STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
P.O. Box 45010, Olympia, Washington 98504-5010

June 15, 2012

Dear Tribal Leader:

Thank you for sending representatives to the Consultation regarding the Medicaid Mental Health Waiver renewal on May 31, 2012. This waiver, known as the Washington State Integrated Community Mental Health Program, is for two years and will become effective October 1, 2012. This letter is to provide you with an update on recommended changes as a direct result of Consultation.

As a result of Consultation, the waiver document has been updated as follows:

- In the last paragraph of Section A: Program Description; Part I: Program Overview (attached as Part I - Program Overview), it now states that *"DSHS is committed to the development of a tribal centric mental health system that better serves the needs of the tribes." This paragraph includes, "DSHS also acknowledges that separate mental health services are provided by facilities of the Indian Health Service under the Title XIX State Plan."*

- In the last paragraph of Part II: Access; C. Coordination and Continuity of Care Standards (attached as Continuity of Care Standards), clarification is provided that the Division of Behavioral Health and Recovery's (DBHR) contracts with Regional Support Networks (RSNs) can be *"updated as a result of agreements made through formal Consultation with the tribes."* This paragraph additionally acknowledges that DSHS is committed to the development of a tribal centric mental health system that better serves the needs of Tribes. Per this letter, DSHS acknowledges that the Medicaid Mental Health Benefits Booklet will need to be updated to support the transition to a tribal centric mental health system to better serve the needs of Tribes.

- The waiver document no longer includes any reference to Tribes as *"stakeholders"*. We agree that Tribes are not stakeholders but rather our partners to assist in designing a behavioral health system that truly meets the needs of all residents of Washington State. We appreciate tribal representatives bringing this to our attention.

The draft waiver document now clearly indicates to the Centers for Medicare and Medicaid Services (CMS) that the Department intends to enter into agreements with Tribes; modify RSN contracts as necessary; and, to develop a tribal centric mental health system that better serves the needs of Tribes. Please note that the Department is not aware of any current barriers that would prevent our working collaboratively together to design and implement a tribal centric mental

health system. If it becomes necessary, we are prepared to support legislation, waiver amendments, or amendments to the state plan to implement an agreed upon plan.
An updated draft of the waiver is available at: http://www.dshs.wa.gov/dbhr/mhwaivers.shtml.

We would like to take this opportunity to thank you and all tribal representatives for being dedicated to improving mental health services for tribal members and their families.

We are committed to working with Tribes in an intensive effort over the next year to develop an integrated, tribal centric mental health system of care.

Please send your comments and recommendations Thomas Gray, Mental Health Program Administrator, DBHR by July 16, 2012 via email at tom.gray@dshs.wa.gov.

Should you have any questions, please contact MaryAnne Lindeblad, Assistant Secretary, ADSA by telephone at 360-725-2260 or via email at maryanne.lindeblad@dshs.wa.gov or Chris Imhoff, Director, DBHR by telephone at 360-725-3770 or via email at chris.imhoff@dshs.wa.gov.

Sincerely,

Robin Arnold-Williams
Secretary

Enclosures

cc: Doug Porter, Director, HCA
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