

**Washington State Joint
Legislative and Executive
Committee on Behavioral
Health**

Meeting Notes

Monday, Oct. 25, 2024

Member Attendees		
<input checked="" type="checkbox"/> Rep. Tana Senn	<input checked="" type="checkbox"/> Anna Nepomuceno	<input checked="" type="checkbox"/> Jane Beyer
<input checked="" type="checkbox"/> Amber Leaders	<input checked="" type="checkbox"/> Laura Van Tosh	<input checked="" type="checkbox"/> Kailey Fiedler-Gohlke
<input checked="" type="checkbox"/> Sen. Keith Wagoner	<input checked="" type="checkbox"/> Sen. Claire Wilson	<input checked="" type="checkbox"/> Teresa Claycamp (for Teesha Kirshbaum)
<input checked="" type="checkbox"/> Rep. Carolyn Eslick	<input checked="" type="checkbox"/> Vicki Lowe	<input type="checkbox"/>

Absent: Sen. Annette Cleveland, Allison Krutsinger (DCYF), Lacy Fehrenbach (DOH), Rep. Alicia Rule; Teesha Kirshbaum; Dr. Brian Waiblinger, MD

Meeting Agenda:

- Spotlight: Network Adequacy & Medical Necessity
- Update on Subcommittees
- Comments from the public
- Reminder about next meeting /Adjourn

AGENDA ITEM	Comments, Decisions and/or Summary of Discussion
1. Network Adequacy & Medical Necessity	<p>See Presentation Slides for detailed content.</p> <p><u>Discussion of “adequacy”</u></p> <p>Measures of “adequacy” currently include standards for Travel Time and Distance. However, a question remains – Does “network adequacy” using these standards actually translate into real access? Not always:</p> <ul style="list-style-type: none"> – Limited capacity can result in long wait times – The right beds may not be available at the right time to serve people with special or complex BH and medical needs. <p>Other standards exist, for example Crisis services have to be available to all counties/regions across the state. HB 1515 includes new Medicaid standards.</p> <p>The BH Systems Coordination Committee (BHSCC) has worked on this issue and is developing recommendations for new criteria to measure access and network adequacy.</p> <p><u>Discussion of Medical Necessity</u></p>

Differing definitions of “Medical necessity” can sometimes be a barrier to obtaining appropriate BH care. “Medical necessity” is not well defined on the private/commercial side (better on the public/Medicaid side). Rep. Simmons is bringing back a bill on this topic for the 2025 session.

Utilization Review: Approvals for care require Prior Authorization, and then a review is done after a period of time to assess the need for continuing services. These reviews are based on reasonable, peer reviewed, medical evidence. Unless specified by statute, commercial plans can decide whether to use a utilization review to assess the need for services.

Under current law no prior authorization is needed for SUD crisis and initial treatments, or for several specific drugs. For MH, law states individuals have to be able to stay on the same drug even if the drug is removed from the approved formulary.

For Medicaid MCOs, Utilization Reviews are conducted. No prior authorization is needed for outpatient services; however, it is required for higher levels of care. MH and SU MCOs have to use (and designate) which specific standards they are using (for example, LOCUS, CALOCUS, ASAM).

Medicaid has better coverage for BH care than Medicare. Some supplemental Medicaid assistance is available for qualifying people on Medicare.

OIC and HCA are collaborating to identify ways to cover gaps in funding and coverage between the commercial and Medicaid sides.

2. Subcommittees

Amber reminded the Committee to submit additional names of non-state agency participants. The “sprint” meetings will be held in November, December, and possibly January.

Action Items

#	Action Item	Assigned To:
1.	Presentation slides on JLEC webpage; email to those who requested	Athena Group
2.	Schedule subcommittees	Athena Group
3.	Obtain Annual OIC Report/Add to JLEC webpage	Athena Group

4. Follow up with Jessica Diaz to get information on the BH Systems Coordination Committee (BHCC) and new recommended criteria for measuring system access.

Athena Group

5. Obtain answers to questions from meeting:

- Is Gambling covered in the DSM?
- For individuals with Developmental Disabilities, why unable to receive BH services while hospitalized
- [Rep Simmons bill](#) on medical necessity being reintroduced next session?

Athena Group