Date: 3/14/2023 12:52:34 pn
Agency Approval: Carl Yanagida	Phone: 360-725-5755	Date: 3/14/2023 12:52:34 pn
OFM Review:	Phone:	Date:



Bill Number	Title	Agency
1134 E 2S HB	988 system	140 Department of Revenue

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp .

X No Cash Receipts		F	Partially Indeterminate Cash Receipts					Indeterminate Cash Receipts					
Name of Tax or Fee	Acct Code												

Agency Preparation: Beth Leech	Phone: 360-534-1513	Date: 3/8/2023 11:51:04 am
Agency Approval: Marianne McIntosh	Phone: 360-534-1505	Date: 3/8/2023 11:51:04 am
OFM Review:	Phone:	Date:



Bill Number	Title	Agency
1134 E 2S HB	988 system	227 Criminal Justice Training Commission

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp .

X No Cash Receipts		Partially	Partially Indeterminate Cash Receipts					Indeterminate Cash Receipts					
Name of Tax or Fee	Acct Code												

Agency Preparation: Brian Elliott	Phone: 206-835-7337	Date: 3/9/2023 8:18:51 am
Agency Approval: Brian Elliott	Phone: 206-835-7337	Date: 3/9/2023 8:18:51 am
OFM Review:	Phone:	Date:



Bill Number	Title	Agency
1134 E 2S HB	988 system	303 Department of Health

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp .

X No Cash Receipts		F	Partially Indeterminate Cash Receipts					Indeterminate Cash Receipts					
Name of Tax or Fee	Acct Code												

Agency Preparation: Sharilynn Boelk	Phone: 3602363000	Date: 3/9/2023 5:02:59 pm
Agency Approval: Kristin Bettridge	Phone: 3607911657	Date: 3/9/2023 5:02:59 pm
OFM Review:	Phone:	Date:



Bill Number	Title	Agency
1134 E 2S HB	988 system	360 University of Washington

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at http://www.ofm.wa.gov/tax/default.asp .

X No Cash Receipts	Partially Indeterminate Cash Receipts					Indeterminate Cash Receipts						
Name of Tax or Fee	Acct Code											

Agency Preparation: Charlotte Shannon	Phone: 2066858868	Date: 3/9/2023 12:20:42 pm
Agency Approval: Charlotte Shannon	Phone: 2066858868	Date: 3/9/2023 12:20:42 pm
OFM Review:	Phone:	Date: