

2020 Legislation on Behavioral Health

There is a tremendous need for more access to behavioral healthcare. Many communities across our state are struggling with substance abuse and families have been devastated by overdose.

There is also a suicide crisis in pockets of our state. Colville nation reports a five times higher than average rate of completed suicides, and youth are the most at risk in the tribe. All Native Americans are three times as likely to die from suicide as the average Washington resident. There are 29 federally recognized tribes in Washington, which rely on 75 different providers of behavioral health services. The tribes need funding, access to services and more assistance.

SB 6259 increases resources to the tribes to support Native Americans, offering culturally competent behavioral specialists and their own inpatient and secure withdrawal resources. Together, the bills would provide funding for Native tribes to have inpatient, secure withdrawal, and behavioral health specialists, and their own Designated Crisis Responders.

To help prevent suicide in the general public **HB 2411** requires health providers to have advance training in suicide prevention. It adds Optometrist, Veterinarians, and Vet techs to the list of professions requiring a one time training to acquire their license. **HB 2563** sets up a more robust alert system through the Department of Health notifications to healthcare providers and schools. The medical examiner will be required to keep data on deaths by suicide.

And the opiate crisis is far from resolved. There are many places, especially in rural Washington, where there are no providers or clinics to provide medication assisted care. **SB 6086** allows pharmacies to dispense remotely, to extend their reach.