**Agency:** Health Care Authority

**Effective date of rule:**
- Permanent Rules
  - ☒ Other (specify) January 1, 2022 (If less than 31 days after filing, a specific finding under RCW 34.05.380(3) is required and should be stated below)

**Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?**
- ☐ Yes  ☒ No  If Yes, explain:

**Purpose:** Chapter 256, Laws of 2020, among other things, amended RCW 71.05.020(15)’s definition of “designated crisis responder” to include a mental health professional appointed by the Health Care Authority in consultation with a federally recognized Indian tribe or after meeting and conferring with an Indian health care provider. The Health Care Authority is adopting a new rule to govern this appointment process.

**Citation of rules affected by this order:**
- New: 182-125-0100
- Repealed:
- Amended:
- Suspended:

**Statutory authority for adoption:** RCW 41.05.021, 41.05.160

**Other authority:**

**PERMANENT RULE (Including Expedited Rule Making)**
- Adopted under notice filed as WSR 21-14-011 on June 24, 2021 (date).
- Describe any changes other than editing from proposed to adopted version: N/A

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

Name:
Address:
Phone:
Fax:
TTY:
Email:
Web site:
Other:
Note: If any category is left blank, it will be calculated as zero. No descriptive text.

Count by whole WAC sections only, from the WAC number through the history note. A section may be counted in more than one category.

The number of sections adopted in order to comply with:

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<th>Category</th>
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<td>Federal statute</td>
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<td>Federal rules or standards</td>
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The number of sections adopted at the request of a nongovernmental entity:

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The number of sections adopted on the agency’s own initiative:

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The number of sections adopted in order to clarify, streamline, or reform agency procedures:

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The number of sections adopted using:

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<td>Other alternative rule making</td>
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<tr>
<th>Date Adopted: October 8, 2021</th>
<th>Signature: Wendy Barcus</th>
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<tr>
<td>Name: Wendy Barcus</td>
<td>HCA Rules Coordinator</td>
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Chapter 182-125 WAC
TRIBAL-DESIGNATED CRISIS RESPONDER

NEW SECTION

WAC 182-125-0100 Tribal-designated crisis responder. (1) The Washington state health care authority (the authority) appoints a tribal-designated crisis responder upon request and after consultation with one or more federally recognized Indian tribes or after meeting and conferring with one or more Indian health care providers. This rule does not apply to matters heard in tribal court.

(2) This rule does not apply to counties' independent authority to appoint designated crisis responders in collaboration with tribes under RCW 71.05.020(15). This rule does not eliminate the responsibility of the agency providing crisis services to serve American Indian/Alaska Native individuals.

(3) A tribal-designated crisis responder must meet the qualifications under RCW 71.05.760.

(4) A tribe or Indian health care provider located in Washington state may request that the authority appoint a qualified person as a tribal-designated crisis responder by submitting a letter of recommendation that includes the following:

(a) The person's name and contact information.

(b) An explanation of how the person meets the qualifications under RCW 71.05.760, including dates on which the person completed or will complete required designated crisis responder training.

(c) A copy of the policy and procedures for the designated crisis responder services. The policy and procedures must describe the tribe's or Indian health care provider's plan for training, back-up, information sharing, and communication for designated crisis responders who respond to private homes or nonpublic settings.

(d) A copy of the tribe's or Indian health care provider's behavioral health agency license and certification or attestation to provide emergency involuntary detention services under WAC 246-341-0810, including documentation of any applicable exemptions under WAC 246-341-0302.

(5) Upon appointment, the authority:

(a) Issues a certification and tribal-designated crisis responder card to the requesting tribe or Indian health care provider.

(b) Notifies all behavioral health administrative services organizations, tribal courts, and superior courts.

(6) Within twenty-four hours of responding to an event or as soon as feasible, tribal-designated crisis responders serving as officers of a superior court must submit involuntary treatment information to the Washington Indian behavioral health hub, a statewide resource supported by the authority and the department of health for the purpose of assisting American Indian and Alaska Native individuals and their providers to refer individuals to voluntary and involuntary crisis services, including evaluation and treatment facilities and withdrawal management and stabilization facilities.

(7) The Washington Indian behavioral health hub must submit all tribal-designated crisis responder data related to tribal-designated crisis responders' service as officers of a superior court to the au-
authority within twenty-four hours of receiving the data or as soon as feasible.

(8) Tribal-designated crisis responders must comply with reporting requirements pertaining to no bed available reports under RCW 71.05.750. A tribal-designated crisis responder may submit a request for a single bed certification under RCW 71.05.745.

(9) Tribal-designated crisis responders designated by the authority may operate anywhere in Washington state and provide services to any person in Washington state.

(10) The local designated crisis responder office for any region in which a tribal-designated crisis responder provides services is expected to provide technical assistance if requested.