Washington State Health Care Authority

Behavioral health treatment options for adolescents

PATIENT'S NAME MEDICAL RECORD NUMBER

Parents or guardians seeking a mental health or substance use evaluation or treatment for an adolescent age 13 to 17 years old must be notified of all legally available treatment options. These include Adolescent-Initiated Treatment (formerly minor-initiated treatment), Family-Initiated Treatment (formerly parent-initiated treatment), and Involuntary Commitment. Beginning July 2019, HB 1874 expands adolescent behavioral health (BH) treatment access, by broadening Family-Initiated Treatment (FIT) language under RCW 71.34 to include outpatient treatment services and guidelines regarding information that can be disclosed to a parent, guardian, or behavioral health provider without consent of the adolescent.

Adolescent-Initiated Treatment (RCW 71.34.500-530)

An adolescent, 13 to 17 years old, may request an evaluation for outpatient or inpatient mental health or substance use disorder treatment without parental consent. If the facility agrees with the need for outpatient mental health or substance use disorder treatment, the adolescent may be offered services. An inpatient admission shall occur only if the professional person in charge of the facility concurs with the need for inpatient treatment. For a minor under the age of 13, either parental consent or consent from an approved guardian is required for inpatient treatment.

Family-Initiated Treatment (RCW 71.34.600-670)

The parent, guardian, stepparent, kinship caregiver, other relative or authorized individual may bring their adolescent age 13 to 17 years old to any mental health evaluation and treatment facility, hospital, inpatient facility or an approved substance use disorder (SUD) treatment program and request that a mental health evaluation or substance use disorder assessment be conducted by a professional person to determine whether the adolescent has a mental health or substance use disorder and is in need of inpatient or outpatient treatment. The evaluation in an inpatient setting cannot take longer than 72 hours. Consent of the adolescent is not required for either an outpatient or inpatient mental health or substance use disorder evaluation. *Please see new definition of parent **RCW 71.34.020(25)(a)**.*

Please note: *No provider is obligated to provide treatment to an adolescent under the provisions of FIT. However, an adolescent's refusal to consent to treatment shall not be the sole basis for a facility's decision to decline services.*

Family-Initiated Outpatient and Intensive Outpatient Treatment

If it is determined by the professional person that the adolescent age 13 to 17 years old has a mental health or substance use disorder, and is in need of *outpatient treatment*, services can be offered to the adolescent through FIT. FIT specifies that a parent may access and consent for up to 12 outpatient mental health and/or SUD sessions for an adolescent with a specific professional person within a 3 month period. The outpatient professional delivering services must notify the Health Care Authority's (HCA) contracted reviewer that an adolescent has begun receiving outpatient treatment within the first 24 hours of the initial services under Family-Initiated Treatment, and again every 45 days throughout the 3 month period. Following the treatment period, an adolescent must provide consent for further treatment with the same outpatient provider.

Family-Initiated Inpatient Treatment

If it is determined by the professional person that the adolescent age 13-17 years old has a mental health or substance use disorder and there is medical need for inpatient treatment, the parent or guardian may request that the adolescent be held for treatment. If the inpatient program believes the adolescent needs to be held for treatment, the inpatient facility must notify HCA's contracted reviewer that an adolescent has been admitted for

treatment under Family-Initiated Treatment within 24 hours of the completion of the evaluation. If the inpatient program believes the adolescent must be held for more than 7 days, the inpatient program must notify HCA that a review for the continued need of inpatient treatment needs to be completed. The adolescent must be notified by the facility of his or her right to petition the Superior Court for release from the facility not sooner than five days after the review. Any adolescent receiving treatment under this chapter must be released from the inpatient facility within 30 days of the HCA contracted reviewer's review unless the adolescent is admitted under voluntary status or the professional person or Designated Crisis Responder (DCR) initiates involuntary commitment proceedings under this section.

If HCA's contracted reviewer's review determines that the adolescent no longer meets medical criteria for inpatient treatment, the parent or guardian must be immediately notified and the adolescent must be released within 24 hours. In this case, if the parent or guardian and facility both believe it is medically necessary for the adolescent to remain in inpatient treatment, the facility will hold the adolescent until the second judicial day following the HCA review. This will allow the parent or guardian time to file an at-risk youth petition pursuant to **RCW 13.32A.191**. Family Reconciliation Services (**RCW 13.32A.040**) may also be provided through the Department of Children, Youth, and Families (DCYF).

Adolescents admitted to an inpatient facility under Family Initiated Treatment must be released from the facility immediately upon the written request of the parent.

Involuntary Treatment (RCW 71.34.700-795)

If an adolescent 13 years or older presents a likelihood of serious harm to themselves or others, who is gravely disabled and may be in need of immediate mental health or substance use inpatient treatment and refuses to consent to a voluntary admission, the adolescent may be held for up to 12 hours to enable a DCR to evaluate the adolescent for possible involuntary commitment. If no voluntary or less restrictive treatment alternatives are available, and the DCR determines that the adolescent presents a likelihood of serious harm or is gravely disabled, as a result of a mental health or substance use disorder, the adolescent may be held at a facility. An adolescent may only be subject to involuntary commitment for substance use disorder treatment if a secure withdrawal management and stabilization facility or approved substance use disorder treatment program is available and has adequate space for the adolescent.

If the adolescent is already admitted to an inpatient mental health or substance use treatment facility, they may be seen by a mental health or substance use disorder professional and the staff within 24 hours to determine whether to pursue involuntary commitment court proceedings. Under involuntary treatment act, the adolescent can initially be held for treatment up to 72 hours, excluding weekends and holidays. During this time, the facility may petition the court to have the adolescent committed for an additional 14 days, if it is believed further treatment is necessary. At the end of the 14 days, the facility may file a petition for up to 180 days of additional inpatient treatment.

If the DCR does not hold the adolescent, the parent or guardian may seek review of the decision, pursuant to 71.05.201, by filing notice with the court and providing a copy of the DCR's report and/or notes.

If the adolescent is released from hospitalization on a conditional release or a less restrictive alternative court order, and is not following the conditions of that release or court order, or has substantially deteriorated in their functioning, the adolescent can be evaluated and taken into custody by a DCR and transported to an inpatient evaluation and treatment facility for mental health treatment or to a secure withdrawal management and stabilization facility or approved substance use disorder treatment program, if a facility is available and has adequate space for the adolescent for substance use disorder treatment. For further assistance or questions, call your local behavioral health crisis line.

Providers' Mandatory Review Notifications

Within 24 hours of FIT admission the provider must notify the HCA contracted reviewer, The FIT Administration Office, via secure email at fitreporting@fitadministration.com or via secure fax at 206-859-6432

The notification shall include:

- Name and Date of Birth
- Date of FIT admission or status change to FIT
- County in which the adolescent lives, and
- Insurance type

Between 7 – 14 days of an adolescent's admission, and every 45 days that treatment in outpatient or intensive outpatient continues, the provider must send the following information to HCA's contractor for review of medical necessity:

- Admittance face sheet
- Intake assessment note
- Discharge summary

☐ I have been provided with written and verbal notice of the available treatment options for the adolescent.

Parent/guardian's signature **Date** **Facility representative's signature** **Date**

_____ _____ _____ _____

☐ **Unable to obtain parent/guardian signature or acknowledgement.**

Reason for lack of signature:

Facility representative's signature **Date**

_____ _____

For more information about Family Initiated Treatment, please contact:

HCAFamilyInitiatedTreatment@hca.wa.gov

Updates

March 17, 2020:

- Changed contact for admissions and reviews to:
  FIT Administration Office, via secure email at fitreporting@fitadministration.com or via secure fax at 206-859-6432.