



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

May 15, 2024

Glossary of Terms

ACH: Accountable Communities of Health

BHA: Behavioral Health Agency

CCBHC: Certified Community Behavioral Health Clinic

CMS: Centers for Medicare and Medicaid Expenses

DOH: Washington State Department of Health

HCA: Washington State Health Care Authority

IECMH: Infant and Early Childhood Mental Health

IEP: Individualized Education Plan

IFSP: Individualized Family Service Plan

OSPI: Office of Superintendent of Public Instruction

PACT: Program for Assertive Community Treatment

SAMHSA: Substance Abuse and Mental Health Services Administration

SBBHSP: School Based Behavioral Health and Suicide Prevention

SWACH: Southwest Washington Accountable Community of Health

WSAC: Washington Student Achievement Council

Meeting Topics

School-based BH services charter and provider reimbursement

Updates on SBBHSP workforce and rates priorities

[House Bill 1504 \(2021\) pilot implementation updates](#)

Stipend program

Payment types for different professional groups – postponed to another meeting

Discussion Summary

School-based BH services charter and provider reimbursement

Todd Sletvett, HCA

Medicaid and School Based Services Presentation

1. Existing Medicaid Programs for Schools
 - a. School-Based Healthcare Services: For children with Individualized Education Plans (IEPs) or Individualized Family Service Plans (IFSPs), reimbursing services like occupational therapy, physical therapy, speech therapy, nursing, and mental health counseling.
 - b. Medicaid Administration Claiming: Allows partial reimbursement for administrative activities supporting Medicaid goals through a cost allocation plan and random moment time studies.
 - c. Managed Care: Enables schools to contract with managed care agencies for covered services provided by qualified licensed staff.
2. Recent Developments and Resources



- a. In 2022, HCA released the Medicaid School-Based Behavioral Health Services and Billing Toolkit, providing comprehensive guidance for schools on Medicaid options.
- b. In 2023, new Centers for Medicare and Medicaid (CMS) expenses guidance was released, offering states additional opportunities to enhance school-based services and reduce administrative burdens.
3. Cross-Agency Workgroup and New CMS Guidance
 - a. HCA formed a cross-agency school-based Medicaid work group to ensure compliance with new CMS guidance.
 - b. A survey was disseminated to collect feedback from schools and stakeholders on Medicaid reimbursement and operational challenges.
 - c. The primary focus is to support school districts in obtaining more Medicaid reimbursement.
4. CMS Grant Opportunity
 - a. CMS announced a new grant opportunity in January 2024, offering up to \$2.5 million over three years to up to 20 states.
 - i. The goal is to improve school-based services and address the behavioral health crisis in schools.
 - b. If awarded, the grant will fund expanded collaboration and support for schools, including hiring dedicated staff to strengthen cross-agency coordination.
5. Stakeholder Engagement and Recommendations
 - a. HCA intends to gather extensive stakeholder feedback before making any permanent decisions regarding new methodologies like cost reimbursement.
 - i. Schools' participation in these new opportunities will be optional.
 - b. Initial recommendations from the survey will be developed by June 30, 2024, followed by further stakeholder engagement to finalize recommendations.
6. Potential New Opportunities
 - a. CMS now allows states to license school staff such as counselors and psychiatrists to bill Medicaid, potentially increasing billable activities.
 - b. Cost reimbursement, like the existing Medicaid administrative claiming program, could greatly increase Medicaid funding for schools, as seen in other states like Michigan.
7. Discussion and Questions
 - a. Concerns about the impact on the workforce, specifically documentation requirements and family involvement?
 - i. Intent to maintain documentation standards and stakeholder engagement.
 - b. What is the timeline for recommendations?
 - i. Initial recommendations are due by the end of June 2024, with further stakeholder engagement planned for the first year of the expected grant.

Updates on SBBHSP workforce and rates priorities

Christian Stark, Office of Superintendent of Public Instruction (OSPI), School Based Behavioral Health and Suicide Prevention (SBBHSP) co-lead

1. School-Based Behavioral Health Focus: priority on school-based behavioral health workforce issues.



2. Workshops: Planning a series of workshops to address workforce and rate issues, aiming to provide a detailed understanding and actionable recommendations by the end of June.
3. Meeting Schedule: The subgroup meets this afternoon, with another meeting scheduled for June 26. Three workshops are planned between these meetings.
4. Objectives: To define the scope of behavioral health supports across different tiers, identify workforce shortages, and develop strategies to address these issues.
 - Call for Participation: Invited interested parties to join the workshops to contribute to the discussions and help shape the recommendations.
 - Highlighted the shift to obtaining early input from subcommittees to ensure coordinated efforts.

HB 1504 (2021) pilot implementation updates

1. John Schapman, Thriving Together North Central Washington
 - a. Pilot Success: Described the success of a pilot program funded by HB 1504 (2023), emphasizing the flexibility in funding and its positive impact on workforce development.
 - b. Examples of Success: internship programs and hiring interns as full-time employees, particularly in rural areas.
2. Sharon Brown, Greater Health Now
 - a. Impactful Funding: Shared positive feedback from providers who benefitted from the funding, highlighting the importance of local training and hiring.
 - b. Sustainability: Stressed the need for ongoing, sustainable funding beyond the pilot phase to maintain and expand workforce initiatives.
3. Nichole Peppers, Southwest Washington Accountable Community of Health (SWACH)
 - a. Community Feedback: Recommendations from community partners included the need for longer-term projects, broader recipient eligibility, and expanded services to non-Medicaid populations.
4. Longevity and Sustainability: It is important to sustain programs beyond initial funding to ensure long-term benefits, especially in rural areas.
 - a. Ongoing efforts to establish a teaching clinic designation as a sustainable, reimbursable service.
5. Internship Program Details: Addressed questions about the screening and credentials of interns, supervision support, and the impact on local workforce development.
6. Plan for further discussions on the teaching clinic initiative and follow-up on the impact of the HB 1504 (2023) pilot program.

Stipend Program

Brandon Williams, Department of Health (DOH)

1. Overview of the Stipend Program:
 - a. [HB 1724 \(2023\)](#): Established a stipend program to reduce barriers in the behavioral health workforce.



- b. **HB 2247 (2024)**: Amended the stipend program, shifting from paying associates to capping what supervisors can charge (\$1,600/year) and reimbursing supervisors with a \$2,000 stipend.
2. Implementation and Participation:
 - a. Participation is voluntary.
 - b. Applies to supervisors in both private practice and Behavioral Health Agencies (BHAs).
 - c. Supervisors must comply with charging limits and documentation requirements.
 - d. Rulemaking for the stipend program began in April, with workshops planned to refine the process.
3. Funding and Unknowns:
 - a. The program's funding is uncertain and will be clearer after the next legislative session.
 - b. Comparison with a similar nursing commission program highlights the need for participants to obtain a vendor number from the Office of Financial Management (OFM).
 - c. There are many unknowns, including total funding and the process for distributing funds to individuals.
4. Questions and Clarifications:
 - a. What is the likelihood of DOH submitting a decision package for funding? Currently it's too early to tell.
 - b. Discussion on DOH's role in providing guidance for legislators interested in budget requests.
 - c. DOH's commitment to partnering with stakeholders and removing barriers for behavioral health.
 - d. Variability in supervision costs, complicating the determination of appropriate stipend amounts.
5. Stakeholders and Supervisors:
 - a. The stipend program and the pool of eligible supervisors are intended to operate separately, though there may be some overlap in information provided to stakeholders.
 - b. Rulemaking includes stakeholder engagement, with interested parties notified of workshops and discussions.
 - c. The government delivery list confirmed to be used for reaching out to stakeholders.

Payment types for different professional groups (Presentation Postponed) – Renee Fullerton sacrificed her time slot for the sake of extended presentations from other speakers, potential to share at a later meeting.

Look Ahead: 24/25 Schedule

- *Other subgroups will deliver their workforce and rates priorities by the June 21 meeting.*

W&R Schedule

**(April-August) All meetings will take place on the first and third Wednesdays of the month, unless otherwise indicated. (September-October) All meetings will take place on the first and third Thursday of the month, unless otherwise indicated.*

- June 5 – 10 to 11:30
- *Friday, June 21 – 10 to 11:30
- July 3 – 10 to 11
- July 17 – 10 to 11
- August 7 – 10 to 11
- August 21 – 10 to 11



Notes

- *Friday, September 6 – 10 to 11
- September 19 – 10-11
- *Tuesday, October 1 – 10-11
- October 17 – 10-11
- November 7 – 10-11
- November 21 – 10-11
- December 5 – 10-11
- December 19 – 10-11