Notes

Children and Youth Behavioral Health Work Group – Workforce & Rates (W&R) Subgroup

October 9, 2025

Glossary of Terms

W&R: Workforce & Rates Subgroup
BHC: Behavioral Health Catalyst
BHA: Behavioral Health Agency
DOH: Department of Health
ERDC: (Washington State) Education Research and Data Center
FTE: Full Time Employee
HCA: Health Care Authority
IDD: Intellectual and Developmental Disabilities
LMHC: Licensed Mental Health Counselor
LMS: Learning Management System
PAL: Partnership Access Line
UW: University of Washington
SoS: Statement of Support
WAC: Washington Administrative Code
WISe: Wraparound with Intensive Services

Meeting Topics

Welcome & Agenda
Updates
Statements of Support Working Session
Next Steps & Close

Discussion Summary

Updates

Renee Fullerton and Hugh Ewart (Workforce and Rates Subgroup Leads) shared updates on Legislative Recommendations that were submitted to the Children and Youth Behavioral Health Work Group for consideration in the Annual Report.

1. Department of Health Credentialing Delays Recommendation
    a. The co-leads presented a recommendation addressing credentialing delays at the Department of Health (DOH).
        i. Background: Credentialing timeline delays at DOH impact the ability to bring new workers into the behavioral health workforce. This issue affects processing times through both DOH and MCOs.
        ii. Proposed Solution: A pause during the 2026 legislative session on passage of any new laws that would create additional work requirements for DOH staff. This would:

iii. Avoid adding new workload to staff during a hiring freeze
iv. Support the final implementation phase of the HELMS Project (electronic licensure system) scheduled to complete in June 2026

b. This recommendation would apply to all credentialed health care professions, not just behavioral health
c. Stakeholder Engagement: The recommendation was developed with input from DOH leadership, the Board of Nursing, and the Medical Commission. DOH leadership expressed support for the proposal.
d. Implementation Strategy: Discussion centered on operationalizing the recommendation through:
    i. Conversations with legislative committee chairs
    ii. Engagement with the Governor's office (which has expressed support)
    iii. An information campaign to educate legislators about the rationale
    iv. Exceptions: The recommendation includes provisions allowing legislative action if it would ease burden on customers or DOH, or if implementation could be delayed.
e. Subgroup Consensus: The group endorsed moving this recommendation forward to the full Children and Youth Behavioral Health Work Group.

2. Ballmer Behavioral Health Scholarship Program Update
    a. An update was provided on the scholarship program recommendation:
        i. Funding Increase: The request was revised to include an additional $215,000 for administrative costs, bringing the total from $650,000 to $865,000.
    b. Administrative Structure: Washington Student Achievement Council (WSAC) will administer conditional scholarships starting in 2026. The UW School of Social Work will continue its role in the broader Workforce Development Initiative (WDI) and longitudinal study.
        i. Application Process: Applications for 2026 scholarships will open in December 2025 through participating higher education institutions.
3. The group reviewed recommendations from other subgroups:
    a. BHC Health Integration Subgroup:
        i. Commercial insurance coverage for pediatric community health workers
        ii. Restoration of Partnership Access Line (PAL) funding
    b. School-Based Behavioral Health and Suicide Prevention:
        i. Strengthening statewide guidance on school behavioral health
        ii. Establishment of technical assistance and training network
        iii. Maintaining state investment in school behavioral health
    c. Youth and Young Adult Continuum of Care:
        i. Protecting bridge residential housing programs for youth transitioning from inpatient treatment
        ii. WISe training for providers to be equipped to care for youth with ASD/IDD
        iii. Convening an advisory group to improve Family Initiated Treatment (FIT) Act implementation
    d. CYBHWG leadership and members request that a late recommendation be added to the mix for consideration for Certified Community Behavioral Health Clinics (CCBHC):
        i. To protect and preserve CCBHCs, paired with a Health Care Authority decision package, and coordination structures

Statements of Support Working Session

1. The group discussed the process for submitting statements of support:
    a. Alignment: Statements should align with the Washington Thriving strategic plan and focus on items that protect and preserve existing services.
    b. Fiscal Environment: Recommendations should acknowledge the current budget constraints.
    c. Submission Process: This form is being provided for submitting proposed SoS, including name, email, subgroup affiliation, statement text, and supporting explanation.
    d. Timeline: Soft deadline of October 20, 2025 (close of business) for W&R member submissions to allow review before the October 22 subgroup meeting. Final SoS need to be sent to CYBHWG for consideration on November 3rd.
    e. Consensus: At the full work group level, consensus will be required (approximately 90% agreement), though subgroups are not strictly limited to this threshold.
2. Participants were encouraged to:
    a. Consider organizational priorities for statements of support
    b. Reach out to professional associations and coalitions regarding workforce and rates items
    c. Be aware of the DOH credentialing pause recommendation when considering other policy proposals
    d. Submit any proposed Statements of Support through this form.

Next steps

1. W&R will be reviewing possible Statements of Support at the next meeting.
2. The subgroup will next be meeting on Thursday, October 22nd from 10:00am-12:00pm. *If you are not already on the W&R mailing list and would like to be added, you can email cybhwg@hca.wa.gov indicating your preference.*