

## CYBHWG Workforce and Rates subgroup

Date: September 7, 2022

Leads: Representative Mari Leavitt, Hugh Ewart, Laurie Lippold

### Review and discuss items on Possible Priorities chart

#### Rate increase

- Preliminary recommendations are due to the CYBHWG on September 15, 2022.
- Final recommendations are due to the CYBHWG on October 11, 2022.
- Asking for a general rate increase for all providers, including CLIP and crisis stabilization.
- CLIP increase – providers are advocating for 15-20%.
- Do not have the workforce to sustain capacity, increase per bed per day rate to help retain staff and sustain admissions.
- Crisis services – regions vary on rates in addition to staff and services available so it is important to do some research to understand the regional or area needs with the variations of systems and services provided.  
*Possibly put crisis services on hold until more information is obtained. Would be great to map out who and what is included / regional needs / services offered / in the crisis services and collaborate with the strategic plan work.*
- Be thinking about what we can we do to move crisis services forward and what can wait until the next year.

#### Licensing / credentialing barriers

- Place holder for administrative and supervision barriers; bring more information to the next meeting.
- Utilize the findings in the Mental Health Counselors report to inform of issues and possible recommendations.
- Areas of concern:

*Going outside organizations for supervision.*

*Significant challenges with 5 Managed Care Organization's (MCOs) in every region, and 2 statewide. Every MCO requires different things, and contracts need to be renegotiated often, which is very time consuming. (Example WISE manual)*

*Can we limit the region to 3 MCO's or streamline interpretation of guidelines/laws/rules?*

*Small subgroup on other barriers. Bring back specifics. (Mary Stone-Smith and other flushing out issues raised in audit, and around MCO's) Put name and e-mail in the chat if interested.*

*Mary to gather information on administrative barriers and bring them back to the group for issues and possible recommendations.*

### Identify new items

#### State Compacts

- All compacts are licensing compacts, investigate the ability for providers across states to be licensed here.
- Important to understand the ramifications of compacts and how they may impact systems.
- At least 3 compacts currently in WA state.
- Compacts may be a good way to expand access and retain or recruit staff.

#### Loan forgiveness

##### Conditional grants -

- Continue the loan repayment program for master's level therapists.
- First co-hort will be coming into the workforce in 2 years.

Determine which items to advance to full WG and who will be the point person for these items

- Rate increase – Hugh Ewart
- Clip rate increase - Larissa
- Administrative barriers – Mary Stone-Smith
- Mental health counselors report – Sara Stewart
- Credentialing contracts – Sara Stewart
- Loan forgiveness – Suzanne Swadener

### CLIP update

- Wait list at current date is 32.
  - 8 that are 10+ younger / remainder are 11 yrs. and older.
- Waiting longest in March/ April with higher acuity youth.
- Current utilization and capacity for Pearl, tamarack and two rivers are 38 beds in utilization with 52 beds available.
- Current utilization and capacity for Child Study Treatment Center (CSTC) are 42 beds in utilization with 52 beds available.
- Unable to meet capacity due to staffing issues.
- The lack of staffing exasperates the kids waiting in ER or other places.
- Competitive – finding losing providers to better pay with less administrative burdens. Current situation leads to burnout.
- Current providers interested are getting licensed and running into challenges getting licensed.
- Rates, hiring, and retention is the biggest hurdle with a living wage for their floor staff.

### CARE for kids

Sara Walker, UW Co-Lab

See page 4 for slides

- Using a co-design model that focuses on health equity and being culturally responsive.
- The whole project model is proposed to go for 5 years.
- Currently in the partner engagement development phase.

### Next steps

- Laurie and Hugh will rework the categories; likely reaching out to folks who are involved with the various issues that we are considering and then identify areas we plan to continue to focus on.
- ALL – IF YOU HAVE ADDITIONAL ISSUES YOU WOULD LIKE TO HAVE CONSIDERED FOR ADVANCING TO THE FULL WG, PLEASE SEND THEM TO LAURIE AND HUGH!!!

## Attendees

Trina Ademofe

Vaughnetta J. Barton, University of Washington (UW)

Rachel Burke, Health Care Authority (HCA)

Dr. Phyliss Cavens, Child and Adolescent Clinic

James Chaney, Department of Health (DOH)

Thalia Cronin, Community Health Network of WA  
(CHNW)

Ted Dale, DOH

Hawa Elias, CHNW

Jess Emsley, CHNW

Gabe Everson, HCA

Hugh Ewart, Seattle Children's

Renee Fullerton, Workforce Board (WB)

Bob Hilt, Seattle Children's

Laura Hopkins, Health Career Fund

Marissa Ingalls, Coordinated Care

Avreayl Jacobson, King County Behavioral Health and  
Recovery

Todd Jensen, HCA

Barb Jones, Office of Insurance Commissioner (OIC)

Rep. Mari Leavitt, Washington State Legislator

Laurie Lippold, Committee for Our Children

Joan Miller, Washington Council for Behavioral Health

Cindy Myers, Children's Village in Yakima

Julia O'Connor, Washington Council for Behavioral Health

Steve Perry, HCA

Sarah Rafton, WCAAP

Sheryl Schwartz, HMC BHI

Rep. Tana Senn, Washington State Legislator

Sharon Shadwell, The Practice NW

Susan M Skillman, UW

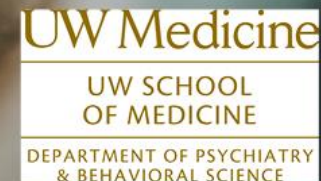
Sara Stewart, Washington Mental Health Counselor  
Association

Ashlen Strong, WSHA

Shannon Thompson, WMHCA

# Culturally Affirming & Responsive Mental Health (CARE) For Kids & Families

September 7, 2022



# Origins of CARE

**Spring/Summer 2021:** CoLab hosted three policy partner design meetings.

- **Goal:** To bring together a diverse group of policy and community partners to identify key priority areas for improving the Medicaid-funded children's behavioral health system.
- **Participants:** Better Health Together ACH; Healthier Here ACH; King County Public Health; Health Care Authority of WA; Molina Healthcare; Partners for our Children; Washington State Legislature; Community Health Plan of WA; Amerigroup; Behavioral Health Institute; University of California San Diego.
- **Outcome:** Culturally responsive, evidence-informed care was identified as the most urgent need for strengthening care for families in Washington.

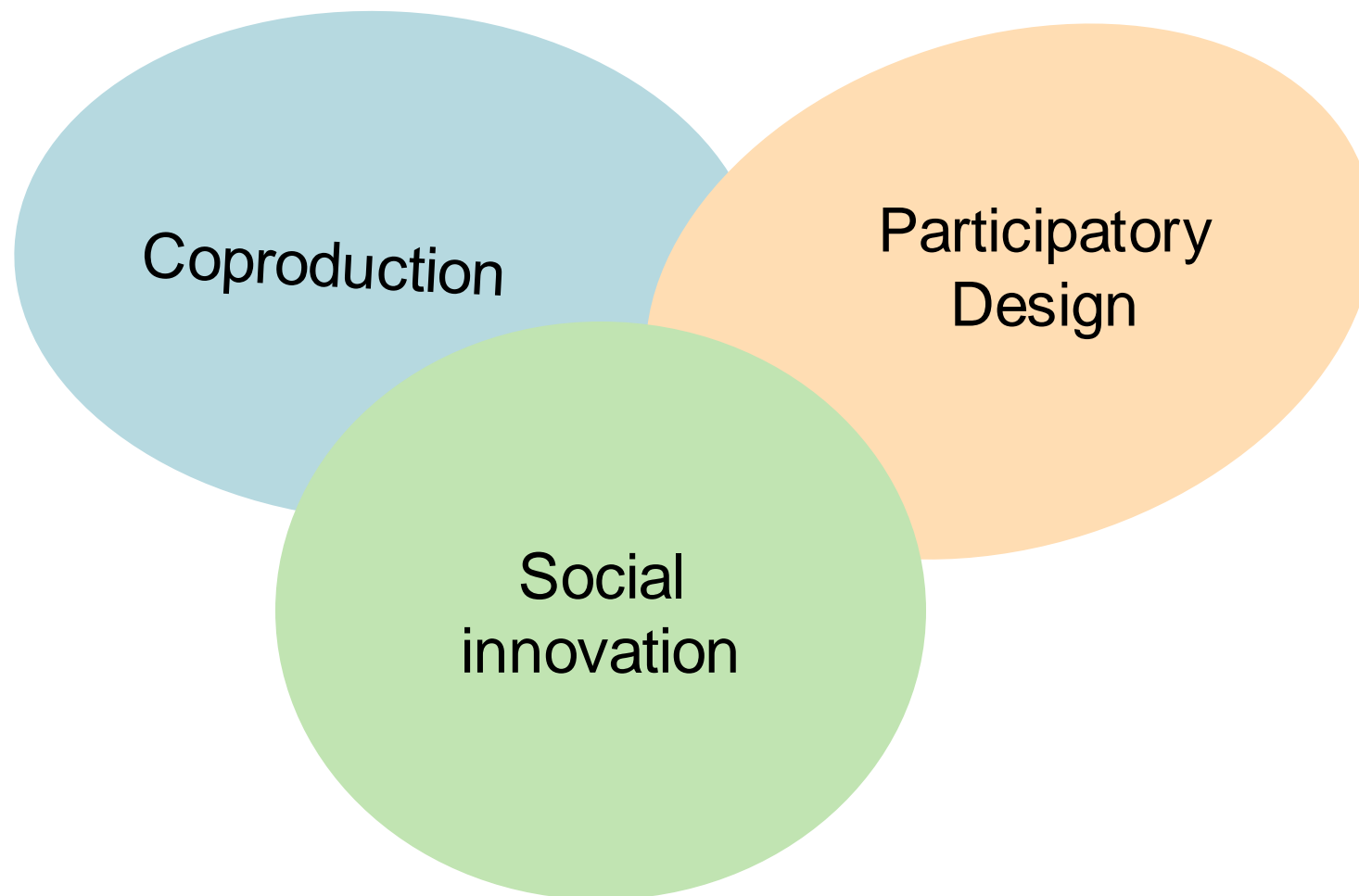
**Winter 2021:** Project proposal was submitted to the Washington State Legislature.

**Spring 2022:** CARE was funded under ESSB 5693 Section 603 (74) for one year of project planning and design.

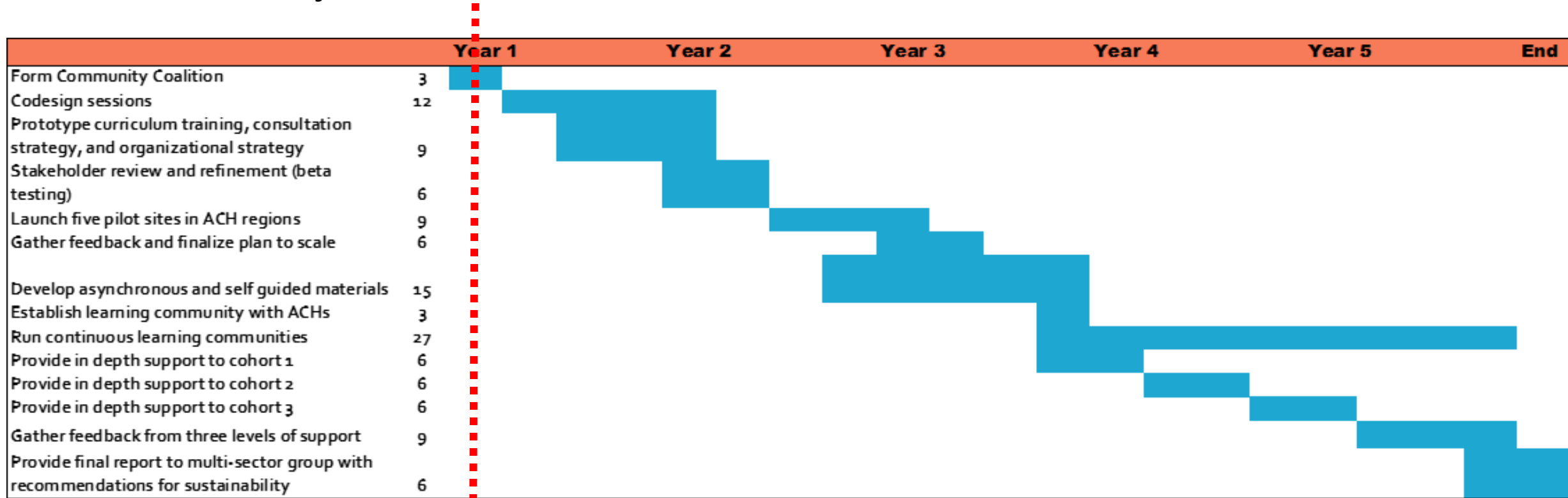
# Project Aims

1. Provide organizational support to public behavioral health agency leaders;
2. Develop a training strategy to increase culturally relevant and evidence-informed treatment;
3. Support an expansion of the workforce to include non-masters level providers with lived experience to deliver these treatments.

# Codesign



# Five Year Project Timeline



We are here



# Partners to date

	Codesign Team	Advisory Team	Implementation Team	Community Sounding Board	Project Amplifiers
#of People Involved	9	20	15+	54+	15+
Organizations Represented	<ul style="list-style-type: none"> <li>• <b>SPARK Youth-led Peer Counseling</b></li> <li>• Coalition Ending Gender-Based Violence</li> <li>• Public Health Seattle and King County</li> <li>• New Developed Nations</li> <li>• King County Department of Community and Human Services</li> <li>• Seattle Children's Hospital</li> <li>• University of Washington</li> </ul>	<ul style="list-style-type: none"> <li>• SPARK Youth-led Peer Counseling</li> <li>• AHSWAY</li> <li>• Deconstructing the Mental Health System</li> <li>• University of Washington</li> <li>• Seattle Children's Hospital</li> <li>• Molina</li> <li>• Community Health Plan of WA</li> <li>• Health Care Authority of WA</li> <li>• Partners for Our Children</li> <li>• NorthStar Advocates</li> <li>• Asian Counseling and Referral Services</li> <li>• Behavioral Health Institute</li> <li>• WA Dept. of</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Better Health Together ACH</b></li> <li>• <b>Healthier Here ACH</b></li> <li>• <b>Greater Columbia ACH</b></li> <li>• SPARK Youth-led Peer Counseling</li> <li>• University of California San Diego/LOCI</li> </ul>	<ul style="list-style-type: none"> <li>• DSHS WA</li> <li>• Beacon Health</li> <li>• Sound Pathways</li> <li>• Kitsap Public Health</li> <li>• Jefferson Healthcare</li> <li>• Pacific Islander Health Board</li> <li>• Health and Justice Recovery Alliance</li> <li>• Ryther</li> <li>• Institute for Family Development</li> <li>• Valley Cities</li> <li>• University of WA</li> <li>• Yakima Valley Farm Workers</li> <li>• International Community Health Services</li> <li>• ARC Spokane</li> <li>• Lake Washington School District</li> <li>• Therapy Fund Foundation</li> </ul>	<ul style="list-style-type: none"> <li>• Youthnet,</li> <li>• Deconstructing the Mental Health System</li> <li>• Washington State University,</li> <li>• Molina Healthcare,</li> <li>• Solid Ground,</li> <li>• Families of Color Seattle,</li> <li>• Jefferson Healthcare</li> <li>• Compass Health,</li> <li>• Health and Justice Recovery Alliance</li> <li>• Commission on Hispanic Affairs</li> <li>• Technology Access Foundation</li> <li>• Renton Technical College</li> </ul>

# Next Steps

- The project is seeking 2023/24 funding:
  - Prototyping the curriculum, organizational strategies, and supporting behavioral health providers
  - Piloting the culturally responsive intervention with 5 pilot sites located in Accountable Communities of Health regions
  - Refining and launching for scale

**Thank you so much!**  
**Learn more & join our email list:**  
**[uwcolab.org/CARE](http://uwcolab.org/CARE)**

