

CRIS Updates (February 8, 2023)

HB1477 Committee Updates

Our next CRIS Committee meeting is on February 15, 2023, 3-6pm. This meeting will focus on CRIS discussion of current crisis system gaps to inform identification of future system needs. In addition, we are working to revise the 2023 calendar for CRIS and Steering Committee meetings and expect to have these dates in the next week. We are also convening subcommittees to inform system recommendations, including the following upcoming meetings in February:

- Lived Experience Subcommittee – February 13, 2023
- Tribal 988 Subcommittee – February 15, 2023
- Rural and Agricultural Communities Subcommittee – February 22, 2023
- Technology Subcommittee – February 23, 2023
- 2023 CRIS and Steering Calendar – forthcoming

State Agency Updates

Washington Behavioral Health System 101

At the December CRIS meeting, members identified the need for a more foundational understanding of Washington's current behavioral health crisis system. HCA recently developed a Behavioral Health System 101 for the 2022 Legislative Symposium in December. The portion of the symposium addressing the behavioral health system begins at minute 53 and can be accessed through the following link: <https://www.youtube.com/watch?v=Mh28M9HE62U>. We are providing this resource as a high-level overview of HCA behavioral health programs, including but not limited to crisis services.

988 Implementation

Since the 988 launch in July 2022, call volumes have remained steady, ranging from 4900 to 5400 calls per month statewide. Native and Strong Lifeline implementation continues to be successful, with approximately 232 calls received in December and volume continuing to increase in January. The overall call answer rate in Washington meets the national performance benchmark. DOH has also recently established a user group with Washington's three NSPL call centers, which meets regularly and will focus on a range of topics to support crisis call response.

DOH Hub Rulemaking

The Department of Health paused the Crisis Call Center Hub rulemaking process at the end of 2022 to allow time for tribal engagement before initiating the public rulemaking process. DOH is currently developing a tribal engagement plan and will release an updated timeline for the development of Call Center Hub rules. DOH will share updates with the CRIS and Subcommittees about listening sessions and workshop opportunities to participate in DOH's public rulemaking process.

Crisis System Technology Platform – Draft Request for Information (RFI)

As outlined in the [HB1477 Final Technical and Operational Plan](#), HCA and DOH are currently working to develop a Request for Information (RFI) to seek information regarding potential vendor capacities to meet Washington crisis system technology functional requirements. Information gathered through the RFI process will be used to inform the development of a future Request for Proposals (RFP) to secure competitive contracts with vendor(s). Washington's work to develop the RFI is also parallel to ongoing tracking of the pending release of the national Vibrant Unified Platform and the functionalities it can support in Washington. HCA and DOH are also working to engage business process mapping discussions with NSPLs to identify needs for the future-state call center platform.

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The RFI is being reviewed currently by state agencies, tribal partners, as well as system stakeholders including Washington's three Lifeline call centers, regional crisis lines, Behavioral Health Administrative Service Organizations, mobile crisis response staff, and others. The HB 1477 Technology Subcommittee will review and provide input into the RFI at their next meeting on February 23, 2023. HCA and DOH anticipate releasing the RFI on March 9, 2023.

Crisis Response Best Practice Guidelines

As directed by HB1477, HCA is working to develop crisis system best practice guidelines to be released by July 1, 2023. The guidelines will include program specific guidelines (with a focus on call centers and mobile crisis response), protocols to support crisis response cross system coordination, and guidelines specific to high-risk populations based on factors such as race, ethnicity, gender, sexual orientation, geography, and socioeconomic status. To inform development of the guidelines, HCA is engaging key system stakeholders including call centers, mobile crisis teams, youth mobile crisis, 911, first responders, local jurisdictions, and others. In addition, HCA is engaging with tribal partners, including development of a tribal MCR model incorporating best practice to be adopted across the state. HCA anticipates that the guidelines released in July will be a starting point for further development and expansion of topics and resources over time. CRIS Committee discussions in 2022 are informing the development of the guidelines currently, and further opportunities for CRIS Committee input into the guidelines are planned later this Spring.

System of Care Grants to expand MRSS Teams

HCA continues to participate in a national collaborative to support implementation of Mobile Response & Stabilization Services (MRSS), a national best practice model for serving youth in crisis, in two new regions in Washington, Pierce and Spokane. The collaborative supports coaching calls and technical assistance with national leaders, other states, and Washington system partners including the Department of Children Youth and Families (DCYF), Juvenile Justice, BH-ASOs, and peer partners to guide successful implementation of MRSS. The work is supported by a federal Substance Abuse and Mental Health Administration (SAMHA) grant. Prior to the grant award, only two regions (Thurston-Mason and King) provided the MRSS model in Washington.

Commercial Coverage of Emergency Crisis Services and Next Day Appointments

The Office of Insurance Commissioner (OIC) and HCA have been working a HB1688 Workgroup to develop recommendations to implement the new legislative requirements for commercial insurance coverage of emergency crisis services and coordination of next day appointments. The current recommendation is for commercial plans to contract with BH-ASOs as a network of providers to ensure access to emergency crisis services and next day appointments delivered to privately insured individuals. OIC has let the insurance companies know that by January 2024, they must have contracts in place with BH-ASOs or enough behavioral health crisis providers to meet the needs of those enrolled in their health plans. As of January 1, 2023, regardless of contracts with providers, private plans are required to pay for emergency crisis services.