Crisis Systems Enhancement

The new 988 line and HB 1477 system
Crisis Systems Team

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Background and Goals

Overview, Implementation and Goals of 988 and 1477

Someone to talk to
Background on 988

In July 2020, the federal government passed legislation to add 988 as an option to contact the National Suicide Prevention Lifeline hotline. This is to make it easier for people in crisis to access help rather than remember a 10-digit number.

- 988 will start routing calls to state NSPLs on July 16.
  - There are 3 designated NSPLs in Washington.
  - All other hotlines and regional call centers will continue to operate as normal.

SAMHSA created a best practices toolkit with tips to implement 988 and improve crisis systems.
In the 2021 legislative session the legislature passed E2SHB 1477, "The Crisis Call Center Hub Act" to implement 988 in Washington and improve access to crisis services

Key points of the legislation include:

- Funds 988 and related activities with a line tax
- Established the Crisis Response Improvement Strategy (CRIS) committee to bring input and consultation to the implementation of 1477
- Creates crisis call center hubs to dispatch mobile crisis teams
- Creates a technology platform to improve coordination in the crisis system
- Creates next day appointments for all insurance plans
- Includes distinct directives for equity in development, provision and access of crisis services
Crisis Call Center Hubs

Crisis call center hubs will receive calls to the 988 line
- Certified NSPLs
- Call will be triaged, and support provided by phone

Technical and Operational plan
- Plan is under development and will be presented in fall 2022
- This plan will create a system of systems to ensure a crisis call center hub can coordinate and dispatch crisis services
- Some systems will be available to service providers

Go live for hubs is July 2024
- Roll out of systems and resources will occur in 2023
Tribal Hub and Tribal Crisis Line

- Launched May 2022 it serves indigenous and Tribal affiliated individuals.
- The Indian BH Hub offers culturally appropriate aid to all Tribal and non-Tribal providers who support tribal communities in any behavioral health capacity.
- Created in partnership between:
  - Tribal Centric Behavioral Health Advisory Board (TCBHAB)
  - American Indian Health Commission (AIHC)
  - VOA, HCA, and DOH
- Native and Strong Crisis line planned go live in July.
CRIS Committee & Subcommittees

- HB 1477 established a 36 member CRIS Committee
- 5 CRIS Committee members comprise the Steering Committee
- Subcommittees
  - Credentialing and Training
  - Technology
  - Cross-System Crisis Response
  - Confidential Information Compliance and Coordination
  - Tribal 988
  - Rural and Agricultural
  - Lived Experience
Mobile Crisis Teams

Adult and Youth teams being implemented with SAMHSA's vision of someone to respond
Adult Mobile Crisis Response

Someone to Respond

- Offer community-based interventions wherever they are needed including homes, work or anywhere else in the community

- Utilize two person teams to enhance safety and engagement while supporting emergency department and justice system diversion

- Multidisciplinary teams that utilize professionals and certified peer counselors

- Starting 6 new adult teams and 3.5 team equivalents to enhance existing teams in July 2022
Mobile Response & Stabilization Services

- Youth crisis continuum of care model to intervene *before* a crisis
  - Meet the developmental needs of youth, young adults, and families
  - De-escalate a crisis to prevent costly out of home interventions
  - Promotes a shift to home and community-based services
  - Teams connect families to natural, community and clinical supports

Allows youth and parents/caregivers to define the crisis, not the team. Designed to send help when families need it, where they need it. Youth or families call, and the team responds - in person

Starting 6 new youth and family teams and 0.5 team to enhance an existing team in July 2022.
Crisis Resolution

Somewhere to go and something to support
A place to go

Expanding Crisis Stabilization facilities
- Expanding the number of crisis stabilization beds to ensure there is adequate access across the state.

Creating and implementing 23-hour facilities
- "Mental health minor emergency" are facilities people can stay at and receive onsite support while they work with a team to go directly to their next step in resolving their crisis.

Expanding and implementing Peer Respites
- Peer respites are new modality for the state. They are an alternative to crisis stabilization where a person stays for up to 7 days and receives onsite intense peer support.
Crisis Resolution Services

Next Day Appointments
- HCA will require MCOs to provide next day appointments to people in crisis
- OIC issued rules for commercial insurance providers to make next day appointments available to those in crisis

In community stabilization services
- Mobile crisis teams will provide stabilization services to the youth and their family after a crisis to work through lasting issues. These services are provided at a person's home or in the community.
Expanding Access to Crisis Services

- HB 1688 eliminated balance billing for out of network behavioral health emergency services
  - BH emergency services include mobile crisis, crisis stabilization, detox, and inpatient/residential services

- Goal of the bill is to ensure commercial carriers pay for services
  - Reduce the reliance on Medicaid and block grant dollars
  - Expand services traditionally available to Medicaid enrollees to everyone
  - Achieve parity of service for behavioral health
Expanding Peers in Crisis Services

- Peers will be integrated into crisis services
  - DBHR working with other HCA divisions and DOH to reduce barriers for certified peer counselors in crisis services

- The goal is bringing lived experience perspective to empathize and communicate with someone in crisis

- Peers are already being added to mobile crisis teams and work will be undertaken to expand them into:
  - Crisis stabilization facilities
  - EDs
  - And more
What happens July 16, 2022?

- Calls will begin to be routed by all carriers to the state’s NSPL providers
  - All call lines that exist now will still exist after July
  - NSPLs will continue to coordinate with regional resources and 911
  - 988 will just be another option to access the Suicide Prevention Lifeline

- Text messages will be routed through 988

- Native and Strong crisis call line
Questions?

Thank you for listening
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Information about the CRIS Committee

More information about 988

SAMHSA best practice toolkit