

# Family Initiated Treatment

## Overview

There are multiple pathways to access behavioral health services for children (ages 0-12) and youth (adolescents, ages 13 – 17) in Washington State. System of care in Washington is guided by 3 core values that include: A family driven, and youth directed framework. Emphasis on importance of community-based services, and delivery of services with cultural and linguistic humility to address issues of diversity and disparity. Within this framework youth always have the right to receive services in the least restrictive setting for their need. There may be times when the youth is not able to provide their consent to participate in behavioral health treatment voluntarily and Family Initiated Treatment (FIT) provides an additional access point for youth behavioral health treatment (mental health and substance use disorder treatment), FIT provides additional access point to behavioral health treatment.

## Family Initiated Treatment

A parent or guardian may bring their youth, to a participating outpatient behavioral health provider, evaluation and treatment (E&T) facility, inpatient facility (licensed under RCW 70.41, 70.12, or 72.23), a secure withdrawal management facility, or approved substance use disorder (SUD) treatment program and request an evaluation to determine if the youth need mental health (MH) and/or SUD treatment. The youth's consent is not required. The health care authority (HCA) developed 3 FIT training modules for youth, parents/guardians, providers, and the community at large. Modules 1 and 2 provide background information and address what is in the law, while module 3 is focused on best practices for treatment engagement.

## Outpatient Family Initiated Treatment

The parents may bring or authorize the bringing of their youth to an outpatient behavioral health provider and request that an appropriately trained professional complete an evaluation and determine if the youth meet medical necessity for outpatient treatment. If after the evaluation the professional person agrees the youth could benefit from outpatient treatment the parent or guardian may provide consent for up to 12 outpatient visits within a 3-month period, without the youth's consent. Following

the 3-month treatment period, the youth must provide their consent for further treatment with that professional person. A professional person providing solely MH treatment to the youth shall provide notification of the treatment to an independent reviewer at HCA within twenty-four hours of the first receipt of treatment and again at least every forty-five days. HCA shall conduct a review to determine if the current level of treatment is medically necessary.

A professional person providing solely SUD treatment or co-occurring SUD and MH treatment shall convene a treatment review and provide the notification of the youth's receipt of treatment to an independent reviewer at HCA only if the youth provide written consent to the disclosure of SUD treatment information.

## Inpatient Family Initiated Treatment


When a parent or guardian is seeking inpatient care for their youth, they may seek an evaluation at

- E&T facility
- Hospital emergency department
- Approved SUD treatment program
- Withdrawal management program, or
- Inpatient facility

This evaluation must be completed within 24 hours from the time the youth is brought to the facility, unless the professional person determines that the conditions necessitate additional time for evaluation. A youth should never be held longer than seventy-two hours for an evaluation. The facility shall limit treatment to that which the professional person determines is medically necessary to stabilize the youth until the evaluation has been completed. The professional person shall notify the youth of her or his right to petition superior court for release from the facility. No youth receiving inpatient FIT may be discharged from the program based solely on her or his request.

In the event the youth is held for treatment, the facility is required to submit a review of admission and determination of medical necessity to HCA. The review is completed between seven and 14 days following the date the youth is admitted. HCA is directed to periodically review determinations and re-determine the medical necessity of treatment for purposes of payment with public funds.





No provider is obligated to provide treatment to a youth under FIT, however no provider may refuse to treat a youth solely on the basis that the youth has not consented to the treatment. No provider may admit a youth to treatment unless it is medically necessary. Youth admitted to inpatient facilities utilizing FIT procedures must be released from the facility immediately upon the written request of the parent or guardian.

### **Eligibility requirements**

Youth 13-17 years of age

### **Authority**

RCW 71.34, RCW 71.34.600

### **Partners**

Youth, parent, or guardian; managed care organizations (MCOs), behavioral health administrative services organizations (BH-ASOs), mental health and SUD treatment providers, hospitals, school-based professionals, the Department of Children, Youth and Families (DCYF).

### **Oversight**

Per RCW 71.34.610, the Children long term inpatient (CLIP) Administration Office is HCA's identified state-contracted agency to provide reviews of medical necessity determinations of youth admitted to inpatient treatment under FIT under 71.34.600.

### **For more information**

Enos A. Mbajah/School age child, youth, and family behavioral health integrated services supervisor  
[enos.mbahaj@hca.wa.gov](mailto:enos.mbahaj@hca.wa.gov) , Telephone: 360-764-0097

### **For more information**

[Family initiated treatment \(FIT\) | Washington State Health Care Authority](#)  
[Home - FIT Washington](#) (training modules)