ESB 5476 - H COMM AMD By Committee on Appropriations

ADOPTED AND ENGROSSED 04/24/2021

1 Strike everything after the enacting clause and insert the 2 following:

3 "<u>NEW SECTION.</u> Sec. 1. A new section is added to chapter 71.24 4 RCW to read as follows:

The authority, in collaboration with the substance use 5 (1)recovery services advisory committee established in subsection (2) of 6 7 this section, shall establish a substance use recovery services plan. The purpose of the plan is to implement measures to assist persons 8 9 with substance use disorder in accessing outreach, treatment, and recovery support services that are low barrier, person centered, 10 11 informed by people with lived experience, and culturally and 12 linguistically appropriate. The plan must articulate the manner in 13 which continual, rapid, and widespread access to a comprehensive 14 continuum of care will be provided to all persons with substance use disorder. 15

16 (2) (a) The authority shall establish the substance use recovery 17 services advisory committee to collaborate with the authority in the development and implementation of the substance use recovery services 18 plan under this section. The authority must appoint members to the 19 20 advisory committee who have relevant background related to the needs 21 of persons with substance use disorder. The advisory committee shall 22 be reflective of the community of individuals living with substance 23 use disorder, including persons who are Black, indigenous, and 24 persons of color, persons with co-occurring substance use disorders and mental health conditions, as well as persons who represent the 25 unique needs of rural communities. The advisory committee shall be 26 27 convened and chaired by the director of the authority, or the 28 director's designee. In addition to the member from the authority, the advisory committee shall include: 29

30 (i) One member and one alternate from each of the two largest 31 caucuses of the house of representatives, as appointed by the speaker 32 of the house of representatives; 1 (ii) One member and one alternate from each of the two largest 2 caucuses of the senate, as appointed by the president of the senate; 3

(iii) One representative of the governor's office;

(iv) At least one adult in recovery from substance use disorder 4 who has experienced criminal legal consequences as a result of 5 6 substance use;

7 (v) At least one youth in recovery from substance use disorder who has experienced criminal legal consequences as a result of 8 substance use; 9

(vi) One expert from the addictions, drug, and alcohol institute 10 11 at the University of Washington;

12 (vii) One outreach services provider;

(viii) One substance use disorder treatment provider; 13

(ix) One peer recovery services provider; 14

(x) One recovery housing provider; 15

(xi) One expert in serving persons with co-occurring substance 16 use disorders and mental health conditions; 17

(xii) One expert in antiracism and equity in health care delivery 18 19 systems;

20 (xiii) One employee who provides substance use disorder treatment 21 or services as a member of a labor union representing workers in the 22 behavioral health field;

(xiv) One representative of the association of Washington health 23 24 plans;

25 (xv) One expert in diversion from the criminal legal system to 26 community-based care for persons with substance use disorder;

(xvi) One representative of public defenders; 27

28 (xvii) One representative of prosecutors;

29 (xviii) One representative of sheriffs and police chiefs;

(xix) One representative of a federally recognized tribe; and 30

31 (xx) One representative of local governments.

32 (b) The advisory committee may create subcommittees with expanded participation. 33

(c) In its collaboration with the advisory committee to develop 34 35 the substance use recovery services plan, the authority must give due 36 consideration to the recommendations of the advisory committee. If the authority determines that any of the advisory committee's 37 38 recommendations are not feasible to adopt and implement, the 39 authority must notify the advisory committee and offer an explanation. 40

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1 (d) The advisory committee must convene as necessary for the 2 development of the substance use recovery services plan and to 3 provide consultation and advice related to the development and 4 adoption of rules to implement the plan. The advisory committee must 5 convene to monitor implementation of the plan and advise the 6 authority.

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(3) The plan must consider:

8 (a) The points of intersection that persons with substance use 9 disorder have with the health care, behavioral health, criminal, 10 civil legal, and child welfare systems as well as the various 11 locations in which persons with untreated substance use disorder 12 congregate, including homeless encampments, motels, and casinos;

13 (b) New community-based care access points, including crisis 14 stabilization services and the safe station model in partnership with 15 fire departments;

16 (c) Current regional capacity for substance use disorder 17 assessments, including capacity for persons with co-occurring 18 substance use disorders and mental health conditions, each of the 19 American society of addiction medicine levels of care, and recovery 20 support services;

(d) Barriers to accessing the existing behavioral health system and recovery support services for persons with untreated substance use disorder, especially indigent youth and adult populations, persons with co-occurring substance use disorders and mental health conditions, and populations chronically exposed to criminal legal system responses, and possible innovations that could improve the quality and accessibility of care for those populations;

(e) Evidence-based, research-based, and promising treatment and recovery services appropriate for target populations, including persons with co-occurring substance use disorders and mental health conditions;

32 (f) Options for leveraging existing integrated managed care, medicaid waiver, American Indian or Alaska Native fee-for-service 33 behavioral health benefits, and private insurance service capacity 34 for substance use disorders, including but not 35 limited to coordination with managed care organizations, behavioral health 36 administrative services organizations, the Washington health benefit 37 exchange, accountable communities of health, and the office of the 38 39 insurance commissioner;

1 (g) Framework and design assistance for jurisdictions to assist 2 in compliance with the requirements of RCW 10.31.110 for diversion of 3 individuals with complex or co-occurring behavioral health conditions 4 to community-based care whenever possible and appropriate, and 5 identifying resource gaps that impede jurisdictions in fully 6 realizing the potential impact of this approach;

7 (h) The design of recovery navigator programs in section 2 of 8 this act, including reporting requirements by behavioral health 9 administrative services organizations to monitor the effectiveness of 10 the programs and recommendations for program improvement;

(i) The proposal of a funding framework in which, over time, resources are shifted from punishment sectors to community-based care interventions such that community-based care becomes the primary strategy for addressing and resolving public order issues related to behavioral health conditions;

(j) Strategic grant making to community organizations to promote public understanding and eradicate stigma and prejudice against persons with substance use disorder by promoting hope, empathy, and recovery;

(k) Recommendations for diversion to community-based care for individuals with substance use disorders, including persons with cooccurring substance use disorders and mental health conditions, across all points of the sequential intercept model;

(1) Recommendations regarding the appropriate criminal legalsystem response, if any, to possession of controlled substances;

26 (m) Recommendations regarding the collection and reporting of data that identifies the number of persons law enforcement officers 27 and prosecutors engage related to drug possession and disparities 28 29 across geographic areas, race, ethnicity, gender, age, sexual orientation, and income. The recommendations shall include, but not 30 31 be limited to, the number and rate of persons who are diverted from charges to recovery navigator services or other services, who receive 32 services and what type of services, who are charged with simple 33 possession, and who are taken into custody; and 34

35 (n) The design of a mechanism for referring persons with 36 substance use disorder or problematic behaviors resulting from 37 substance use into the supportive services described in section 2 of 38 this act.

39 (4) The plan and related rules adopted by the authority must give 40 due consideration to persons with co-occurring substance use Official Print - 4 5476.E AMH ENGR H1622.E

1 disorders and mental health conditions and the needs of youth. The plan must include the substance use outreach, treatment, and recovery 2 services outlined in sections 2 through 4 of this act which must be 3 available in or accessible by all jurisdictions. These services must 4 be equitably distributed across urban and rural settings. If feasible 5 6 and appropriate, service initiation shall be made available on demand 7 through 24-hour, seven days a week peer recovery coach response, behavioral health walk-in centers, or other innovative rapid response 8 models. These services must, at a minimum, incorporate the following 9 principles: Establish low barriers to entry and reentry; improve the 10 health and safety of the individual; reduce the harm of substance use 11 12 and related activity for the public; include integrated and coordinated services; incorporate structural competency and 13 antiracism; use noncoercive methods of engaging and retaining people 14 in treatment and recovery services, including contingency management; 15 16 consider the unique needs of rural communities; and have a focus on 17 services that increase social determinants of health.

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(5) In developing the plan, the authority shall:

(a) Align the components of the plan with previous and ongoing
studies, plans, and reports, including the Washington state opioid
overdose and response plan, published by the authority, the roadmap
to recovery planning grant strategy being developed by the authority,
and plans associated with federal block grants; and

(b) Coordinate its work with the efforts of the blue ribbon commission on the intersection of the criminal justice and behavioral health crisis systems and the crisis response improvement strategy committee established in chapter . ., Laws of 2021 (Engrossed Second Substitute House Bill No. 1477).

29 (6) The authority must submit a preliminary report by December 1, 2021, regarding progress toward the substance use recovery services 30 plan. The authority must submit the final substance use recovery 31 services plan to the governor and the legislature by December 1, 32 2022. After submitting the plan, the authority shall adopt rules and 33 enter into contracts with providers to implement the plan by December 34 1, 2023. In addition to seeking public comment under chapter 34.05 35 36 RCW, the authority must adopt rules in accordance with the recommendations of the substance use recovery services advisory 37 committee as provided in subsection (2) of this section. 38

39 (7) In consultation with the substance use recovery services 40 advisory committee, the authority must submit a report on the Official Print - 5 5476.E AMH ENGR H1622.E implementation of the substance use recovery services plan to the appropriate committees of the legislature and governor by December lst of each year, beginning in 2023. This report shall include progress on the substance use disorder continuum of care, including availability of outreach, treatment, and recovery support services statewide.

7 (8) For the purposes of this section, "recovery support services" means a collection of resources that sustain long-term recovery from 8 substance use disorder, including for persons with co-occurring 9 substance use disorders and mental health conditions, recovery 10 11 housing, permanent supportive housing, employment and education pathways, peer supports and recovery coaching, family education, 12 technological recovery supports, transportation and child care 13 assistance, and social connectedness. 14

15 (9) This section expires December 31, 2026.

16 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 71.24 17 RCW to read as follows:

(1) Each behavioral health administrative services organization 18 shall establish a recovery navigator program. The program shall 19 20 provide community-based outreach, intake, assessment, and connection to services and, as appropriate, long-term intensive case management 21 and recovery coaching services, to youth and adults with substance 22 use disorder, including for persons with co-occurring substance use 23 24 disorders and mental health conditions, who are referred to the program from diverse sources and shall facilitate and coordinate 25 connections to a broad range of community resources for youth and 26 27 adults with substance use disorder, including treatment and recovery 28 support services.

(2) The authority shall establish uniform program standards for 29 30 behavioral health administrative services organizations to follow in 31 the design of their recovery navigator programs. The uniform program standards must be modeled upon the components of the law enforcement 32 assisted diversion program and address project management, field 33 engagement, biopsychosocial assessment, intensive case management and 34 35 care coordination, stabilization housing when available and appropriate, and, as necessary, legal system coordination. The 36 37 authority must adopt the uniform program standards from the components of the law enforcement assisted diversion program to 38 accommodate an expanded population of persons with substance use 39 Official Print - 6 5476.E AMH ENGR H1622.E

1 disorders, including persons with co-occurring substance use disorders and mental health conditions, and allow for referrals from 2 a broad range of sources. In addition to accepting referrals from law 3 enforcement, the uniform program standards must provide guidance for 4 accepting referrals on behalf of persons with substance use 5 disorders, including persons with co-occurring substance use 6 7 disorders and mental health conditions, from various sources including, but not limited to, self-referral, family members of the 8 individual, emergency department personnel, persons engaged with 9 serving homeless persons, including those living unsheltered or in 10 11 encampments, fire department personnel, emergency medical service 12 personnel, community-based organizations, members of the business community, harm reduction program personnel, faith-based organization 13 staff, and other sources within the criminal legal system, 14 as outlined within the sequential intercept model. In developing 15 16 response time requirements within the statewide program standards, 17 the authority shall require, subject to the availability of amounts appropriated for this specific purpose, that responses to referrals 18 from law enforcement occur immediately for in-custody referrals and 19 shall strive for rapid response times to other appropriate settings 20 21 such as emergency departments.

22 (3) Subject to the availability of amounts appropriated for this 23 specific purpose, the authority shall provide funding to each behavioral health administrative services 24 organization for the 25 development of its recovery navigator program. Before receiving 26 funding for implementation and ongoing administration, each behavioral health administrative services organization must submit a 27 program plan that demonstrates the ability to fully comply with 28 statewide program standards. The authority shall establish a schedule 29 for the regular review of behavioral health administrative services 30 31 organizations' programs. The authority shall arrange for technical 32 assistance to be provided by the LEAD national support bureau to all 33 behavioral health administrative services organizations.

(4) Each behavioral health administrative services organization 34 must have a substance use disorder regional administrator for its 35 36 recovery navigator program. The regional administrator shall be responsible for assuring compliance with program standards, including 37 staffing standards. Each recovery navigator program must maintain a 38 sufficient number of appropriately trained personnel for providing 39 intake and referral services, conducting comprehensive 40 Official Print - 7 5476.E AMH ENGR H1622.E

1 biopsychosocial assessments, providing intensive case management services, and making warm handoffs to treatment and recovery support 2 services along the continuum of care. Program staff must include 3 people with lived experience with substance use disorder to the 4 extent possible. The substance use disorder regional administrator 5 6 must assure that staff who are conducting intake and referral services and field assessments are paid a livable and competitive 7 wage and have appropriate initial training and receive continuing 8 education. 9

10 (5) Each recovery navigator program must submit quarterly reports 11 to the authority with information identified by the authority and the 12 substance use recovery services advisory committee. The reports must 13 be provided to the substance use recovery services advisory committee 14 for discussion at meetings following the submission of the reports.

15 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 71.24 16 RCW to read as follows:

(1) Subject to the availability of amounts appropriated for thisspecific purpose, the authority shall establish a grant program to:

(a) Provide treatment services for low-income individuals with substance use disorder who are not eligible for medical assistance programs under chapter 74.09 RCW, with priority for the use of the funds for very low-income individuals; and

(b) Provide treatment services that are not eligible for federal matching funds to individuals who are enrolled in medical assistance programs under chapter 74.09 RCW.

In establishing the grant program, the authority shall 26 (2) 27 consult with the substance use recovery services advisory committee 1 28 established in section of this act, behavioral health administrative services organizations, managed care organizations, 29 30 and regional behavioral health providers to adopt regional standards 31 that are consistent with the substance use recovery services plan developed under section 1 of this act to provide sufficient access 32 for youth and adults to meet each region's needs for: 33

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(a) Opioid use disorder treatment programs;

35 (b) Low-barrier buprenorphine clinics;

36 (c) Outpatient substance use disorder treatment;

37 (d) Withdrawal management services, including both subacute and38 medically managed withdrawal management;

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(e) Secure withdrawal management and stabilization services;

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- (f) Inpatient substance use disorder treatment services;
- 1 2
- (g) Inpatient co-occurring disorder treatment services; and
- 3
- (h) Behavioral health crisis walk-in and drop-off services.

(3) Funds in the grant program must be used to reimburse 4 providers for the provision of services to individuals identified in 5 6 subsection (1) of this section. The authority may use the funds to support evidence-based practices and promising practices that are not 7 reimbursed by medical assistance or private insurance, including 8 contingency management. In addition, funds may be used to provide 9 assistance to organizations to establish or expand services 10 as 11 reasonably necessary and feasible to increase the availability of 12 services to achieve the regional access standards developed under subsection (2) of this section, including such items as training and 13 14 recruitment of personnel, reasonable modifications to existing facilities to accommodate additional clients, start-up funding, and 15 16 similar forms of assistance. Funds may not be used to support the ongoing operational costs of a provider or organization, except in 17 18 relation to payments for specific service encounters with an 19 individual identified in subsection (1) of this section or for noninsurance reimbursable services. 20

(4) The authority must establish regional access standards under subsection (2) of this section, subject to the availability of amounts appropriated for this specific purpose, by January 1, 2023, and begin distributing grant funds by March 1, 2023.

25 <u>NEW SECTION.</u> Sec. 4. A new section is added to chapter 71.24 26 RCW to read as follows:

(1) Subject to the availability of amounts appropriated for this
specific purpose, the authority shall establish the expanded recovery
support services program to increase access to recovery services for
individuals in recovery from substance use disorder.

31 (2) In establishing the program, the authority shall consult with the substance use recovery services advisory committee established in 32 section 1 of this act, behavioral health administrative services 33 organizations, regional behavioral health providers, and regional 34 35 community organizations that support individuals in recovery from substance use disorders, including individuals with co-occurring 36 substance use disorders and mental health conditions, to adopt 37 38 regional expanded recovery plans that are consistent with the 39 substance use recovery services plan developed under section 1 of

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1 this act to provide sufficient access for youth and adults to meet 2 each region's needs for:

(a) Recovery housing; 3

(b) Employment pathways, support, training, and job placement, 4 including evidence-based supported employment program services; 5

(c) Education pathways, including recovery high schools and 6 7 collegiate recovery programs;

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(d) Recovery coaching and substance use disorder peer support;

(e) Social connectedness initiatives, including the recovery café 9 model; 10

11 (f) Family support services, including family reconciliation services; 12

13 (g) Technology-based recovery support services;

(h) Transportation assistance; and 14

(i) Legal support services. 15

(3) Funds in the expanded recovery support services program must 16 17 be used to reimburse providers for the provision of services to individuals in recovery from substance use disorders, including 18 individuals with co-occurring substance use disorders and mental 19 health conditions. In addition, the funds may be used to provide 20 21 assistance to organizations to establish or expand recovery support services as reasonably necessary and feasible to increase the 22 availability of services to achieve the regional expanded recovery 23 plans developed under subsection (2) of this section, including such 24 25 items as training and recruitment of personnel, reasonable modifications to existing facilities to accommodate additional 26 clients, and similar forms of assistance. 27

(4) The authority must establish regional expanded recovery plans 28 29 under subsection (2) of this section, subject to the availability of amounts appropriated for this specific purpose, by January 1, 2023, 30 31 and begin distributing grant funds by March 1, 2023.

32 NEW SECTION. Sec. 5. A new section is added to chapter 71.24 RCW to read as follows: 33

(1) Subject to the availability of amounts appropriated for this 34 35 specific purpose, the authority shall establish a homeless outreach 36 stabilization transition program to expand access to modified assertive community treatment services provided by multidisciplinary 37 behavioral health outreach teams to serve people who are living with 38 serious substance use disorders or co-occurring substance use 39 5476.E AMH ENGR H1622.E

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1 disorders and mental health conditions, are experiencing 2 homelessness, and whose severity of behavioral health symptom acuity 3 level creates a barrier to accessing and receiving conventional 4 behavioral health services and outreach models.

5 (a) In establishing the program, the authority shall consult with 6 behavioral health outreach organizations who have experience 7 delivering this service model in order to establish program 8 guidelines regarding multidisciplinary team staff types, service 9 intensity and quality fidelity standards, and criteria to ensure 10 programs are reaching the appropriate priority population.

(b) Funds for the homeless outreach stabilization transition 11 12 program must be used to reimburse organizations for the provision of multidisciplinary outreach services to individuals who are living 13 with substance use disorders or co-occurring substance use and mental 14 health disorders and are experiencing homelessness or transitioning 15 16 from homelessness to housing. The funds may be used to provide 17 assistance to organizations to establish or expand services as reasonably necessary to create a homeless outreach stabilization 18 transition program, including items such as training and recruitment 19 of personnel, outreach and engagement resources, client engagement 20 21 and health supplies, medications for people who do not have access to insurance, and similar forms of assistance. 22

(c) The authority must establish one or more homeless outreach stabilization transition programs by January 1, 2024, and begin distributing grant funds by March 1, 2024.

(2) Subject to the availability of amounts appropriated for this
specific purpose, the authority shall establish a project for
psychiatric outreach to the homeless program to expand access to
behavioral health medical services for people who are experiencing
homelessness and living in permanent supportive housing.

(a) In establishing the program, the authority shall consult with behavioral health medical providers, homeless service providers, and permanent supportive housing providers that support people living with substance use disorders, co-occurring substance use and mental health conditions, and people who are currently or have formerly experienced homelessness.

37 (b) Funds for the project for psychiatric outreach to the 38 homeless program must be used to reimburse organizations for the 39 provision of medical services to individuals who are living with or 40 in recovery from substance use disorders, co-occurring substance use

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1 and mental health disorders, or other behavioral and physical health conditions. Organizations must provide medical services to people who 2 are experiencing homelessness or are living in permanent supportive 3 housing and would be at risk of homelessness without access to 4 appropriate services. The funds may be used to provide assistance to 5 6 organizations to establish or expand behavioral health medical services as reasonably necessary to create a project for psychiatric 7 outreach to the homeless program, including items such as training 8 and recruitment of personnel, outreach and engagement resources, 9 medical equipment and health supplies, medications for people who do 10 not have access to insurance, and similar forms of assistance. 11

12 (c) The authority must establish one or more projects for 13 psychiatric outreach to the homeless programs by January 1, 2024, and 14 begin distributing grant funds by March 1, 2024.

(3) Subject to the availability of amounts appropriated for this specific purpose, the authority shall increase contingency management resources for opioid treatment networks that are serving people living with co-occurring stimulant use and opioid use disorder.

(4) Subject to the availability of amounts appropriated for this specific purpose, the authority shall develop a plan for implementing a comprehensive statewide substance misuse prevention effort. The plan must be completed by January 1, 2024.

(5) Subject to the availability of amounts appropriated for this 23 specific purpose, the authority shall administer a competitive grant 24 25 process to broaden existing local community coalition efforts to prevent substance misuse by increasing relevant protective factors 26 while decreasing risk factors. Coalitions are to be open to all 27 28 stakeholders interested in substance misuse prevention, including, but not limited to, representatives from people in recovery, law 29 enforcement, education, behavioral health, parent organizations, 30 31 treatment organizations, organizations serving youth, prevention 32 professionals, and business.

33 Sec. 6. RCW 10.31.110 and 2019 c 326 s 3 and 2019 c 325 s 5004 34 are each reenacted and amended to read as follows:

35 (1) When a police officer has reasonable cause to believe that 36 the individual has committed acts constituting a crime, and the 37 individual is known by history or consultation with the behavioral 38 health administrative services organization, managed care 39 organization, ((behavioral health administrative services

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1 organization,)) crisis hotline, ((or)) local crisis services 2 providers, or community health providers to ((suffer from)) have a 3 mental disorder or substance use disorder, in addition to existing 4 authority under state law or local policy, as an alternative to 5 arrest, the arresting officer is authorized and encouraged to:

6 (a) Take the individual to a crisis stabilization unit as defined 7 in RCW 71.05.020. Individuals delivered to a crisis stabilization 8 unit pursuant to this section may be held by the facility for a 9 period of up to twelve hours. The individual must be examined by a 10 mental health professional <u>or substance use disorder professional</u> 11 within three hours of arrival;

12 (b) Take the individual to a triage facility as defined in RCW 13 71.05.020. An individual delivered to a triage facility which has 14 elected to operate as an involuntary facility may be held up to a 15 period of twelve hours. The individual must be examined by a mental 16 health professional <u>or substance use disorder professional</u> within 17 three hours of arrival;

18 (c) Refer the individual to a ((mental health professional)) 19 <u>designated crisis responder</u> for evaluation for initial detention and 20 proceeding under chapter 71.05 RCW; ((or))

21 (d) Release the individual upon agreement to voluntary 22 participation in outpatient treatment;

23 (e) Refer the individual to youth, adult, or geriatric mobile
24 crisis response services, as appropriate; or

25 (f) Refer the individual to the regional entity responsible to 26 receive referrals in lieu of legal system involvement, including the 27 recovery navigator program described in section 2 of this act.

(2) If the individual is released to the community from the facilities in subsection (1)(a) through (c) of this section, the mental health provider or substance use disorder professional shall make reasonable efforts to inform the arresting officer of the planned release prior to release if the arresting officer has specifically requested notification and provided contact information to the provider.

(3) In deciding whether to refer the individual to treatment under this section, the police officer must be guided by local law enforcement diversion guidelines for behavioral health developed and mutually agreed upon with the prosecuting authority with an opportunity for consultation and comment by the defense bar and disability community. These guidelines must address, at a minimum,

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1 the length, seriousness, and recency of the known criminal history of the individual, the mental health history of the individual, 2 if available, the substance use disorder history of the individual, if 3 available, the opinions of a mental health professional, if 4 available, the opinions of a substance use disorder professional, if 5 6 available, and the circumstances surrounding the commission of the alleged offense. The guidelines must include a process for clearing 7 outstanding warrants or referring the individual for assistance in 8 clearing outstanding warrants, if any, and issuing a new court date, 9 if appropriate, without booking or incarcerating the individual or 10 disqualifying ((him or her)) the individual from referral 11 to treatment under this section, and define the circumstances under 12 which such action is permissible. Referrals to services, care, and 13 treatment for substance use disorder must be made in accordance with 14 protocols developed for the recovery navigator program described in 15 16 section 2 of this act.

17 (4) Any agreement to participate in treatment or services in lieu of jail booking or referring a case for prosecution shall not require 18 19 individuals to stipulate to any of the alleged facts regarding the criminal activity as a prerequisite to participation in ((a mental 20 21 health treatment)) the alternative response described in this 22 section. ((The)) Any agreement is inadmissible in any criminal or 23 civil proceeding. ((The agreement does)) Such agreements do not create immunity from prosecution for the alleged criminal activity. 24

(5) If ((an individual violates such agreement and the mental health treatment alternative is no longer appropriate)) there are required terms of participation in the services or treatment to which an individual was referred under this section, and if the individual violates such terms and is therefore no longer participating in services:

(a) The ((mental health)) <u>behavioral health or service</u> provider
 shall inform the referring law enforcement agency of the violation,
 <u>if consistent with the terms of the program and applicable law</u>; and

(b) The original charges may be filed or referred to the
prosecutor, as appropriate, and the matter may proceed accordingly,
<u>unless filing or referring the charges is inconsistent with the terms</u>
<u>of a local diversion program or a recovery navigator program</u>
<u>described in section 2 of this act</u>.

39 (6) The police officer is immune from liability for any good 40 faith conduct under this section.

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1NEW SECTION.Sec. 7.A new section is added to chapter 43.1012RCW to read as follows:

3 (1) Beginning July 1, 2022, all law enforcement personnel required to complete basic law enforcement training under RCW 4 43.101.200 must receive training on law enforcement interaction with 5 6 persons with substance use disorders, including persons with cooccurring substance use disorders and mental health conditions, and 7 referral to treatment and recovery services and the unique referral 8 processes for youth, as part of the basic law enforcement training. 9 The training must be developed by the commission in collaboration 10 11 with the University of Washington behavioral health institute and agencies that have expertise in the area of working with persons with 12 substance use disorders, including law enforcement diversion of such 13 individuals to community-based care. In developing the training, the 14 commission must also examine existing courses certified by the 15 16 commission that relate to persons with a substance use disorder, and 17 should draw on existing training partnerships with the Washington association of sheriffs and police chiefs. 18

19 (2) The training must consist of classroom instruction or 20 internet instruction and shall replicate likely field situations to 21 the maximum extent possible. The training should include, at a 22 minimum, core instruction in all of the following:

(a) Proper procedures for referring persons to the recoverynavigator program in accordance with section 2 of this act;

(b) The etiology of substance use disorders, including the role of trauma;

(c) Barriers to treatment engagement experienced by many withsuch disorders who have contact with the legal system;

(d) How to identify indicators of substance use disorder and how
 to respond appropriately in a variety of common situations;

31 (e) Conflict resolution and de-escalation techniques for 32 potentially dangerous situations involving persons with a substance 33 use disorder;

34 (f) Appropriate language usage when interacting with persons with 35 a substance use disorder;

36 (g) Alternatives to lethal force when interacting with 37 potentially dangerous persons with a substance use disorder;

38 (h) The principles of recovery and the multiple pathways to 39 recovery; and 1 (i) Community and state resources available to serve persons with 2 substance use disorders and how these resources can be best used by 3 law enforcement to support persons with a substance use disorder in 4 their communities.

5 (3) In addition to incorporation into the basic law enforcement 6 training under RCW 43.101.200, training must be made available to law 7 enforcement agencies, through electronic means, for use during in-8 service training.

9 Sec. 8. RCW 69.50.4011 and 2003 c 53 s 332 are each amended to 10 read as follows:

11 (1) Except as authorized by this chapter, it is unlawful for 12 ((any)):

13 (a) Any person to create((τ)) or deliver($(\tau - \tau)$ or possess)) a 14 counterfeit substance; or

15 (b) Any person to knowingly possess a counterfeit substance.

16 (2) Any person who violates <u>subsection (1)(a) of</u> this section 17 with respect to:

(a) A counterfeit substance classified in Schedule I or II which is a narcotic drug, or flunitrazepam classified in Schedule IV, is guilty of a class B felony and upon conviction may be imprisoned for not more than ten years, fined not more than twenty-five thousand dollars, or both;

(b) A counterfeit substance which is methamphetamine, is guilty of a class B felony and upon conviction may be imprisoned for not more than ten years, fined not more than twenty-five thousand dollars, or both;

(c) Any other counterfeit substance classified in Schedule I, II,
 or III, is guilty of a class C felony punishable according to chapter
 9A.20 RCW;

30 (d) A counterfeit substance classified in Schedule IV, except
 31 flunitrazepam, is guilty of a class C felony punishable according to
 32 chapter 9A.20 RCW;

33 (e) A counterfeit substance classified in Schedule V, is guilty34 of a class C felony punishable according to chapter 9A.20 RCW.

35 <u>(3) A violation of subsection (1)(b) of this section is a</u> 36 <u>misdemeanor. The prosecutor is encouraged to divert such cases for</u> 37 <u>assessment, treatment, or other services.</u> 1 Sec. 9. RCW 69.50.4013 and 2017 c 317 s 15 are each amended to 2 read as follows:

3 (1) It is unlawful for any person to <u>knowingly</u> possess a 4 controlled substance unless the substance was obtained directly from, 5 or pursuant to, a valid prescription or order of a practitioner while 6 acting in the course of his or her professional practice, or except 7 as otherwise authorized by this chapter.

8 (2) Except as provided in RCW 69.50.4014, any person who violates
 9 this section is guilty of a ((class C felony punishable under chapter
 10 9A.20 RCW)) misdemeanor.

11 (3) <u>The prosecutor is encouraged to divert cases under this</u> 12 <u>section for assessment, treatment, or other services.</u>

13 <u>(4)</u>(a) The possession, by a person twenty-one years of age or 14 older, of useable marijuana, marijuana concentrates, or marijuana-15 infused products in amounts that do not exceed those set forth in RCW 16 69.50.360(3) is not a violation of this section, this chapter, or any 17 other provision of Washington state law.

(b) The possession of marijuana, useable marijuana, marijuana 18 concentrates, and marijuana-infused products being physically 19 transported or delivered within the state, in amounts not exceeding 20 21 those that may be established under RCW 69.50.385(3), by a licensed employee of a common carrier when performing the duties authorized in 22 accordance with RCW 69.50.382 and 69.50.385, is not a violation of 23 24 this section, this chapter, or any other provision of Washington 25 state law.

26 (((4))) (5)(a) The delivery by a person twenty-one years of age 27 or older to one or more persons twenty-one years of age or older, 28 during a single twenty-four hour period, for noncommercial purposes 29 and not conditioned upon or done in connection with the provision or 30 receipt of financial consideration, of any of the following marijuana 31 products, is not a violation of this section, this chapter, or any 32 other provisions of Washington state law:

33

(i) One-half ounce of useable marijuana;

34 (ii) Eight ounces of marijuana-infused product in solid form;

35 (iii) Thirty-six ounces of marijuana-infused product in liquid 36 form; or

37 (iv) Three and one-half grams of marijuana concentrates.

(b) The act of delivering marijuana or a marijuana product as authorized under this subsection (((+))) <u>(5)</u> must meet one of the following requirements:

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(i) The delivery must be done in a location outside of the view
 of general public and in a nonpublic place; or

3 (ii) The marijuana or marijuana product must be in the original 4 packaging as purchased from the marijuana retailer.

5 (((5))) <u>(6)</u> No person under twenty-one years of age may possess, 6 manufacture, sell, or distribute marijuana, marijuana-infused 7 products, or marijuana concentrates, regardless of THC concentration. 8 This does not include qualifying patients with a valid authorization.

9 (((6))) <u>(7)</u> The possession by a qualifying patient or designated 10 provider of marijuana concentrates, useable marijuana, marijuana-11 infused products, or plants in accordance with chapter 69.51A RCW is 12 not a violation of this section, this chapter, or any other provision 13 of Washington state law.

Sec. 10. RCW 69.50.4014 and 2015 2nd sp.s. c 4 s 505 are each 14 15 amended to read as follows: as provided in RCW 69.50.401(2)(c) or as 16 Except otherwise 17 authorized by this chapter, any person found guilty of knowing possession of forty grams or less of marijuana is guilty of a 18 misdemeanor. The prosecutor is encouraged to divert cases under this 19 section for assessment, treatment, or other services. 20

21 Sec. 11. RCW 69.41.030 and 2019 c 55 s 9 are each amended to 22 read as follows:

23 (1) It shall be unlawful for any person to sell, deliver, or 24 knowingly possess any legend drug except upon the order or prescription of a physician under chapter 18.71 RCW, an osteopathic 25 physician and surgeon under chapter 18.57 RCW, an optometrist 26 licensed under chapter 18.53 RCW who is certified by the optometry 27 board under RCW 18.53.010, a dentist under chapter 18.32 RCW, a 28 29 podiatric physician and surgeon under chapter 18.22 RCW, а veterinarian under chapter 18.92 RCW, a commissioned medical or 30 dental officer in the United States armed forces or public health 31 service in the discharge of his or her official duties, a duly 32 licensed physician or dentist employed by the veterans administration 33 in the discharge of his or her official duties, a registered nurse or 34 advanced registered nurse practitioner under chapter 18.79 RCW when 35 authorized by the nursing care quality assurance commission, 36 а pharmacist licensed under chapter 18.64 RCW to the extent permitted 37 by drug therapy guidelines or protocols established under RCW 38 Official Print - 18 5476.E AMH ENGR H1622.E

1 18.64.011 and authorized by the commission and approved by a practitioner authorized to prescribe drugs, an osteopathic physician 2 assistant under chapter 18.57A RCW when authorized by the board of 3 osteopathic medicine and surgery, a physician assistant under chapter 4 18.71A RCW when authorized by the Washington medical commission, or 5 6 any of the following professionals in any province of Canada that shares a common border with the state of Washington or in any state 7 of the United States: A physician licensed to practice medicine and 8 surgery or a physician licensed to practice osteopathic medicine and 9 surgery, a dentist licensed to practice dentistry, a podiatric 10 11 physician and surgeon licensed to practice podiatric medicine and 12 surgery, a licensed advanced registered nurse practitioner, a licensed physician assistant, a licensed osteopathic physician 13 assistant, or a veterinarian licensed to practice veterinary 14 medicine: PROVIDED, HOWEVER, That the above provisions shall not 15 16 apply to sale, delivery, or possession by drug wholesalers or drug 17 manufacturers, or their agents or employees, or to any practitioner acting within the scope of his or her license, or to a common or 18 contract carrier or warehouse operator, or any employee thereof, 19 whose possession of any legend drug is in the usual course of 20 21 business or employment: PROVIDED FURTHER, That nothing in this chapter or chapter 18.64 RCW shall prevent a family planning clinic 22 23 that is under contract with the health care authority from selling, delivering, possessing, and dispensing commercially prepackaged oral 24 25 contraceptives prescribed by authorized, licensed health care 26 practitioners: PROVIDED FURTHER, That nothing in this chapter prohibits possession or delivery of legend drugs by an authorized 27 28 collector or other person participating in the operation of a drug 29 take-back program authorized in chapter 69.48 RCW.

30 (2)(a) A violation of this section involving the sale, delivery,
 31 or possession with intent to sell or deliver is a class B felony
 32 punishable according to chapter 9A.20 RCW.

33 (b) A violation of this section involving possession is a
 34 misdemeanor. <u>The prosecutor is encouraged to divert such cases for</u>
 35 <u>assessment, treatment, or other services.</u>

36 Sec. 12. RCW 69.41.030 and 2020 c 80 s 41 are each amended to 37 read as follows:

38 (1) It shall be unlawful for any person to sell, deliver, or 39 <u>knowingly</u> possess any legend drug except upon the order or Official Print - 19 5476.E AMH ENGR H1622.E

1 prescription of a physician under chapter 18.71 RCW, an osteopathic physician and surgeon under chapter 18.57 RCW, an optometrist 2 licensed under chapter 18.53 RCW who is certified by the optometry 3 board under RCW 18.53.010, a dentist under chapter 18.32 RCW, a 4 podiatric physician and surgeon under chapter 18.22 RCW, 5 а 6 veterinarian under chapter 18.92 RCW, a commissioned medical or dental officer in the United States armed forces or public health 7 service in the discharge of his or her official duties, a duly 8 licensed physician or dentist employed by the veterans administration 9 in the discharge of his or her official duties, a registered nurse or 10 11 advanced registered nurse practitioner under chapter 18.79 RCW when 12 authorized by the nursing care quality assurance commission, a pharmacist licensed under chapter 18.64 RCW to the extent permitted 13 14 by drug therapy guidelines or protocols established under RCW 18.64.011 and authorized by the commission and approved by a 15 16 practitioner authorized to prescribe drugs, a physician assistant 17 under chapter 18.71A RCW when authorized by the Washington medical commission, or any of the following professionals in any province of 18 19 Canada that shares a common border with the state of Washington or in any state of the United States: A physician licensed to practice 20 21 medicine and surgery or a physician licensed to practice osteopathic 22 medicine and surgery, a dentist licensed to practice dentistry, a 23 podiatric physician and surgeon licensed to practice podiatric licensed advanced registered 24 medicine and surgery, a nurse 25 practitioner, a licensed physician assistant, or a veterinarian 26 licensed to practice veterinary medicine: PROVIDED, HOWEVER, That the above provisions shall not apply to sale, delivery, or possession by 27 drug wholesalers or drug manufacturers, or their agents or employees, 28 or to any practitioner acting within the scope of his or her license, 29 or to a common or contract carrier or warehouse operator, or any 30 31 employee thereof, whose possession of any legend drug is in the usual 32 course of business or employment: PROVIDED FURTHER, That nothing in this chapter or chapter 18.64 RCW shall prevent a family planning 33 clinic that is under contract with the health care authority from 34 selling, delivering, possessing, and dispensing commercially 35 prepackaged oral contraceptives prescribed by authorized, licensed 36 health care practitioners: PROVIDED FURTHER, That nothing in this 37 chapter prohibits possession or delivery of legend drugs by an 38 39 authorized collector or other person participating in the operation 40 of a drug take-back program authorized in chapter 69.48 RCW.

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(2) (a) A violation of this section involving the sale, delivery,
 or possession with intent to sell or deliver is a class B felony
 punishable according to chapter 9A.20 RCW.

4 (b) A violation of this section involving possession is a 5 misdemeanor. <u>The prosecutor is encouraged to divert such cases for</u> 6 assessment, treatment, or other services.

7 <u>NEW SECTION.</u> Sec. 13. A new section is added to chapter 10.31 8 RCW to read as follows:

(1) For all individuals who otherwise would be subject to arrest 9 for possession of a counterfeit substance under RCW 69.50.4011, 10 possession of a controlled substance under RCW 69.50.4013, possession 11 of 40 grams or less of marijuana under RCW 69.50.4014, or possession 12 of a legend drug under RCW 69.41.030(2)(b), in lieu of jail booking 13 and referral to the prosecutor, law enforcement shall offer a 14 15 referral to assessment and services available pursuant to RCW 10.31.110 or other program or entity responsible for receiving 16 17 referrals in lieu of legal system involvement, which may include the recovery navigator program established under section 2 of this act. 18

19 (2) If law enforcement agency records reflect that an individual 20 has been diverted to referral for assessment and services twice or 21 more previously, officers may, but are not required to, make 22 additional diversion efforts.

(3) Nothing in this section precludes prosecutors from diverting
or declining to file any charges for possession offenses that are
referred under RCW 69.50.4011, 69.50.4013, 69.50.4014, or
69.41.030(2)(b) in the exercise of their discretion.

27 Sec. 14. RCW 69.50.412 and 2019 c 64 s 22 are each amended to 28 read as follows:

(1) It is unlawful for any person to use drug paraphernalia to plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, <u>or prepare((, test, analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body)) a controlled substance other than marijuana. Any person who violates this subsection is guilty of a misdemeanor.</u>

(2) It is unlawful for any person to deliver, possess with intent
 to deliver, or manufacture with intent to deliver drug paraphernalia,
 knowing, or under circumstances where one reasonably should know,

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that it will be used to plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, <u>or</u> prepare((, test, analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body)) a controlled substance other than marijuana. Any person who violates this subsection is guilty of a misdemeanor.

7 (3) Any person eighteen years of age or over who violates 8 subsection (2) of this section by delivering drug paraphernalia to a 9 person under eighteen years of age who is at least three years his or 10 her junior is guilty of a gross misdemeanor.

(4) It is unlawful for any person to place in any newspaper, magazine, handbill, or other publication any advertisement, knowing, or under circumstances where one reasonably should know, that the purpose of the advertisement, in whole or in part, is to promote the sale of objects designed or intended for use as drug paraphernalia. Any person who violates this subsection is guilty of a misdemeanor.

17 (5) It is lawful for any person over the age of eighteen to 18 possess sterile hypodermic syringes and needles for the purpose of 19 reducing blood-borne diseases.

20 Sec. 15. RCW 9.94A.518 and 2003 c 53 s 57 are each amended to 21 read as follows:

22	TABLE 4
23	DRUG OFFENSES
24	INCLUDED WITHIN EACH
25	SERIOUSNESS LEVEL
26	III Any felony offense under chapter
27	69.50 RCW with a deadly weapon
28	special verdict under RCW
29	((9.94A.602)) <u>9.94A.825</u>
30	Controlled Substance Homicide (RCW
31	69.50.415)
32	Delivery of imitation controlled
33	substance by person eighteen or
34	over to person under eighteen
35	(RCW 69.52.030(2))
36	Involving a minor in drug dealing
37	(RCW 69.50.4015)

1	Manufacture of methamphetamine
2	(RCW 69.50.401(2)(b))
3	Over 18 and deliver heroin,
4	methamphetamine, a narcotic from
5	Schedule I or II, or flunitrazepam
6	from Schedule IV to someone
7	under 18 (RCW 69.50.406)
8	Over 18 and deliver narcotic from
9	Schedule III, IV, or V or a
10	nonnarcotic, except flunitrazepam
11	or methamphetamine, from
12	Schedule I-V to someone under 18
13	and 3 years junior (RCW
14	69.50.406)
15	Possession of Ephedrine,
16	Pseudoephedrine, or Anhydrous
17	Ammonia with intent to
18	manufacture methamphetamine
19	(RCW 69.50.440)
20	Selling for profit (controlled or
21	counterfeit) any controlled
22	substance (RCW 69.50.410)
23	II Create((,)) <u>or</u> deliver((, or possess)) a
24	counterfeit controlled substance
25	(RCW 69.50.4011 <u>(1)(a)</u>)
26	Deliver or possess with intent to
27	deliver methamphetamine (RCW
28	69.50.401(2)(b))
29	Delivery of a material in lieu of a
30	controlled substance (RCW
31	69.50.4012)
32	Maintaining a Dwelling or Place for
33	Controlled Substances (RCW
34	69.50.402(1)(f))
35	Manufacture, deliver, or possess with
36	intent to deliver amphetamine
37	(RCW 69.50.401(2)(b))

1	Manufacture, deliver, or possess with
2	intent to deliver narcotics from
3	Schedule I or II or flunitrazepam
4	from Schedule IV (RCW
5	69.50.401(2)(a))
6	Manufacture, deliver, or possess with
7	intent to deliver narcotics from
8	Schedule III, IV, or V or
9	nonnarcotics from Schedule I-V
10	(except marijuana, amphetamine,
11	methamphetamines, or
12	flunitrazepam) (RCW
13	69.50.401(2) (c) through (e))
14	Manufacture, distribute, or possess
15	with intent to distribute an
16	imitation controlled substance
17	(RCW 69.52.030(1))
18	I Forged Prescription (RCW 69.41.020)
19	Forged Prescription for a Controlled
20	Substance (RCW 69.50.403)
21	Manufacture, deliver, or possess with
22	intent to deliver marijuana (RCW
23	69.50.401(2)(c))
24	((Possess Controlled Substance that is
25	a Narcotic from Schedule III, IV,
26	or V or Nonnarcotic from
27	Schedule I-V (RCW 69.50.4013)
28	Possession of Controlled Substance
29	that is either heroin or narcotics
30	from Schedule I or II (RCW
31	69.50.4013)))
32	Unlawful Use of Building for Drug
33	Purposes (RCW 69.53.010)
34	Sec. 16. RCW 13.40.0357 and 2020 c 18 s 8 are each amended to
Эч	Sec. IV. New IS. 40.0357 and 2020 C IO S 0 are each dimended to

35 read as follows:

36

DESCRIPTION AND OFFENSE CATEGORY

1		JUVENILE D	ISPOSITION
2	JUVENILE	CAT	EGORY FOR
3	DISPOSITION	ATTEMPT	, BAILJUMP,
4	OFFENSE	CONS	PIRACY, OR
5	CATEGORY	DESCRIPTION (RCW CITATION) SO	LICITATION
6		Arson and Malicious Mischief	
7	А	Arson 1 (9A.48.020)	B+
8	В	Arson 2 (9A.48.030)	С
9	С	Reckless Burning 1 (9A.48.040)	D
10	D	Reckless Burning 2 (9A.48.050)	Е
11	В	Malicious Mischief 1 (9A.48.070)	С
12	С	Malicious Mischief 2 (9A.48.080)	D
13	D	Malicious Mischief 3 (9A.48.090)	E
14	Е	Tampering with Fire Alarm Apparatus	Е
15		(9.40.100)	
16	Е	Tampering with Fire Alarm Apparatus	Е
17		with Intent to Commit Arson (9.40.105)	
18	А	Possession of Incendiary Device	B+
19		(9.40.120)	
20		Assault and Other Crimes Involving	
21		Physical Harm	
22	А	Assault 1 (9A.36.011)	B+
23	B+	Assault 2 (9A.36.021)	C+
24	C+	Assault 3 (9A.36.031)	D+
25	D+	Assault 4 (9A.36.041)	E
26	B+	Drive-By Shooting (9A.36.045)	C+
27		committed at age 15 or under	
28	A++	Drive-By Shooting (9A.36.045)	А
29		committed at age 16 or 17	
30	D+	Reckless Endangerment (9A.36.050)	Е
31	C+	Promoting Suicide Attempt (9A.36.060)	D+
32	D+	Coercion (9A.36.070)	Е
33	C+	Custodial Assault (9A.36.100)	D+
34		Burglary and Trespass	
35	B+	Burglary 1 (9A.52.020) committed at	C+
36		age 15 or under	

1	A-	Burglary 1 (9A.52.020) committed at	B+
2		age 16 or 17	
3	В	Residential Burglary (9A.52.025)	С
4	В	Burglary 2 (9A.52.030)	С
5	D	Burglary Tools (Possession of)	Е
6		(9A.52.060)	
7	D	Criminal Trespass 1 (9A.52.070)	Е
8	Е	Criminal Trespass 2 (9A.52.080)	Е
9	С	Mineral Trespass (78.44.330)	С
10	С	Vehicle Prowling 1 (9A.52.095)	D
11	D	Vehicle Prowling 2 (9A.52.100)	E
12		Drugs	
13	Е	Possession/Consumption of Alcohol	Е
14		(66.44.270)	
15	С	Illegally Obtaining Legend Drug	D
16		(69.41.020)	
17	C+	Sale, Delivery, Possession of Legend	D+
18		Drug with Intent to Sell (69.41.030(2)(a)))
19	Е	Possession of Legend	Е
20		Drug (69.41.030(2)(b))	
21	B+	Violation of Uniform Controlled	B^+
22		Substances Act - Narcotic,	
23		Methamphetamine, or Flunitrazepam	
24		Sale (69.50.401(2) (a) or (b))	
25	С	Violation of Uniform Controlled	С
26		Substances Act - Nonnarcotic Sale	
27		(69.50.401(2)(c))	
28	Е	Possession of Marihuana <40 grams	Е
29		(69.50.4014)	
30	С	Fraudulently Obtaining Controlled	С
31		Substance (69.50.403)	-
32	C+	Sale of Controlled Substance for Profit	C+
33	Б	(69.50.410)	F
34	E	Unlawful Inhalation (9.47A.020)	E

1	В	Violation of Uniform Controlled	В
2		Substances Act - Narcotic,	
3		Methamphetamine, or Flunitrazepam	
4		Counterfeit Substances (69.50.4011(2)	
5		(a) or (b))	
6	С	Violation of Uniform Controlled	С
7		Substances Act - Nonnarcotic Counterfe	it
8		Substances (69.50.4011(2) (c), (d), or (e	
9	((C)) <u>I</u>	E Violation of Uniform Controlled	((C)) <u>E</u>
10		Substances Act - Possession of a	
11		Controlled Substance (69.50.4013)	
12	С	Violation of Uniform Controlled	С
13		Substances Act - Possession of a	
14		Controlled Substance (69.50.4012)	
15		Firearms and Weapons	
16	В	Theft of Firearm (9A.56.300)	С
17	В	Possession of Stolen Firearm	С
18		(9A.56.310)	
19	Е	Carrying Loaded Pistol Without Permit	Е
20		(9.41.050)	
21	С	Possession of Firearms by Minor (<18)	С
22		(9.41.040(2)(a) (vi))	
23	D+	Possession of Dangerous Weapon	E
24		(9.41.250)	
25	D	Intimidating Another Person by use of	Е
26		Weapon (9.41.270)	
27		Homicide	
28	A+	Murder 1 (9A.32.030)	А
29	A+	Murder 2 (9A.32.050)	B+
30	B+	Manslaughter 1 (9A.32.060)	C+
31	C+	Manslaughter 2 (9A.32.070)	D+
32	B+	Vehicular Homicide (46.61.520)	C+
33		Kidnapping	
34	А	Kidnap 1 (9A.40.020)	B+
35	B+	Kidnap 2 (9A.40.030)	C+
36	C+	Unlawful Imprisonment (9A.40.040)	D+
37		Obstructing Governmental Operation	I
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1 2	D	Obstructing a Law Enforcement Officer (9A.76.020)	Ε
3	Е	Resisting Arrest (9A.76.040)	Е
4	В	Introducing Contraband 1 (9A.76.140)	С
5	С	Introducing Contraband 2 (9A.76.150)	D
6	Е	Introducing Contraband 3 (9A.76.160)	Е
7	B+	Intimidating a Public Servant	C+
8		(9A.76.180)	
9	B^+	Intimidating a Witness (9A.72.110)	C+
10		Public Disturbance	
11	C+	Criminal Mischief with Weapon	D+
12		(9A.84.010(2)(b))	
13	D+	Criminal Mischief Without Weapon	Е
14		(9A.84.010(2)(a))	
15	Е	Failure to Disperse (9A.84.020)	Е
16	Е	Disorderly Conduct (9A.84.030)	Е
17		Sex Crimes	
18	А	Rape 1 (9A.44.040)	B+
19	B++	Rape 2 (9A.44.050) committed at age 14	B+
20		or under	
21	A-	Rape 2 (9A.44.050) committed at age 15	B+
22		through age 17	
23	C+	Rape 3 (9A.44.060)	D+
24	B++	Rape of a Child 1 (9A.44.073)	B+
25		committed at age 14 or under	
26	A-	Rape of a Child 1 (9A.44.073)	B+
27		committed at age 15	
28	B+	Rape of a Child 2 (9A.44.076)	C+
29	В	Incest 1 (9A.64.020(1))	С
30	С	Incest 2 (9A.64.020(2))	D
31	D+	Indecent Exposure (Victim <14)	Е
32		(9A.88.010)	
33	Е	Indecent Exposure (Victim 14 or over)	Е
34		(9A.88.010)	
35	B+	Promoting Prostitution 1 (9A.88.070)	C+
36	C+	Promoting Prostitution 2 (9A.88.080)	D+

1	Е	O & A (Prostitution) (9A.88.030)	Е
2	B+	Indecent Liberties (9A.44.100)	C+
3	B++	Child Molestation 1 (9A.44.083)	\mathbf{B}^+
4		committed at age 14 or under	
5	A-	Child Molestation 1 (9A.44.083)	B+
6		committed at age 15 through age 17	
7	В	Child Molestation 2 (9A.44.086)	C+
8	С	Failure to Register as a Sex Offender	D
9		(9A.44.132)	
10		Theft, Robbery, Extortion, and	
11		Forgery	
12	В	Theft 1 (9A.56.030)	С
13	С	Theft 2 (9A.56.040)	D
14	D	Theft 3 (9A.56.050)	Е
15	В	Theft of Livestock 1 and 2 (9A.56.080	С
16		and 9A.56.083)	
17	С	Forgery (9A.60.020)	D
18	А	Robbery 1 (9A.56.200) committed at	B+
19		age 15 or under	
20	A++	Robbery 1 (9A.56.200) committed at	А
21		age 16 or 17	
22	B+	Robbery 2 (9A.56.210)	C+
23	B+	Extortion 1 (9A.56.120)	C+
24	C+	Extortion 2 (9A.56.130)	D+
25	С	Identity Theft 1 (9.35.020(2))	D
26	D	Identity Theft 2 (9.35.020(3))	Е
27	D	Improperly Obtaining Financial	Е
28		Information (9.35.010)	
29	В	Possession of a Stolen Vehicle	С
30		(9A.56.068)	
31	В	Possession of Stolen Property 1	С
32		(9A.56.150)	
33	С	Possession of Stolen Property 2	D
34		(9A.56.160)	
35	D	Possession of Stolen Property 3	Е
36		(9A.56.170)	

1	В	Taking Motor Vehicle Without	С	
2		Permission 1 (9A.56.070)	_	
3	С	Taking Motor Vehicle Without	D	
4	_	Permission 2 (9A.56.075)		
5	В	Theft of a Motor Vehicle (9A.56.065)	С	
6		Motor Vehicle Related Crimes		
7	Е	Driving Without a License (46.20.005)	Е	
8	B^+	Hit and Run - Death (46.52.020(4)(a))	C+	
9	С	Hit and Run - Injury (46.52.020(4)(b))	D	
10	D	Hit and Run-Attended (46.52.020(5))	Е	
11	Е	Hit and Run-Unattended (46.52.010)	Е	
12	С	Vehicular Assault (46.61.522)	D	
13	С	Attempting to Elude Pursuing Police	D	
14		Vehicle (46.61.024)		
15	Е	Reckless Driving (46.61.500)	Е	
16	D	Driving While Under the Influence	Е	
17		(46.61.502 and 46.61.504)		
18	B+	Felony Driving While Under the	В	
19		Influence (46.61.502(6))		
20	B+	Felony Physical Control of a Vehicle	В	
21		While Under the Influence (46.61.504(6))		
22		Other		
23	В	Animal Cruelty 1 (16.52.205)	С	
24	В	Bomb Threat (9.61.160)	С	
25	С	Escape 1 ¹ (9A.76.110)	С	
26	С	Escape 2 ¹ (9A.76.120)	С	
27	D	Escape 3 (9A.76.130)	Е	
28	Е	Obscene, Harassing, Etc., Phone Calls	Е	
29		(9.61.230)		
30	А	Other Offense Equivalent to an Adult	B+	
31		Class A Felony		
32	В	Other Offense Equivalent to an Adult	С	
33		Class B Felony		
34	С	Other Offense Equivalent to an Adult	D	
35		Class C Felony		

1				her Offense Equivalent to	o an Adult E		
2			Gross Misdemeanor				
3	E Other Offense Equivalent to an Adult E						
4	Misdemeanor						
5				olation of Order of Restit			
6 7				mmunity Supervision, or	Confinement		
/			(13	$(3.40.200)^2$			
8				ted Escape 1 a		classed as	C offenses
9	and the stan	dard rar	nge is	established as	s follows:		
10 11	1st esca confinement	ipe or a	attempt	ed escape dur	ing 12-mor	th period	- 28 days
12		ne or a	++omot	ed escape dur	ing 12-mor	th period	- 8 weeks
13	confinement	ipe or e	recempe	ed escape dui	1119 12 11101	ien perioa	0 WCCKD
14		subsequ	uent e	scape or atte	empted esc	ape durinc	g 12-month
15	period - 12	weeks co	onfinem	nent	-		-
16	2 If the cour	t finds	that a	a respondent h	as violate	d terms of	an order,
17	it may impos	e a pena	alty of	up to 30 days	s of confin	nement.	
18			JUVEN	ILE SENTENCING	STANDARDS		
19	This schedul	le must	be us	sed for juven	ile offend	ders. The	court may
20	select sente	ncing op	otion A	A, B, C, or D.			
21					OPTION A		
22	JUVENILE OFFENDER SENTENCING GRID						
23				ST	ANDARD RANC	ĴΈ	
24				129 to 260 wee	ks for all category	A++ offenses	
25		A+		180 weeks to ag	ge 21 for all catego	ory A+ offenses	
26		A		103-129 wee	eks for all category	y A offenses	
27		A-	30-40 w	eeks 52-65 weeks	80-100 weeks	103-129 weeks	103-129 weeks
28		B++	15-36 w	eeks 52-65 weeks	80-100 weeks	103-129 weeks	103-129 weeks
29	CURRENT	B+	15-36 w	eeks 15-36 weeks	52-65 weeks	80-100 weeks	103-129 weeks
30	OFFENSE	В	LS	LS	15-36 weeks	15-36 weeks	52-65 weeks
31	CATEGORY	C+	LS	LS	LS	15-36 weeks	15-36 weeks
32		С	LS	LS	LS	LS	15-36 weeks
33		D+	LS	LS	LS	LS	LS

1		D	LS	LS	LS	LS	LS
2		E	LS	LS	LS	LS	LS
3	PRIOR	-	0	1	2	3	4 or more

4 ADJUDICATIONS

5 NOTE: References in the grid to days or weeks mean periods of 6 confinement. "LS" means "local sanctions" as defined in RCW 7 13.40.020.

8 (1) The vertical axis of the grid is the current offense 9 category. The current offense category is determined by the offense 10 of adjudication.

(2) The horizontal axis of the grid is the number of prior adjudications included in the juvenile's criminal history. Each prior felony adjudication shall count as one point. Each prior violation, misdemeanor, and gross misdemeanor adjudication shall count as 1/4 point. Fractional points shall be rounded down.

16 (3) The standard range disposition for each offense is determined 17 by the intersection of the column defined by the prior adjudications 18 and the row defined by the current offense category.

19 (4) RCW 13.40.180 applies if the offender is being sentenced for 20 more than one offense.

(5) A current offense that is a violation is equivalent to an offense category of E. However, a disposition for a violation shall not include confinement.

24

25

26

OR

OPTION B

SUSPENDED DISPOSITION ALTERNATIVE

27 (1) If the offender is subject to a standard range disposition 28 involving confinement by the department, the court may impose the 29 standard range and suspend the disposition on condition that the 30 offender comply with one or more local sanctions and any educational 31 or treatment requirement. The treatment programs provided to the 32 offender must be either research-based best practice programs as 33 identified by the Washington state institute for public policy or the 34 joint legislative audit and review committee, or for chemical 35 dependency treatment programs or services, they must be evidencebased or research-based best practice programs. For the purposes of 36 37 this subsection:

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1 (a) "Evidence-based" means a program or practice that has had 2 multiple site random controlled trials across heterogeneous 3 populations demonstrating that the program or practice is effective 4 for the population; and

5 (b) "Research-based" means a program or practice that has some 6 research demonstrating effectiveness, but that does not yet meet the 7 standard of evidence-based practices.

8 (2) If the offender fails to comply with the suspended 9 disposition, the court may impose sanctions pursuant to RCW 13.40.200 10 or may revoke the suspended disposition and order the disposition's 11 execution.

12 (3) An offender is ineligible for the suspended disposition13 option under this section if the offender:

14 (a) Is adjudicated of an A+ or A++ offense;

(b) Is fourteen years of age or older and is adjudicated of one or more of the following offenses:

17 (i) A class A offense, or an attempt, conspiracy, or solicitation18 to commit a class A offense;

(ii) Manslaughter in the first degree (RCW 9A.32.060);

(iii) Assault in the second degree (RCW 9A.36.021), extortion in the first degree (RCW 9A.56.120), kidnapping in the second degree (RCW 9A.40.030), drive-by shooting (RCW 9A.36.045), vehicular homicide (RCW 46.61.520), hit and run death (RCW 46.52.020(4)(a)), or manslaughter 2 (RCW 9A.32.070); or

(iv) Violation of the uniform controlled substances act (RCW 69.50.401(2) (a) and (b)), when the offense includes infliction of bodily harm upon another or when during the commission or immediate withdrawal from the offense the respondent was armed with a deadly weapon;

30 (c) Is ordered to serve a disposition for a firearm violation 31 under RCW 13.40.193;

32 (d) Is adjudicated of a sex offense as defined in RCW 9.94A.030; 33 or

(e) Has a prior option B disposition.

34

19

35

36 37

OPTION C

OR

CHEMICAL DEPENDENCY/MENTAL HEALTH DISPOSITION ALTERNATIVE

38 If the juvenile offender is subject to a standard range 39 disposition of local sanctions or 15 to 36 weeks of confinement and Official Print - 33 5476.E AMH ENGR H1622.E

1	has not committed a B++ or B+ offense, the court may impose a
2	disposition under RCW 13.40.160(4) and 13.40.165.
3	OR
4	OPTION D

5

MANIFEST INJUSTICE

6 If the court determines that a disposition under option A, B, or C 7 would effectuate a manifest injustice, the court shall impose a 8 disposition outside the standard range under RCW 13.40.160(2).

9 Sec. 17. RCW 2.24.010 and 2013 c 27 s 3 are each amended to read 10 as follows:

(1) There may be appointed in each county or judicial district, by the judges of the superior court having jurisdiction therein, one or more court commissioners for said county or judicial district. Each such commissioner shall be a citizen of the United States and shall hold the office during the pleasure of the judges making the appointment.

(2) (a) There may be appointed in counties with a population of 17 more than four hundred thousand, by the presiding judge of the 18 19 superior court having jurisdiction therein, one or more attorneys to as criminal commissioners to assist the superior court 20 act in 21 disposing of adult criminal cases. Such criminal commissioners shall 22 have power, authority, and jurisdiction, concurrent with the superior 23 court and the judges thereof, in adult criminal cases, to preside 24 over arraignments, preliminary appearances, initial extradition 25 hearings, and noncompliance proceedings pursuant to RCW 9.94A.6333 or 26 9.94B.040; accept pleas if authorized by local court rules; appoint 27 counsel; make determinations of probable cause; set, amend, and review conditions of pretrial release; set bail; set trial and 28 29 hearing dates; authorize continuances; accept waivers of the right to speedy trial; and authorize and issue search warrants and orders to 30 intercept, monitor, or record wired or wireless telecommunications or 31 for the installation of electronic taps or other devices to include, 32 33 but not be limited to, vehicle global positioning system or other 34 mobile tracking devices with all the powers conferred upon the judge 35 of the superior court in such matters.

(b) <u>Criminal commissioners shall also have the authority to</u>
 <u>conduct resentencing hearings and to vacate convictions related to</u>
 <u>State v. Blake</u>, No. 96873-0 (Feb. 25, 2021). Criminal commissioners

1 <u>may be appointed for this purpose regardless of the population of the</u> 2 county served by the appointing court.

3 <u>(c)</u> The county legislative authority must approve the creation of 4 criminal commissioner positions.

5 Sec. 18. RCW 2.24.040 and 2009 c 28 s 1 are each amended to read 6 as follows:

Such court commissioner shall have power, authority, and jurisdiction, concurrent with the superior court and the judge thereof, in the following particulars:

10 (1) To hear and determine all matters in probate, to make and 11 issue all proper orders therein, and to issue citations in all cases 12 where same are authorized by the probate statutes of this state.

(2) To grant and enter defaults and enter judgment thereon.

13

14 (3) To issue temporary restraining orders and temporary 15 injunctions, and to fix and approve bonds thereon.

16 (4) To act as referee in all matters and actions referred to him 17 or her by the superior court as such, with all the powers now 18 conferred upon referees by law.

19 (5) To hear and determine all proceedings supplemental to 20 execution, with all the powers conferred upon the judge of the 21 superior court in such matters.

(6) To hear and determine all petitions for the adoption ofchildren and for the dissolution of incorporations.

(7) To hear and determine all applications for the commitment of any person to the hospital for the insane, with all the powers of the superior court in such matters: PROVIDED, That in cases where a jury is demanded, same shall be referred to the superior court for trial.

(8) To hear and determine all complaints for the commitments of minors with all powers conferred upon the superior court in such matters.

31 (9) To hear and determine ex parte and uncontested civil matters 32 of any nature.

(10) To grant adjournments, administer oaths, preserve order, compel attendance of witnesses, and to punish for contempts in the refusal to obey or the neglect of the court commissioner's lawful orders made in any matter before the court commissioner as fully as the judge of the superior court. 1 (11) To take acknowledgments and proofs of deeds, mortgages and 2 all other instruments requiring acknowledgment under the laws of this 3 state, and to take affidavits and depositions in all cases.

4 (12) To provide an official seal, upon which shall be engraved 5 the words "Court Commissioner," and the name of the county for which 6 he or she may be appointed, and to authenticate his official acts 7 therewith in all cases where same is necessary.

8 (13) To charge and collect, for his or her own use, the same fees 9 for the official performance of official acts mentioned in 10 subsections (4) and (11) of this section as are provided by law for 11 referees and notaries public.

12 (14) To hear and determine small claims appeals as provided in 13 chapter 12.36 RCW.

14 (15) In adult criminal cases, to preside over arraignments, preliminary appearances, initial extradition hearings, and 15 noncompliance proceedings pursuant to RCW 9.94A.6333 or 9.94B.040; 16 17 accept pleas if authorized by local court rules; appoint counsel; make determinations of probable cause; set, amend, and review 18 conditions of pretrial release; set bail; set trial and hearing 19 dates; authorize continuances; ((and)) accept waivers of the right to 20 speedy trial; and conduct resentencing hearings and hearings to 21 vacate convictions related to State v. Blake, No. 96873-0 (Feb. 25, 22 23 2021).

24 Sec. 19. RCW 9.94A.728 and 2018 c 166 s 2 are each amended to 25 read as follows:

(1) No person serving a sentence imposed pursuant to this chapter and committed to the custody of the department shall leave the confines of the correctional facility or be released prior to the expiration of the sentence except as follows:

30 (a) An offender may earn early release time as authorized by RCW31 9.94A.729;

32 (b) An offender may leave a correctional facility pursuant to an 33 authorized furlough or leave of absence. In addition, offenders may 34 leave a correctional facility when in the custody of a corrections 35 officer or officers;

36 (c)(i) The secretary may authorize an extraordinary medical 37 placement for an offender when all of the following conditions exist:

(A) The offender has a medical condition that is serious and isexpected to require costly care or treatment;

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1 (B) The offender poses a low risk to the community because he or 2 she is currently physically incapacitated due to age or the medical 3 condition or is expected to be so at the time of release; and

4 (C) It is expected that granting the extraordinary medical 5 placement will result in a cost savings to the state.

6 (ii) An offender sentenced to death or to life imprisonment 7 without the possibility of release or parole is not eligible for an 8 extraordinary medical placement.

(iii) The secretary shall require electronic monitoring for all 9 offenders in extraordinary medical placement unless the electronic 10 monitoring equipment interferes with the function of the offender's 11 12 medical equipment or results in the loss of funding for the offender's medical care, in which case, an alternative type of 13 monitoring shall be utilized. The secretary shall specify who shall 14 provide the monitoring services and the terms under which the 15 16 monitoring shall be performed.

17 (iv) The secretary may revoke an extraordinary medical placement 18 under this subsection (1)(c) at any time.

19 (v) Persistent offenders are not eligible for extraordinary 20 medical placement;

(d) The governor, upon recommendation from the clemency and pardons board, may grant an extraordinary release for reasons of serious health problems, senility, advanced age, extraordinary meritorious acts, or other extraordinary circumstances;

(e) No more than the final twelve months of the offender's term of confinement may be served in partial confinement for aiding the offender with: Finding work as part of the work release program under chapter 72.65 RCW; or reestablishing himself or herself in the community as part of the parenting program in RCW 9.94A.6551. This is in addition to that period of earned early release time that may be exchanged for partial confinement pursuant to RCW 9.94A.729(5)(d);

32 (f) No more than the final six months of the offender's term of 33 confinement may be served in partial confinement as home detention as 34 part of the graduated reentry program developed by the department 35 under RCW 9.94A.733;

36 (g) The governor may pardon any offender;

37 (h) The department may release an offender from confinement any 38 time within ten days before a release date calculated under this 39 section; 1 (i) An offender may leave a correctional facility prior to 2 completion of his or her sentence if the sentence has been reduced as 3 provided in RCW 9.94A.870;

4 (j) Notwithstanding any other provisions of this section, an 5 offender sentenced for a felony crime listed in RCW 9.94A.540 as 6 subject to a mandatory minimum sentence of total confinement shall 7 not be released from total confinement before the completion of the 8 listed mandatory minimum sentence for that felony crime of conviction 9 unless allowed under RCW 9.94A.540; and

10 (k) Any person convicted of one or more crimes committed prior to 11 the person's eighteenth birthday may be released from confinement 12 pursuant to RCW 9.94A.730.

(2) Notwithstanding any other provision of this section, an 13 offender entitled to vacation of a conviction or the recalculation of 14 his or her offender score pursuant to State v. Blake, No. 96873-0 15 16 (Feb. 25, 2021), may be released from confinement pursuant to a court 17 order if the offender has already served a period of confinement that exceeds his or her new standard range. This provision does not create 18 an independent right to release from confinement prior to 19 20 resentencing.

21 <u>(3)</u> Offenders residing in a juvenile correctional facility 22 placement pursuant to RCW 72.01.410(1)(a) are not subject to the 23 limitations in this section.

24 Sec. 20. RCW 10.64.110 and 1977 ex.s. c 259 s 1 are each amended 25 to read as follows:

(1) Following June 15, 1977, except as provided in subsection (3) 26 of this <u>section</u>, there shall be affixed to the original of every 27 judgment and sentence of a felony conviction in every court in this 28 state and every order adjudicating a juvenile to be a delinquent 29 30 based upon conduct which would be a felony if committed by an adult, a fingerprint of the defendant or juvenile who is the subject of the 31 order. When requested by the clerk of the court, the actual affixing 32 of fingerprints shall be done by a representative of the office of 33 34 the county sheriff.

35 <u>(2)</u> The clerk of the court shall attest that the fingerprints 36 appearing on the judgment in sentence, order of adjudication of 37 delinquency, or docket, is that of the individual who is the subject 38 of the judgment or conviction, order, or docket entry. 1 (3) Amended judgment and sentences issued pursuant to State v. Blake, No. 96873-0 (Feb. 25, 2021), are exempt from the 2 3 fingerprinting requirements in subsection (1) of this section when there are no additional offenses of conviction from the original 4 judgment and sentence and the defendant is in custody in a 5 6 correctional facility. In such cases, the amended judgment and sentence shall reference the original judgment and sentence and the 7 fingerprints affixed thereto. 8

9 NEW SECTION. Sec. 21. The State v. Blake reimbursement account is created in the state treasury. Moneys in the account may be spent 10 only after appropriation. Expenditures from the account may be used 11 only for state and local government costs resulting from the supreme 12 court's decision in State v. Blake, No. 96873-0 (Feb. 25, 2021), and 13 to reimburse individuals for legal financial obligations paid in 14 15 connection with sentences that have been invalidated as a result of 16 the decision.

17 <u>NEW SECTION.</u> Sec. 22. The appropriations in this section are 18 provided to the health care authority community behavioral health 19 program and are subject to the following conditions and limitations:

(1) The following sums, or so much thereof as may be necessary, 20 21 are each appropriated: \$25,000,000 from the state general fund for the fiscal year ending June 30, 2022; and \$20,000,000 from the state 22 23 general fund for the fiscal year ending June 30, 2023. The amounts in 24 this subsection are provided solely for the authority to contract with behavioral health administrative service organizations 25 to 26 implement the statewide recovery navigator program established in 27 section 2 of this act and for related technical assistance to support this implementation. This includes funding for recovery navigator 28 29 teams to provide community-based outreach and case management services based on the law enforcement assisted diversion model and 30 for technical assistance support from the law enforcement assisted 31 diversion national support bureau. 32

(2) The following sums, or so much thereof as may be necessary, are each appropriated: \$1,673,000 from the state general fund for the fiscal year ending June 30, 2022; \$3,114,000 from the state general fund for the fiscal year ending June 30, 2023; and \$3,890,000, from the general fund-federal account for the fiscal biennium ending June 30, 2023. The amounts in this subsection are provided solely for the

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1 authority to implement clubhouse services in every region of the 2 state.

3 (3) The following sums, or so much thereof as may be necessary, 4 are each appropriated: \$5,000,000 from the state general fund for the 5 fiscal year ending June 30, 2022; and \$7,500,000 from the state 6 general fund for the fiscal year ending June 30, 2023. The amounts in 7 this subsection are provided solely for the authority to implement 8 the homeless outreach stabilization team program, pursuant to section 9 5(1) of this act.

10 (4) The following sums, or so much thereof as may be necessary, 11 are each appropriated: \$2,500,000 from the state general fund for the 12 fiscal year ending June 30, 2022; and \$2,500,000 from the state 13 general fund for the fiscal year ending June 30, 2023. The amounts in 14 this subsection are provided solely for the authority to expand 15 efforts to provide opioid use disorder medication in city, county, 16 regional, and tribal jails.

(5) The following sums, or so much thereof as may be necessary, are each appropriated: \$500,000 from the state general fund for the fiscal year ending June 30, 2022; and \$500,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the authority to expand opioid treatment network programs for people with co-occurring opioid and stimulant use disorder.

(6) The following sums, or so much thereof as may be necessary, 24 are each appropriated: \$1,400,000 from the state general fund for the 25 fiscal year ending June 30, 2022; and \$1,400,000 from the state 26 general fund for the fiscal year ending June 30, 2023. The amounts in 27 this subsection are provided solely for behavioral 28 health administrative service organizations to develop regional recovery 29 navigator program plans pursuant to section 2 of this act and to 30 31 establish positions focusing on regional planning to improve access to and quality of regional behavioral health services with a focus on 32 integrated care. 33

(7) The following sums, or so much thereof as may be necessary, are each appropriated: \$75,000 from the state general fund for the fiscal year ending June 30, 2022; and \$75,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the authority to contract with an organization with expertise in supporting efforts to increase access to and improve quality in recovery housing and recovery residences.

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1 This funding shall be used to increase recovery housing availability 2 through partnership with private landlords, increase accreditation of 3 recovery residences statewide, operate a grievance process for 4 resolving challenges with recovery residences, and conduct a recovery 5 capital outcomes assessment for individuals living in recovery 6 residences.

7 (8) The following sums, or so much thereof as may be necessary, 8 are each appropriated: \$500,000 from the state general fund for the 9 fiscal year ending June 30, 2022; and \$500,000 from the state general 10 fund for the fiscal year ending June 30, 2023. The amounts in this 11 subsection are provided solely for the authority to provide short-12 term housing vouchers for individuals with substance use disorders.

(9) The following sums, or so much thereof as may be necessary, are each appropriated: \$250,000 from the state general fund for the fiscal year ending June 30, 2022; and \$250,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the authority to issue grants for substance use disorder family navigator services.

(10) The following sums, or so much thereof as may be necessary, are each appropriated: \$200,000 from the state general fund for the fiscal year ending June 30, 2022; and \$200,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the authority to convene and provide staff and contracted services support to the recovery oversight committee established in section 1 of this act.

26 (11) The following sums, or so much thereof as may be necessary, are each appropriated: \$2,565,000 from the state general fund for the 27 fiscal year ending June 30, 2022; and \$2,565,000 from the state 28 29 general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for staff and contracted services 30 31 support for the authority to develop and implement the recovery services plan established in section 1 of this act and to carry out 32 other requirements of this act. Within these amounts, funding is 33 provided for the authority to: 34

(a) Establish an occupational nurse consultant position within
 the authority to provide contract oversight, accountability,
 performance improvement activities, and to ensure medicaid managed
 care organization plan compliance with provisions in law and contract
 related to care transitions work with local jails.

1 (b) Establish a position within the authority to create and 2 oversee a program to initiate and support emergency department 3 programs for inducing medications for patients with opioid use 4 disorder paired with a referral to community-based outreach and case 5 management programs.

6 <u>NEW SECTION.</u> Sec. 23. The appropriation in this section is 7 provided to the administrative office of the courts and is subject to 8 the following conditions and limitations:

9 The following sums, or so much thereof as may be necessary, are 10 each appropriated: \$2,250,000 from the state general fund for the 11 fiscal year ending June 30, 2022; and \$2,250,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in 12 this subsection are provided solely to fund grants for therapeutic 13 courts operated by municipalities and district courts. 14 The 15 administrative office of the courts must allocate grant funding based 16 upon a formula established by the administrative office of the courts. The formula must distribute the grant funding equitably 17 between those therapeutic courts located east of the crest of the 18 Cascade mountains and those therapeutic courts located west of the 19 20 crest of the Cascade mountains. Multiple jurisdictions served by a 21 single municipal court or district court may apply for funds as a single entity. Local jurisdictions receiving grant funding for 22 therapeutic courts must use funding to identify individuals before 23 24 the courts with substance use disorders or other behavioral health needs and engage those individuals with community-based therapeutic 25 interventions. 26

27 <u>NEW SECTION.</u> Sec. 24. The appropriation in this section is 28 provided to the department of commerce and is subject to the 29 following conditions and limitations:

The following sums, or so much thereof as may be necessary, are 30 each appropriated: \$500,000 from the state general fund for the 31 fiscal year ending June 30, 2022; and \$1,000,000 from the state 32 general fund for the fiscal year ending June 30, 2023. The amounts in 33 this subsection are provided solely for the department to provide 34 grants for the operational costs of new staffed recovery residences 35 which serve individuals with substance use disorders who require more 36 37 support than a level 1 recovery residence.

1 NEW SECTION. Sec. 25. The appropriation in this section is 2 provided to the criminal justice training commission and is subject to the following conditions and limitations: 3

The following sums, or so much thereof as may be necessary, are 4 each appropriated: \$150,000 from the state general fund for the 5 6 fiscal year ending June 30, 2022; and \$150,000 from the state general 7 fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the commission to compensate 8 trainer time to deliver the curriculum related to law enforcement 9 interactions with persons with a substance use disorder pursuant to 10 11 section 7 of this act.

12 NEW SECTION. Sec. 26. Sections 1 through 11 and 13 through 21 of this act are necessary for the immediate preservation of the 13 public peace, health, or safety, or support of the state government 14 15 and its existing public institutions, and take effect immediately.

16 NEW SECTION. Sec. 27. Section 11 of this act expires July 1, 17 2022.

18 NEW SECTION. Sec. 28. Section 12 of this act takes effect July 1, 2022. 19

20 NEW SECTION. Sec. 29. Sections 8 through 10, 12, 15, and 16 of 21 this act expire July 1, 2023.

22 NEW SECTION. Sec. 30. If any provision of this act or its application to any person or circumstance is held invalid, the 23 remainder of the act or the application of the provision to other 24 persons or circumstances is not affected." 25

26 Correct the title.

--- END ---