SENATE BILL REPORT SB 5698

As Reported By Senate Committee On: Human Services & Corrections, February 23, 2007

Title: An act relating to case management services for dangerous mentally ill offenders.

Brief Description: Concerning case management services for dangerous mentally ill offenders.

Sponsors: Senators Hargrove and Regala; by request of Department of Social and Health Services.

Brief History:

Committee Activity: Human Services & Corrections: 2/06/07, 2/23/07 [DPS].

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Majority Report: That Substitute Senate Bill No. 5698 be substituted therefor, and the substitute bill do pass.

Signed by Senators Hargrove, Chair; Regala, Vice Chair; Stevens, Ranking Minority Member; Brandland, Carrell, Marr and McAuliffe.

Staff: Indu Thomas (786-7459)

Background: In 1999, the Legislature passed SSB 5011 to better identify and provide additional mental health treatment for offenders released from prison, who suffer from a mental illness and pose a threat to public safety. This bill enabled a community integration program for these offenders upon re-entry into the community. The program provides services and treatment for up to five years after release from prison. The legislation authorized the Department of Social and Health Services to contract with Regional Support Networks (RSNs) to provide these services. Currently this program, the Community Integration Assistance Program, is found in four of the state's thirteen RSNs.

Summary of Bill: All RSNs are required to provide community integration assistance programs for offenders who suffer from a mental illness and pose a threat to public safety.

EFFECT OF CHANGES MADE BY RECOMMENDED SUBSTITUTE AS PASSED COMMITTEE (Human Services & Corrections):

- Reverts to original provision in 71.24.470.
- The Secretary of DSHS must contract with RSNs or any other qualified entity to provide services to individuals that the Secretary of DOC has identified as posing a danger to themselves or others and suffering from a mental disorder.

Senate Bill Report - 1 - SB 5698

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

• Changes all references to this treatment program from Dangerous Mentally Ill Offender (DMIO) to Reintegration for Offenders with Mental Disorders.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: The purpose of this legislation is to try to get a consistent, systemic approach across the RSN systems. Four RSNs contract directly with the Mental Health Division to serve as the case managers for these programs. Ten additional counties provide services without RSN oversight, which puts the Department in a quasi case-management role. A recent study conducted by Washington State Institute of Public Policy shows that these programs are effectively reducing recidivism. There has been a 45 percent reduction across felony offenses and a 38 percent reduction for new offenses post discharge from prison. There is a question of liability protection with respect to this bill. In 2002, the Legislature passed legislation providing liability protections for service providers. The cost to society of not having such programs available across the state is far greater than the cost without the program.

CON: There is no question that this is an effective program. In 2001, the North Sound Regional Support Network (RSN) looked into taking on this program. The RSN chose not to because at that time the Washington Governmental Entity Pool insurance company indicated that the RSN would be charged \$50,000 per offender for the program. Currently, the insurance company has indicated a complete unwillingness to cover the RSN if the RSN takes on this program. The North Sound clients are being served by the same providers under the current system. The counties that are currently covering this population are self-insured. The name of the program is unfortunate and should be reconsidered. The liability protections provided in statute are inadequate.

Persons Testifying: PRO: Richard Kellogg, Mental Health Division, Department of Social and Health Services; Russ Sapienza, North Sound Mental Health Administration.

CON: Charles Benjamin, North Sound Mental Health Administration; Jean Wessman, Washington Association of Counties.