

Bill #	Bill ID	Section	Title	Division	Summary of work
1	1358	E2SHB 1358	Community Assisted Referral Programs	CQCT, MPOI (if carved into MC)	<p><b>Adopt standards for reimbursement of health care services provided to eligible clients by fire departments</b></p> <p><b>-Collaborate with JLARC</b> to conduct cost-effectiveness review by December 1, 2021</p> <p>-(Not mandated) Establish workgroup to determine scope of health care services appropriate for a fire department setting and the new reimbursable provider types (e.g. firefighter, paramedic, and emergency medical technician) <i>[Not mandated]</i></p>
2	2779	E2SHB 2779	Children mental health services	MPOI	<p><b>Improve access to mental health services for children and their families.</b></p> <p>-Serve on the <b>Children's Mental Health work group</b>, which will reconvene through December 2020</p> <p>-Governor-appointed HCA representative will convene the first meeting</p> <p>-Provide staff support to the work group</p> <p>-Updated report from the work group and any subcommittees is due December 1, 2020</p> <p>- DSHS must convene an advisory group of stakeholders to review the parent-initiated treatment process and report recommendations to the Legislature by December 30, 2018</p>
3	5683	SSB 5683	Pacific Islander health care	MECS, FSD, DLS, ETS, P1OS	<p><b>Develop, implement and operate a premium assistance program for eligible citizens of the Compact of Free Association Islands (COFA). The program will allow COFA residents to apply for a silver plan through HealthPlanFinder and be sponsored by HCA to cover premiums and cost-sharing.</b></p> <p><b>-Appoint a program advisory committee</b> that includes insurers and COFA citizens</p> <p>-Report to the Governor and Legislature on implementation by December 31, 2019</p> <p>-Develop and implement staff and stakeholder training to educate about this program.</p> <p>-Conduct extensive outreach to engage stakeholders and members of the population to enroll during the shortened open enrollment period.</p>
4	5835	SSB 5835	Health Outcomes / Pregnancy	CQCT, MPOI	<p><b>Develop and measure adherence to guidelines for contracted hospitals (inclusive of all clinical scenarios)</b></p> <p>-Report on this adherence in the biennial children's' health measures report (ESHB 2128 C 463 L 2009) due September 15, 2018.</p> <p><b>-Participate on Health Pregnancy Advisory Committee (DOH)</b> to develop strategy (1 FTE to attend meetings and review materials)</p>
5	6032	ESSB 6032	213(1)(ggg) Best practices for mental health	CQCT, DBHR	<p><b>Create a work group at the Robert Bree collaborative to identify best practices for mental health services regarding patient mental health treatment and management</b></p>

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6	6032	ESSB 6032	213(1)(oo)	Oral Health Connections pilot project	CQCT, MPOI* (work w/ MCOs)	<p><b><u>Partner with Washington Dental Service Foundation (WDSF)</u> to develop and implement three-year pilot (Oral Health Connections) in Spokane, Thurston, and Cowlitz counties to test the effect that enhanced dental benefits (increased number of periodontal treatments) for adult Medicaid clients with diabetes and pregnant women have on access to dental care, health outcomes and medical care costs.</b></p> <p>Work includes:</p> <ul style="list-style-type: none"> <li>-Rate increase; identify pilot project client population numbers; estimate average dollars amount spent per client</li> <li>-Establish contract with WDSF to provide wraparound services (outreach and support to medical and dental providers, care coordinators, accountable communities of health, managed care organizations, and eligible Medicaid enrollees),</li> <li>-Stakeholder tribes and migrant health centers (potential increase of services)</li> <li>-Submit joint progress reports to the Legislature by December 1, 2018.</li> </ul>
7	6032	ESSB 6032	213(1)(bbb)	Washington autism alliance and advocacy (WAAA)	CQCT, MPOI, ERB	<p><b>Enter into <u>interagency agreement with the department (DSHS?)</u> to contract with WAAA to educate and assist persons seeking HCA services; refer to WAAA for support navigating the health care system</b></p> <p>-Submit a report, in <u>collaboration with WAAA and the department</u>, to the Governor and appropriate Legislative committees by December 15, 2018 and December 15, 2019 detailing:</p>
8	6032	ESSB 6032	213(5)(uu)	Opioid response	DBHR	<p><b>Implement strategies to improve access to prevention &amp; treatment of opioid use disorders.</b></p> <ul style="list-style-type: none"> <li>• <b><u>Coordinate these activities with DOH</u></b> to prevent duplication of efforts</li> <li>• Work to identify additional federal resources to maintain and expand these efforts</li> <li>• Report to OFM and appropriate Legislative committees on the status of these efforts by December 1, 2018</li> </ul> <p>o Include identification of increase in behavioral health federal block grants or other federal funding awards received by HCA and plan for use of funds</p>
9	6032	ESSB 6032	213(5)(ww)	UW evidence-based practice institute	DBHR	<p><b><u>Work with UW evidence-based practice institute</u> to develop a plan to seek private, federal or other grant funding to reduce need for state general funds</b></p> <ul style="list-style-type: none"> <li>• Collect information from the institute on use of these funds and report to OFM and appropriate Legislative committees by December 1st of each year of the biennium</li> </ul> <p><i>See also Section 204(3)</i></p>
10	6032	ESSB 6032	213(5)(o)	E&T facility for AI/AN population	DBHR, EXO	<p><b><u>Collaborate with tribal governments</u> and develop a plan for establishing an evaluation &amp; treatment facility specializing in caring for the AI/AN population</b></p> <ul style="list-style-type: none"> <li>• Plan must include options for maximizing federal participation, ensure that utilization will be based on medical necessity, and identify a specific geographic location for the facility</li> </ul> <p><i>See also Section 204 (1)(o)</i></p>

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11	6032	ESSB 6032	213(1)(mmm)	Governor's Indian health council	EXO (Tribal)	<p><b>Convene and provide administrative support to the Governor's Indian health council, including procuring technical assistance from the American Indian health commission for WA to:</b></p> <ul style="list-style-type: none"> <li>o Address current/proposed policies or actions with tribal implications unable to be resolved at the agency level;</li> <li>o Facilitate training for state agency leadership, staff and legislators on Indian health system and tribal sovereignty; and</li> <li>o Provide oversight of contracting and service coordination organizations or service contracting entities to address impacts on services to AI/AN and relationships with Indian health care providers.</li> </ul> <ul style="list-style-type: none"> <li>• Host one meeting of the council per year</li> <li>• Assist the council with a report to the Governor and appropriate Legislative committees by December 1, 2018 on recommendations to raise the health status of AI/ANs throughout WA state to the goals set forth in Healthy People 2020.</li> </ul>
12	6032	ESSB 6032	213(1)(aaa) 204 (1)(v) 217(2) 219(30) 220(d)	Single platform provider credentialing system	P1OS, ETS, ERB	<p><b>In collaboration with other agencies, implement single platform provider credentialing system.</b></p> <p><b>-In collaboration with DOH, DOC, DSHS, PEBB, and L&amp;I,</b> assess feasibility and potential cost savings from implementing, operating, and maintaining a single provider credentialing system subject to the conditions, limitations, and review provided in SSB 5883, Section 724.*</p> <p>-Submit report to OFM, Governor's policy staff and Legislature outlining feasibility, projected cost savings, and cost avoidance by December 1, 2018.</p>
13	6032	ESSB 6032	101(2) 102	Rural health care system	PD	<p><b>Collaborate with the joint select committee on health care oversight and DOH to develop a plan to restructure and strengthen rural health care system/leverage findings from Washington rural health access preservation pilot</b></p>
14	6032	ESSB 6032	213(1)(ccc) 206(29) 219(35)	Alzheimer's disease and other dementias state plan	CQCT	<p><b>Partner with DSHS, DOH to assist a public-private entity with implementation of State Plan recommendations to address Alzheimer's disease and other dementias.</b></p>
15	6032	ESSB 6032	213(1)(eee)	Enhancement of Primary Care Access for Medical Assistance	MSA	<p><b>Study to identify strategies in collaboration with other stakeholders and report recommendations.</b></p> <p>Work group not required. [Not mandated]</p>

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16	6095	ESSB 6095	1007 1022 Capital budget 2017-2019 Behavioral Health Community Capacity	DBHR	<p><b><u>DOH and Dept of Commerce</u> to establish a concurrent and expedited process to assist community hospitals or other community entities in applying for grants to expand and establish new community behavioral health capacity. OFM to establish a statewide plan to inform future grant allocations by assessing and prioritizing behavioral health facility needs and gaps.</b></p> <p><b><u>-Coordinate with Commerce, DSHS and DOH</u> to select community hospitals or E&amp;T providers for grant funds to develop capacity for beds to serve long-term civil commitments (as an alternative to state hospitals)</b></p> <p><b><u>-Collaborate with Commerce, DSHS</u> to issue grants to community hospitals/entities to develop community behavioral health capacity, with particular consideration for programs that incorporate outreach and treatment for youth dealing with mental health or social isolation issues</b></p> <p><b><u>-Collaborate with Commerce, DOH, and DSHS</u> to establish a concurrent and expedited process to assist grant applicants in meeting regulatory requirements necessary to operate certain mental health and Substance Use Disorder (SUD) facilities</b></p> <p><b><u>-Collaborate with OFM, Commerce, DSHS, DOH and BHOs</u> to establish a statewide behavioral health plan by December 15, 2018 to inform future grant allocations by assessing &amp; prioritizing facility needs and gaps in the BH continuum of care. OFM report due to leg by December 31, 2018.</b></p> <p><b><u>-Collaborate with Commerce and DSHS</u> to review grant project applications for behavioral health services and capacity for children and minor youth</b></p>
17	6452	SSB 6452	Child mental health consult	CQCT (lead), MPOI, DLS, FSD, ETS, P1OS	<p><b>Identify an alternative funding model for the current partnership access line (PAL), and expand services to include (1) consultation to providers treating depression in pregnant women and new moms; and (2) referral to children’s mental health services and other resources.</b></p> <p><b><u>-Convene a workgroup including UW, Seattle Children’s Hospital, Medicaid managed care organizations</u>, organizations connecting insurance carriers as defined in RCW 48.44.010 and the office of the insurance commissioner</b></p> <p><b><u>-Partner with the OIC</u> to a) consider a mechanism to determine annual cost of operating the PAL and to collect a proportional share of the program cost from each health insurance carrier; and b) differentiate between PAL activities eligible for Medicaid funding from other non-medicaid eligible activities</b></p> <p><b>-Recommend a plan to the Legislature and Children’s Mental Health Workgroup by December 1, 2018</b></p> <p><b><u>-Collaborate with UW</u> to implement a two-year pilot program by January 1, 2019 called the partnership access line for moms and kids to support providers treating pregnant and parenting women for depression and to facilitate referrals and follow-up to children’s mental health services and other resources for parents</b></p> <p><b><u>-Collaborate with UW</u> to report to the Governor and appropriate Legislative committees on pilot findings and recommendations beginning December 30, 2019, and annually thereafter</b></p> <p><b>-Enforce requirements in managed care contracts to ensure care coordination and network adequacy issues are addressed in order to remove barriers to access to mental health services identified in the pilot program report</b></p>