

Whatcom crisis stabilization pilot

Engrossed Substitute Senate Bill 5092; Section 215(51); Chapter 334; Laws of 2021

December 1, 2022

Whatcom Crisis Stabilization Pilot Project Proviso

\$200,000 of the general fund—state appropriation for fiscal year 2022 and \$200,000 of the general fund—state appropriation for fiscal year 2023 are provided on a one-time basis solely for the authority to contract with the north sound behavioral health administrative services organization to establish the Whatcom County crisis stabilization center as a pilot project for diversion from the criminal justice system to appropriate community-based treatment. The pilot shall allow for police officers to place involuntary holds for up to 12 hours for persons placed at the facility in accordance with RCW 10.31.110. The amounts provided must be used to pay for the cost of services at the site not covered under the Medicaid program.

Summary and background

Crisis Stabilization facilities are designed to provide individuals the needed support to stabilize and control symptoms of emotional distress. These facilities aid in diverting people from inpatient hospitalization or incarceration to multi-disciplinary behavioral health treatment. Treatment within the facility can range from respite, to counseling, to peer support medication management. With a variety of cross trained individuals, services are provided to navigate situational predicaments with the support of clinically trained behavioral health professionals.

This proviso is specific to an existing facility and did not originate through HCA's Division of Behavioral Health and Recovery (DBHR) or its planning processes. Local need was communicated to elected representatives and funding made its way into the budget for HCA to implement as required in the budget proviso. In previous legislation session, a proviso was offered for funding crisis stabilization services for non-Medicaid individuals in Whatcom County. This year a new aspect to the proviso included funding to provide diversion opportunities from arrest and from the criminal court system. This funding was identified to create a pilot program. As such, the Whatcom Crisis Stabilization facility will provide support and assessment of mental wellness within a three-hour period for individuals transported to the facility by law enforcement. This short-term crisis stabilization will allow for police officers to place involuntary holds for up to 12 hours for persons placed at the facility in accordance with RCW 10.31.110. This process aims to avoid needless arrests for behavioral health crises and to prevent costly hospitalization charges for symptoms which can be addressed at a less traumatic level of care.

Key findings and data

The information and numbers reported below are provided from the report generated by Whatcom County Crisis Stabilization Center (WCCSC) and submitted by North Sound BHASO from their 2022 quarterly reports. The total number of individuals served in the crisis stabilization center is separated by those who served on a voluntary basis versus those who served under involuntary treatment holds placed pursuant to RCW 10.31.110. The numbers reported only reflect those individuals who were

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diverted from arrest by law enforcement and were admitted to the Whatcom County Crisis Stabilization Center (WCCSC).

In the fourth quarter of 2021, Compass Health Whatcom Triage went live with increased Law Enforcement (LE) referral and drop off, with the goal of accepting 12 hour holds under RCW 10.77. Compass Health and Whatcom County have collaborated to generate expedited admission processes for LE drop offs and increase LE awareness of appropriate triage referrals.

WCCSC identifies that law enforcement are using the facilities as a diversion center for individuals who are willing to engage in stabilization services and do not rise to the level of incarceration. WCCSC also reported that the goal is to obtain a license for admitting individuals on a police hold. "We hope to have our licensing for involuntary Triage back from the State of Washington as of May." WCCSC also reported they recently posted all required positions to transition to involuntary staffing level and are working on recruitment. "We have completed workflows, job descriptions and hope to have our policies and procedures finalized by May."

Quarter 4 2021 – Reported January 2022

There were a total of five LE drop referrals, three of which were rescinded by LE prior to arrival at Triage. All were voluntary. Compass Health created a work group designed to discuss program and facility needs to transition to involuntary services. As of the January 2022 reporting date, triage staff were reviewing job descriptions, staffing patterns, and policy and procedures. Additionally, the team began reviewing additional DOH facility licensing requirements to be able provide involuntary services with a goal of April 2022.

Quarter 1 2022 – Reported April 2022

LE voluntary drop offs remained low for quarter one. The Whatcom Triage Advisory Committee reviewed the process for LE drop offs with multiple agencies and brainstormed how to streamline referrals. There were six voluntary LE referrals for March, three of which stayed for the entire recommended length. Compass reported that they are waiting for DOH facility licensing approval to accept LE referrals under 10.77. Additionally, policies and procedures for involuntary clients remained in review.

Quarter 2 2022 – Reported in July 2022

Between April and June 155 (72.43%) clients successfully completed their stay; 18 (8.41%) withdrew against advice; and 41 (19.16%) had other outcomes, such as: detained, discharged to hospital due to medical issues, policy/rule breaking discharge, and other reasons. LE specific drop offs were not reported, however, a streamlined admission process for LE was implemented. Policies are complete, the DOH Facility licensing was awarded, however staffing for involuntary staffing levels has been challenging.

Quarter 3 – Reporting due in October 2022

Compass Health still has several staffing deficits preventing involuntary, 12 hour holds as the staffing ratio is different between voluntary and involuntary admissions. Currently, Compass needs three additional night shift staff, and one-two additional staff for other shifts. One person has been hired but will not be through orientation for another month. It was noted during the August advisory board meeting that patrol across several LE agencies have had some confusion on appropriate referrals and the

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admission process. Whatcom County generated a “visor card” for the LE drop off/admission process and will distribute to the various Law Enforcement agencies.

Involuntary Police Placement/Holds

There is no indication in the report which identifies that this facility has accepted any involuntary holds from law enforcement.

(a) A summary of the outcomes for each of the groups identified; and

This facility has been unable to accept any involuntary holds from law enforcement as it awaited its designation as a certified crisis stabilization facility from the Department of Health. The center also reports that they have faced challenges in hiring and maintaining staffing needed to provide safe and secure environment for the anticipated increase of acuity in people they serve. Numbers reported represent voluntary placements only.

(b) of this subsection;

This information was not reported out prior to August of 2022.

Fiscal Report and Funding Consideration

HCA has convened a workgroup and is currently working with providers of crisis stabilization facilities to determine if there is a different way to fund the services offered within these facilities.

Section C – The payment mechanism identified for incentivizing and requirement of managed care organizations (MCO) to implement payment models for crisis stabilization providers at a capacity level has been determined to be through the Wrap Around contracts that are in place with each MCO.

Due to CMS regulations, services to individuals who are Medicaid enrollees are required to be paid for services rendered that are medically necessary. To ensure that individuals who are placed voluntarily in the crisis stabilization center are enrollees, general funds state (GFS) funding would be required.

Capacity payments are not allowed for Medicaid services, therefore the funding for these payments would not be eligible for federal matching funds. Thus, GFS funding is required to ensure capacity payments.

Managed Care Organizations could be required through the Wrap Around Contract (the contract with the MCO that provides services to Medicaid enrollees that are not allowed under Medicaid) to require that crisis stabilization facilities be paid on a capacity basis. This funding could be provided based on enrollment in each of the regions. Substance Abuse and Mental Health Services Administration (SAMSHA) models can be utilized to provide estimates of the crisis stabilization services based on the population in the region, which would allow funding to be determined for each of the MCOs.

Progress to date

Recognizing the importance of diverting individuals experiencing a behavioral health crisis from arrest and reducing the number entering the criminal justice system, the Legislature appropriated \$200,000 of the general fund—state appropriation for fiscal year 2022 and \$200,000 of the general fund—state appropriation for fiscal year 2023 on a one-time basis solely for the authority to contract with the North Sound Behavioral Health Administrative Services Organization (BH-ASO) to establish the Whatcom

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County Crisis Stabilization Center as a pilot project to provide a least restrictive environment for diversion from the criminal justice system into more appropriate community-based treatment.

This pilot will allow police officers to place involuntary holds for up to 12 hours for persons placed at the facility in accordance with RCW 10.31.110. The amounts provided must be used to pay for the cost of services at the site not covered under the Medicaid program. Crisis services provided therein can also include a) follow up to crisis services; and b) introduction of other support professionals as determined by the mental health professional who may need additional support beyond behavioral health stabilization services. Services provided to date have centered only on individuals who were voluntarily admitted, as Whatcom County Crisis Services has not yet implemented involuntary services as of the last received report from North Sound BH-ASO.

In a deliverable report for July 2022, North Sound BH-ASO identifies that Compass Health has received its certification to accept involuntary police placements/holds; however, due to serious work force challenges to date, the center has been unable to staff up to a needed ratio to safely accept 12-hour involuntary law enforcement holds. Law enforcement has continued to successfully refer voluntary individuals.