



**WASHINGTON STATE GAMBLING  
COMMISSION MEETING**

**August 10, 2023**

Olympia, Washington



STATE OF WASHINGTON

GAMBLING COMMISSION

“Protect the Public by Ensuring that Gambling is Legal and Honest”

Gambling Commission Meeting Agenda

August 10, 2023

The meeting will be held virtually through Teams, and in person, at The Washington State Liquor and Cannabis Board, 1025 Union Avenue SE, Olympia, Washington 98501

To join the meeting virtually through TEAMS Click [here](#)

The Chair may take items out of order and the Commissioners may take action on business items.

Administrative Procedures Act Proceedings are identified by an asterisk (\*)

<b>Thursday, August 10, 2023 PUBLIC MEETING</b>	
<b>9:30 AM</b>	<b>Call to Order</b> <span style="float: right;"><i>Alicia Levy, Chair</i></span>
<b>Tab 1</b>	<p><b>*Consent agenda</b> <span style="float: right;"><b>(Action)</b></span></p> <ul style="list-style-type: none"> <li>• July 20 &amp; 21, 2023, Commission Meeting <b>Pg. 4</b></li> <li>• New Licenses &amp; Class III Gaming Employees <b>Pg. 12</b></li> <li>• HBCR List <b>Pg. 29</b></li> </ul> <p><i>Public Comment</i></p> <p><b>Director’s Report – Verbal</b> <span style="float: right;"><i>Tina Griffin, Director</i></span></p>
<b>Tab 2</b>	<p><b>*Petition for Reconsideration</b> <span style="float: right;"><b>(Action)</b></span></p> <p>Chanmalaty Touch, Case No. CR 2021-01221</p> <p style="text-align: right;"><i>Doug Van de Brake, Assistant Attorney General</i> <i>Frank Huguenin and B. Jeffrey Carl, Attorneys for the Petitioner</i></p> <p><b>Potential Closed Session for Commission Deliberations</b></p>
<b>Tab 3</b>	<p><b>Presentation – Special Olympics of Washington Pg. 33</b> <span style="float: right;"><b>(Action)</b></span></p> <ul style="list-style-type: none"> <li>• 2022 Western Washington Enhanced Raffle Results</li> <li>• 2023 Western Washington Enhanced Raffle Plan Request “Dream Adventure Raffle”</li> </ul> <p style="text-align: right;"><i>Tony Czar, Special Agent</i></p> <p><i>Public Comment</i></p>
<b>11:30-1:30 approximately</b>	<p><b>Executive Session – Closed to the Public</b> <span style="float: right;"><b>(Working Lunch)</b></span></p> <p>To discuss current and potential agency litigation with legal counsel, including tribal negotiations.</p>
<b>Tab 4</b>	<p><b>Default Pg. 52</b> <span style="float: right;"><b>(Action)</b></span></p> <ul style="list-style-type: none"> <li>• Sue Chen - CR 2023-00239</li> </ul> <p style="text-align: right;"><i>James Richardson, Staff Attorney</i></p>
<b>Tab 5</b>	<p><b>PETITION TO INITIATE RULE MAKING Pg. 60</b> <span style="float: right;"><b>(Action)</b></span></p> <ul style="list-style-type: none"> <li>• GameWorks – Amusement Game Wager Limits</li> </ul> <p style="text-align: right;"><i>Lisa McLean, Legislative and Policy Manager</i></p> <p><i>Public Comment</i></p>
<b>Tab 6</b>	<p><b>PETITION TO INITIATE RULE MAKING Pg. 64</b> <span style="float: right;"><b>(Action)</b></span></p> <ul style="list-style-type: none"> <li>• Authorizing Gambling for Youth</li> </ul> <p style="text-align: right;"><i>Lisa McLean, Legislative and Policy Manager</i></p> <p><i>Public Comment</i></p>



<b>Tab 7</b>	<b>2024 Agency Request Legislation</b> <i>Lisa McLean, Legislative and Policy Manager</i>
<b>Tab 8</b>	<b>Problem and Responsible Gambling Pg. 93 (Possible Action)</b> <ul style="list-style-type: none"> <li>• National Council of Legislators in Gaming States’ Responsible Gaming Resolution 2023</li> <li>• Advisory Committee Involvement – E2SSB 5634, Section 2, RCW 41.05.750</li> </ul> <p style="text-align: right;"><i>Tina Griffin, Director</i></p> <p><i>Public Comment</i></p>
	<b>Public Comment can be provided via:</b> <ul style="list-style-type: none"> <li>• Email before the start of the meeting on August 10, 2023, to <a href="mailto:askus@wsgc.wa.gov">askus@wsgc.wa.gov</a></li> <li>• Microsoft Office Teams Chat Box.</li> <li>• By phone; or In person.</li> </ul>
	<b>Adjourn</b>



STATE OF WASHINGTON  
**GAMBLING COMMISSION**

*"Protect the Public by Ensuring that Gambling is Legal and Honest"*

July 20th, 2023

**Gambling Commission Meeting Minutes**

The meetings were held at the Liquor and Cannabis Board, Olympia, WA.

**Commissioners:**

**Chair Alicia Levy – In Person**  
**Vice Chair Julia Patterson In Person**  
**Bud Sizemore - In Person**  
**Sarah Lawson – Via Teams**  
**Anders Ibsen - In Person**

**Ex Officio Members Present:**

**Senator Steve Conway (Via Teams)**  
**Senator Jeff Holy - Absent**  
**Representative Shelley Kloba (Via Teams)**  
**Representative Skyler Rude (Via Teams)**

**Staff Present:**

Tina Griffin, Director; Lisa McLean, Legislative and Policy Manager; Suzanne Becker, Assistant Attorney General (AAG); Jeanine Sugimoto, Special Agent; George Schultz, IT; Troy Kirby, Public Information Officer; Julie Anderson, Executive Assistant; Damon Mentzer, Administrative Assistant; Rachelle Burgett, Administrative Assistant

**Staff Present Virtually:**

Dan Wegenast, Agent in Charge; Bill McGregor, Special Agent Supervisor; Nicole Frazer, Administrative Assistant

There were 32 people in the audience and 42 people attended virtually.

**Chair Levy** welcomed everyone to the Liquor and Cannabis Board for our meeting and called the meeting to order at 9:32 AM. She called the roll to ensure a quorum.

**Tab 1**

**Consent Agenda**

**Chair Levy** asked the Commissioners if they had any changes to the consent agenda. Commissioners had no changes.

**Chair Levy** asked for public comment. There was no public comment.

*Commissioner Sizemore moved to approve the consent agenda as presented by staff.*

*Commissioner Ibsen seconded the motion.*

*The motion passed unanimously. 4:0*

*Commissioner Patterson was not present at the time of the vote.*

**The Director's Report**

**Director Griffin** thanked the Commissioners for allowing her to attend training at Harvard University in Boston. The training will provide valuable information for leaders at the Gambling Commission. Also, in the packet is the wrap up of the 2018-2023 Strategic Plan results including

a one pager of the 2023-2028 Strategic Plan. Director Griffin reminded Commissioners that the agency staff are continuing to work on two very large long-term projects as well as their other work.

**Tab 2**

**Petition for Reconsideration – Chanmalaty Touch, Case No. CR 2021-01221**

**Doug Van de Brake, AAG** represented Commission staff. Mr. Francis Huguenin, attorney, represented Petitioner Touch. Mr. Huguenin asked if commission staff received an email from July 19, 2023.

**Chair Levy** excused Commissioners to closed session for further discussion on the petition for reconsideration at 9:41AM. The Commissioners reconvened after closed session at 10:03AM.

**Chair Levy** announced that the Commissioners would grant the continuance one last time so that Commissioners have enough time to review all the materials. This item will be on the August 2023 agenda.

**Tab 3**

**Proposed Tribal Gaming Compact Amendment Hearing**

**The Honorable Ron Allen, Chairman, Jamestown S’Klallam Tribe; Greg Hitchcock, Vice Chair, Cowlitz Indian Tribe; Bob Iyall, CEO Medicine Creek Enterprises, Nisqually Indian Tribe; The Honorable Greg Abrahamson, Chair, Spokane Tribe; Devon Tiam, General Council, Suquamish Tribe; Tina Griffin, Director and Jeanine Sugimoto, Special Agent (SA)** presented the materials for this tab.

**Director Griffin** began the presentation by explaining the process. **SA Sugimoto** provided a summary and a detailed account of the compact changes to the Tribe’s Amendment.

**Chair Levy** asked for further comment from the Commissioners. They had none. She asked for public comment. There was none.

*Commissioner Ibsen moved to forward the proposed compact amendment for the Jamestown S’Klallam Tribe to the governor for review and final execution.*

*Commissioner Sizemore seconded the motion.*

*The motion passed 7:0*

*Commissioner Ibsen moved to forward the proposed compact amendment for the Cowlitz Indian Tribe to the governor for review and final execution.*

*Commissioner Patterson seconded the motion.*

*The motion passed 7:0*

*Commissioner Ibsen moved to forward the proposed compact amendment for the Nisqually Indian Tribe to the governor for review and final execution.*

*Commissioner Sizemore seconded the motion.*

*The motion passed 7:0*

*Commissioner Ibsen moved to forward the proposed compact amendment for the Spokane Tribe to the governor for review and final execution.*

*Commissioner Patterson seconded the motion.*

*The motion passed 7:0*

*Commissioner Ibsen moved to forward the proposed compact amendment for the Suquamish Tribe to the governor for review and final execution.*

*Commissioner Sizemore seconded the motion.*

*The motion passed 7:0*

The Commissioners took a 15-minute break.

#### **Tab 4**

##### **Presentation – Budget Update and Approval for Fiscal Years 2023-25**

**Kriscinda Hansen, CFO** presented the materials for this tab. **CFO Hansen** provided an update on the agency’s budget and asked for approval of the 2023-2025 fiscal year’s budget.

**Chair Levy** asked for further comment from the Commissioners. They had none. She asked for public comment. There was none.

*Commissioner Patterson moved to approve the 23-25 biennial budget as presented by staff.*

*Commissioner Sizemore seconded the motion.*

*The motion passed 5:0*

#### **Tab 8**

##### **Petition for Discussion and Possible Action – Definition of “qualified sports teams.”**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)** presented the materials for this tab. **Andy Billig**, on behalf of Spokane Chiefs Hockey Club submitted a petition to amend WAC 230-03-138 to expand the definition of a “qualified sports team” to include the four teams of the affiliated professional minor league baseball and the four teams of the Western Hockey League. This change would allow charitable or nonprofit organizations established by or directly affiliated with these sports teams to apply for a license to operate electronic raffles.

Staff recommends that Commissioners file language for further discussion.

**Mark Miles**, President of the Spokane Chiefs Hockey Team, representing the minor league teams in Washington spoke to the 50/50 raffle process.

**Chair Levy** asked for further comment from the Commissioners.

*Commissioner Patterson moved to file proposed language for further discussion as presented by staff.*

*Commissioner Ibsen seconded the motion.*

*The motion passed unanimously. 5:0*

**Chair Levy** announced that the Commissioners and staff would adjourn to Executive Session to discuss current and potential agency litigation including tribal negotiations. The Commissioners reconvened the meeting at 12:30 PM.

#### **Tab 5**

#### **Rule-Making Hearing: Petition for Final Action – Wagering Limits for House-Banked Card Games**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)**, presented the materials for this tab. Vicki Christopherson, representing Maverick Gaming, originally submitted a petition for rulemaking in July 2022 that proposed raising wager limits at house-banked card rooms. Draft rule language was before the Commissioners for public comment and possible final action.

At 1:09 PM, Chair Levy announced that the Commissioners and staff would adjourn to Executive Session to discuss potential agency litigation. The Commissioners reconvened the meeting at 1:39 PM.

**Chair Levy** asked for public comment. The Commission heard from nine individuals working in the house-banked card room industry as owners, managers, shift supervisors, and dealers. All spoke in favor of the petition.

A representative for the Kalispel Indian Tribe spoke in opposition to the petition, articulating the issues raised in the letter from the Tribe received by the Commission on July 17, 2023.

*Commissioner Patterson moved to take final action on the Wagering Limits for House-Banked Card Games increasing the wagering limit to \$400.00 as presented by staff and to be effective 31 days after filing with the code reviser's office.*

*Chair Levy seconded the motion.*

*The motion passed 3:2*

*Commissioners Lawson and Ibsen abstained.*

#### **Tab 6**

#### **Petition for Final Action - Progressive Jackpots**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)**, presented the materials for this tab. In February, the commission received a petition from Tiffini Cox, representing Galaxy Gaming from Las Vegas, Nevada, who proposed amending WAC 230-15-685(4)(b) to allow house-banked card rooms licensees to connect *more than one* progressive jackpot on different card games. Staff recommended filing for final action.

**Chair Levy** asked for further comment from the Commissioners. They had none. She asked for public comment. There was none.

*Commissioner Lawson moved to file for final action as presented by staff and to be effective 31 days after filing with the code reviser's office.*

*Commissioner Sizemore seconded the motion.*

*The motion passed unanimously. 5:0*

**Tab 7**

**Petition for Discussion and Possible Action – Ticket In Ticket Out (TITO)**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)**, presented the materials for this tab. Tim Merrill of Maverick Gaming in Kirkland, Washington is proposing to amend several rules to allow for the use of ticket-in/ticket-out using the iDROP kiosk device in card room to purchase and redeem tickets for table games play. Staff recommends that Commissioners file the amended and new rules for further discussion.

**Chair Levy** asked for further comment from the Commissioners. Commissioner Sizemore asked for a responsible gambling message to printed on the ticketing system.

**Chair Levy** asked for public comment. Victor Mena spoke in support of the rule change. Vicki Christopherson didn't object to a problem gambling message printed on the ticket.

**Commissioner Sizemore** moved to file the proposed rules as presented by staff.

**Commissioner Patterson** seconded the motion.

The motion passed unanimously. 5:0

**Tab 9**

**Petition up for Discussion and Possible Action – Bingo HB 1707**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)**, presented the materials for this tab. On April 20, 2023, Governor Jay Inslee signed HB 1707 (an act relating to bingo conducted by bona fide charitable and nonprofit organizations) into law with an effective date of July 23, 2023. The statutory change necessitates an amendment to WAC 230-10-460 regarding shared bingo facilities to bring it into line with the statute as amended.

**Chair Levy** asked for further comment from the Commissioners. They had none. She asked for public comment. There was none.

*Commissioner Sizemore moved to file the revised WAC as presented by staff so the that rules align with the statute as amended.*

*Commissioner Ibsen seconded the motion.*

*The motion passed unanimously. 5:0*

**Chair Levy** adjourned the meeting at 3:14 PM.

**Friday, July 21st, 2023**

**Gambling Commission Meeting Minutes**

The meetings were held at the Liquor and Cannabis Board, Olympia, WA.

**Commissioners:**

**Chair Alicia Levy – In Person**

**Vice Chair Julia Patterson – Via Teams**

**Ex Officio Members Present:**

**Senator Steve Conway (Via Teams)**

**Senator Jeff Holy - Absent**

**Bud Sizemore - In Person**  
**Anders Ibsen - In Person**  
**Sarah Lawson – Absent**

**Representative Shelley Kloba (Via Teams)**

**Chair Levy** reconvened the Gambling Commission’s second day at 9:34 AM. She called the roll to ensure a quorum.

There were 4 people in the audience and 52 people attended virtually.

**Tab 10**

**Petition to Initiate Rule-Making – Hearing Rules**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)**, presented the materials for this tab. A rule change is necessary to implement a framework to address timeliness for filings before the Commission and reduce confusion and unnecessary continuances. Other parts of the rule chapter on Hearing Rules may also be amended to add clarity or ensure consistency.

Staff recommends initiating rule making to adjust rules to address timeframes for filing motions, responses, and other legal documents, as well as to introduce other changes that might clarify hearing processes and ensure consistency.

**Chair Levy** asked for further comment from the Commissioners. They had none. She asked for public comment. There was none.

*Commissioner Sizemore moved to initiate rule making to address timeframes for filing motions, responses, and other legal documents as presented by staff.*

*Commissioner Ibsen seconded the motion.*

*The motion passed. 4:0*

*Commissioner Lawson was absent.*

**Tab 11**

**Petition to Initiate Rule-Making – Pull Tab Services**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)** presented the materials for this tab. Cameron Stewart of Lacey, WA has submitted a petition for adoption of a new rule requiring establishments licensed to sell pull tabs to treat all customers with consistency and in a timely manner. The petitioner believes that he is treated with less respect and often must wait long stretches for staff at establishments to sell him pull tabs.

**Chair Levy** asked for further comment from the Commissioners. They had none. She asked for public comment. The petitioner, Mr. Cameron spoke on his behalf. Ms. Jeanette Miles also spoke to the Commissioners.

*Commissioner Sizemore moved to deny the petition. Commissioner Patterson amended the motion by stating the reason for the denial of the petition is that the gambling commission is not authorized to address customer service issues.*

*Commissioner Ibsen seconded the motion.*

*The motion passed. 4:0*

*Commissioner Lawson was absent.*



**Tab 12**

**2024 Agency Request Legislation**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)** presented the materials for this tab. Commission staff met internally and with licensees and Tribal partners to collect ideas to present to you for potential agency request legislation. The Commissioners decided to meet virtually on September 12, 2023, at 2:00 PM to take final action on agency request legislation for the 2024 session.

**Tab 13**

**Presentation – Self-Exclusion Annual Commission Report**

**Tony Hughes, Special Agent Supervisor (SAS)** presented the materials for this tab. This presentation was the initial program review for Self-Exclusion. As of May 1, 2022, there have been over 500 people enroll in this program. This program will be reviewed annually.

**Chair Levy** asked for further comment from the Commissioners. Commissioner Patterson wanted to be reassured that the funds be confiscated are going into the proper place. SAS Hughes reassured her that he and Roxanne Waldron from DSHS have verified the placement of the funds.

**Adjournment**

**Chair Levy** asked for public comment. There was no further comments. She reminded everyone that the August 10 & 11 meetings would be back at this same location.

The meeting adjourned at 11:09 AM.

**Tab 12**

**2024 Agency Request Legislation**

**Lisa C. McLean, Legislative/Policy Manager and Rules Coordinator (LPM)** presented the materials for this tab. Commission staff met internally and with licensees and Tribal partners to collect ideas to present to you for potential agency request legislation. The Commissioners decided to meet virtually on September 12, 2023, at 2:00 PM to take final action on agency request legislation for the 2024 session.

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**Adjournment**

**Chair Levy** asked for public comment. There was no further comments. She reminded everyone that the August 10 & 11 meetings would be back at this same location.

The meeting adjourned at 11:09 AM.



COMMISSION APPROVAL LIST  
(New Licenses & Class III Gaming Employees)  
August 2023

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Based upon the licensing investigations, staff recommends approving all new Licenses and Class III employees listed on pages 1 to 17.

ORGANIZATION NAME

LICENSE NUMBER

PREMISES LOCATION

**NEW APPLICATIONS**

**BINGO**

FOE 00021  
00-00012 01-02831

805 E 4TH AVE  
OLYMPIA WA 98506

VFW 02995  
00-18380 01-02833

4330 148TH AVE NE  
REDMOND WA 98052

**RAFFLE**

COLVILLE ROTARY CHARITABLE FOUNDATION  
00-25125 02-21337

298 SOUTH MAIN STREET  
COLVILLE WA 99114

EMERGENCY FOOD NETWORK OF TACOMA AND PIERCE  
00-23256 02-09669

3318 92nd ST S  
LAKEWOOD WA 98499

FRIENDS OF THE CHILDREN - SEATTLE  
00-24994 02-21274

233 BURNETT AVE S  
RENTON WA 98057

JOHN E O'BRIEN CHARITABLE, RELIGIOUS AND EDUCATION  
00-25153 02-21351

3259 OLDE GOLDIE ROAD  
OAK HARBOR WA 98277

PROVAIL  
00-24418 02-21034

12550 AURORA AVE N  
SEATTLE WA 98133

WASHINGTON CENTER FOR THE PERFORMING ARTS  
00-20717 02-08682

512 WASHINGTON ST SE  
OLYMPIA WA 98501

WENATCHEE VALLEY TREAD  
00-25121 02-21333

25 N. WENATCHEE AVE  
WENATCHEE WA 98801

**PUNCHBOARD/PULL-TAB COMMERCIAL STIMULANT**

COPALIS COVE  
00-25111 05-21823

798 OCEAN SHORES BLVD NW  
OCEAN SHORES WA 98569

LARIAT  
00-25058 05-21810

11820 N MARKET ST  
MEAD WA 99021

ROSEMERE TAVERN  
00-25021 05-21800

3215 Z ST  
VANCOUVER WA 98661

DATE: 07/25/2023

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ORGANIZATION NAME

LICENSE NUMBER

PREMISES LOCATION

**NEW APPLICATIONS**

**NON HOUSE-BANKED CARD GAME**

ACES POKER  
00-25014 65-07530

7004 220TH ST SW  
MOUNTLAKE TERRACE WA 98043

PERSON'S NAME  
LICENSE NUMBER

EMPLOYER'S NAME  
PREMISES LOCATION

### NEW APPLICATIONS

#### DISTRIBUTOR REPRESENTATIVE

FISHER, COREY M  
22-01331

NRT TECHNOLOGIES INC  
LAS VEGAS NV 89120

INGLE, ROBERT A  
22-01334

INTERBLOCK USA LLC  
LAS VEGAS NV 89119

LANSFORD, MARC T  
22-01333

INTERBLOCK USA LLC  
LAS VEGAS NV 89119

RHODES, DUSTIN C  
22-01332

INTERBLOCK USA LLC  
LAS VEGAS NV 89119

VAN STELTEN, RYAN D  
22-01330

INTERBLOCK USA LLC  
LAS VEGAS NV 89119

#### MANUFACTURER REPRESENTATIVE

BROOKS, JAYSON M  
23-03703

AINSWORTH GAME TECHNOLOGY INC  
LAS VEGAS NV 89118

BURNHAM, CHELSEA R  
23-03723

EVERI GAMES INC.  
AUSTIN TX 78728

ESNAASHARI, ARMIN  
23-03721

ARISTOCRAT TECHNOLOGIES INC  
LAS VEGAS NV 89135

GORDON, MAIA T  
23-03711

EVERI PAYMENTS INC  
LAS VEGAS NV 89113-2175

HALOCI, GENCI  
23-03716

ARISTOCRAT TECHNOLOGIES INC  
LAS VEGAS NV 89135

HEARD, KHIAH D  
23-03722

EVERI PAYMENTS INC  
LAS VEGAS NV 89113-2175

HERNANDEZ, JOSE A  
23-03715

EVERI PAYMENTS INC  
LAS VEGAS NV 89113-2175

HOLGUIN, JAMES R  
23-03461

EVERI GAMES INC.  
AUSTIN TX 78728

JAMES CHRISTOPHER, HERCUL  
23-03705

LIGHT & WONDER  
LAS VEGAS NV 89119

JONES, SHAI D  
23-02430

ARIES TECHNOLOGY LLC  
GROVE OK 74344-6251

PERSON'S NAME  
LICENSE NUMBER

EMPLOYER'S NAME  
PREMISES LOCATION

### NEW APPLICATIONS

#### MANUFACTURER REPRESENTATIVE

LARSON, PETER H  
23-03707

EVERI PAYMENTS INC  
LAS VEGAS NV 89113-2175

MANICKASINGAM, MATHIVATHANAN  
23-02091

NRT TECHNOLOGY  
CANADA NA M1S5R3

NAGULLA, SANTHOSH K  
23-03712

EVERI PAYMENTS INC  
LAS VEGAS NV 89113-2175

OSEMEKE, NICHOLAS C  
23-03708

IGT  
LAS VEGAS NV 89113

PIERCE, BRIAN R  
23-00910

LIGHT & WONDER  
LAS VEGAS NV 89119

RAUH, JUSTIN T  
23-03710

EVERI PAYMENTS INC  
LAS VEGAS NV 89113-2175

SARAVANA BHAVAN, SIVARAMA KRISHNAN  
23-03709

LIGHT & WONDER  
LAS VEGAS NV 89119

SMITH, TRENT A  
23-03704

AGS LLC  
LAS VEGAS NV 89118

SUBBAIAN SUNDARAM, PRADEEP  
23-03717

LIGHT & WONDER  
LAS VEGAS NV 89119

TESLER, JOSEPH  
23-01731

LIGHT & WONDER  
LAS VEGAS NV 89119

THORNTON, CHARLES B  
23-03713

AGS LLC  
LAS VEGAS NV 89118

WATKINS, SKLYER A  
23-03714

ARIES TECHNOLOGY LLC  
GROVE OK 74344-6251

WEST, VICK A  
23-03706

ARISTOCRAT TECHNOLOGIES INC  
LAS VEGAS NV 89135

#### MAJOR SPORTS WAGERING REPRESENTATIVE

BRADWAY, DARREN E  
33-00489

ISI SPORTS  
LAS VEGAS NV 89128

CASTILLO VILLAMARES, JULIO C  
33-00487

ISI SPORTS  
LAS VEGAS NV 89128



PERSON'S NAME  
 LICENSE NUMBER

EMPLOYER'S NAME  
 PREMISES LOCATION

**NEW APPLICATIONS**

**MAJOR SPORTS WAGERING REPRESENTATIVE**

DYCUS, JOSHUA A 33-00494	ISI SPORTS LAS VEGAS NV 89128
GLOVER, REBECCA G 33-00491	ISI SPORTS LAS VEGAS NV 89128
HAVEN, COLLIN W 33-00486	ISI SPORTS LAS VEGAS NV 89128
HERNANDEZ-ROMERO, JUAN C 33-00490	ISI SPORTS LAS VEGAS NV 89128
KELDAOUI, WISSAM Y 33-00488	ISI SPORTS LAS VEGAS NV 89128

**NON-PROFIT GAMBLING MANAGER**

ANDERSON, SHELLY A 61-04851	AMERICAN LEGION 00092 STANWOOD WA 98292
STATLER, SHANNON L 61-04779	FOE 03004 OKANOGAN WA 98841
STEER, MICHAEL J 61-04852	AMERICAN LEGION 00092 STANWOOD WA 98292

**SERVICE SUPPLIER REPRESENTATIVE**

BYERS, ROBERT E 63-01120	MAVERICK WASHINGTON KIRKLAND WA 98034
KIM, ROLAND K 63-01119	SURVEILLANCE SYSTEMS ROCKLIN CA 95677

**CARD ROOM EMPLOYEE**

ANDERSON, KALEB R 68-37276	B	ALL STAR CASINO SILVERDALE WA 98383
CHOEUN, LYNNDA T 68-37260	B	SILVER DOLLAR CASINO/RENTON RENTON WA 98057

PERSON'S NAME  
LICENSE NUMBER

EMPLOYER'S NAME  
PREMISES LOCATION

**NEW APPLICATIONS**

**CARD ROOM EMPLOYEE**

DALIT, BERNADETTE F 68-07549	B	ROMAN CASINO SEATTLE WA 98178
FARMER, MICHAEL A 68-37277	B	LILAC LANES & CASINO SPOKANE WA 99208-7393
FLINT, TYLER R 68-33607	B	ALL STAR CASINO SILVERDALE WA 98383
GALVAN, RAFAEL Z 68-37269	B	GOLDIES SHORELINE CASINO SHORELINE WA 98133
GORDON, JESSICA L 68-37248	B	GREAT AMERICAN CASINO/TUKWILA TUKWILA WA 98168
HARRISON, KAITLIN E 68-37258	B	IMPERIAL PALACE CASINO AUBURN WA 98002
HUANG, JIAMING 68-37268	B	SILVER DOLLAR CASINO/RENTON RENTON WA 98057
JOHNSON, NICHOLAS C 68-37261	B	COYOTE BOB'S CASINO KENNEWICK WA 99336
KALII, JOHN A III 68-23656	B	FORTUNE POKER RENTON WA 98057
KEEVY, KRISTINA M 68-37274	B	LAST FRONTIER LA CENTER WA 98629-0000
KIRBY, OUTHAI 68-13862	B	PAPAS CASINO RESTAURANT & LOUNGE MOSES LAKE WA 98837
LEE, MARK J 68-33113	B	THE PALACE LA CENTER WA 98629
LEIVA AREVALO, FRANCISCO A 68-37272	B	BUZZ INN STEAKHOUSE/EAST WENATCHEE EAST WENATCHEE WA 98802
MARTINEZ, JUAN M II 68-26267	B	ACES POKER MOUNTLAKE TERRACE WA 98043
MCLEAN, SHESKA L 68-37254	B	GOLDIES SHORELINE CASINO SHORELINE WA 98133
MCLOONE, DAMION M 68-33676	B	THE PALACE LA CENTER WA 98629

PERSON'S NAME  
LICENSE NUMBER

EMPLOYER'S NAME  
PREMISES LOCATION

**NEW APPLICATIONS**

**CARD ROOM EMPLOYEE**

MONTEZ, SIEARRA L 68-37271	B	LILAC LANES & CASINO SPOKANE WA 99208-7393
NAVA-TRUJILLO, CRISTIAN D 68-37246	B	CLEARWATER SALOON & CASINO EAST WENATCHEE WA 98802
NGUYEN, HOANGOANH T 68-25178	B	FORTUNE POKER RENTON WA 98057
NGUYEN, MICHAEL H 68-31801	B	NEW PHOENIX LA CENTER WA 98629
PALERMO, CHRISTOPHER J 68-37259	B	NEW PHOENIX LA CENTER WA 98629
PEONIO, TARA E 68-13323	B	NEW PHOENIX LA CENTER WA 98629
PERKINS PATA, DYLAN J 68-37265	B	IMPERIAL PALACE CASINO AUBURN WA 98002
POITRAS, SHAVON C 68-36786	B	JOKER'S CASINO SPORTS BAR & FIESTA CD RM RICHLAND WA 99352-4122
PRADO, ASHLEIGH R 68-37270	B	LILAC LANES & CASINO SPOKANE WA 99208-7393
RAMOS, CHRISTIAN E 68-37266	B	JOKER'S CASINO SPORTS BAR & FIESTA CD RM RICHLAND WA 99352-4122
SINN, SONYA M 68-37255	B	CLEARWATER SALOON & CASINO EAST WENATCHEE WA 98802
SNETHEN, ABIGAIL G 68-37264	B	WILD GOOSE CASINO ELLENSBURG WA 98926
STERNAGEL, CHRISTIAN S 68-31360	B	NEW PHOENIX LA CENTER WA 98629
WHITEHOUSE, KAYA R 68-37262	B	MACAU CASINO LAKEWOOD WA 98499-4457
WOMACK-HOPE, AMAYAH J 68-37263	B	FORTUNE CASINO - LACEY LACEY WA 98516
YIM, PRISCILLA A 68-30356	B	FORTUNE POKER RENTON WA 98057

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**CHEHALIS CONFEDERATED TRIBES**

CURTIS- COLLINS, WILSON W  
69-55271

KAECH, CALI L  
69-55116

PALMER, BRIAN G  
69-39265

WILSON, SAMUEL E  
69-55272

**COLVILLE CONFEDERATED TRIBES**

DEGRAEVE, TAYLOR M  
69-55238

EDWARDS, CASEY A  
69-55187

FARRENS, REBECCA A  
69-55239

GALINDO, DEMI M  
69-55190

GARCIA, JOSEPH B  
69-55240

LOUIE, JESSE J  
69-55241

MATHESON, ISRAELIKA A  
69-55242

MELBY, ANALYSE M  
69-55188

RENFRO, SABRINA A  
69-55253

SCHILLING, JASILYNN R  
69-55189

STAFFORD, AARON F  
69-55244

STUART, MELINDA M  
69-55243

**COWLITZ INDIAN TRIBE**

ALVARADO-HELMS, KRISTINA Y  
69-55220

BEARD, AMANDA M  
69-55173

BOWEN, RYAN A  
69-55256

CARMICHAEL, JACIANNA M  
69-55210

CITRON, NOLAN K  
69-55171

ENDECOTT, KATLYNN E  
69-55263

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**COWLITZ INDIAN TRIBE**

HALICUS, JESSICA M  
69-55143

HELMS, JONATHAN E  
69-55145

HERNANDEZ, MAURICIO T  
69-55204

HOPKINS, GRACE O  
69-55160

INIGUEZ-DIARTE, CLAUDIA C  
69-55260

JOHN, MADISON K  
69-55255

JONES, DAKOTA R  
69-55277

KERRIGAN, SEAN J  
69-55167

LAM, DUONG T  
69-55261

MARTIN, SCOTT A  
69-55209

MAXSON, DEREK A  
69-55155

MERCADO, PEGGY G  
69-55259

MOAN, HIENH  
69-55157

MOWRY, ATTICUS W  
69-36224

MURPHY, TAYHAE M  
69-55197

NEIN, KIMBERLEY L  
69-55276

NOU, NARITH  
69-55202

ORDONA, IAN G  
69-43013

PALAKIKO, SILVIA Z  
69-55156

PHAN, TRANG D  
69-55166

SWANSON, JAMIE N  
69-55254

SZYMCZAK, EWA E  
69-55182

TESTON, RON G  
69-55195

UP, JULIE  
69-41315

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

COWLITZ INDIAN TRIBE

VAT, VANNDY  
69-55203

KALISPEL TRIBE

ABRAHAMSON, ANNE M  
69-26777

CARVAJAL, YOLANDA E  
69-55290

DIXON, CARTER A  
69-55161

ELLIS, OLIVIA  
69-52621

FISHER, DRAKE M  
69-55165

GALLAGHER, AARON C  
69-55172

HOWERTON, BRITTANY D  
69-55228

KILAYKO, MITCHELL L  
69-49643

LAZCANO, ANDRES  
69-55230

MERKLE, HOLLY S  
69-55162

NOME, JANNELL A  
69-12656

WENZEL, SARA-JEAN M  
69-55163

WILLIAMS, CLINT R  
69-55229

LUMMI NATION

AALPOEL, JOSHUA I  
69-47591

BEAHM, RUTH J  
69-55130

MADERA, SHYANNE M  
69-55127

REVEY, CHRISTOPHER A  
69-22570

RIELAND, PATRICIA A  
69-06333

TRUMP, GABRIEL H  
69-55129

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**MUCKLESHOOT INDIAN TRIBE**

BADILLO, MAXIMINO R  
69-09558

GARDNER, KYRSTEN M  
69-55218

GOMEZ, RAUL P  
69-55194

MCALPINE, MARLA D  
69-28086

MCLEMORE, JOSEPH C  
69-55222

NORMAN, BENJAMIN E  
69-55285

PESANTI, VINCENT A  
69-55223

VAIL, MICHAEL A  
69-55224

VIVAO, ASHLEY E  
69-45481

**NISQUALLY INDIAN TRIBE**

BLACKETER, JESSICA A  
69-38264

CAULDWELL, COURTNEY P  
69-55278

DUMONT, TRENTON W  
69-55198

FLOWERS, MARCUS D  
69-55124

FONTANOS, ADOR C  
69-55281

IRVIN, DARNELL A  
69-50399

LOOMIS, MORGAN B  
69-46929

MEDALLA, TRAVIS  
69-55232

PLANT, AARON C  
69-55146

SUMMERS, MICHAEL P  
69-55097

VICTORINO BUCHER, TYLER J  
69-55049



PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**NOOKSACK INDIAN TRIBE**

COOPER, CARMEN D  
69-55273

LEVIN, JEFFREY A  
69-55133

PEREZ RAMIREZ, DELMA A  
69-55175

**PORT GAMBLE S'KLALLAM TRIBE**

ARELLANO, AUSTIN P  
69-55233

BIGLER, RACHEL E  
69-55234

EMERY, HOLLY A  
69-55283

KALISH, NATHAN A  
69-55235

LARSON, JAMES P  
69-33996

LEE, DOMINIQUE A  
69-55236

MARKHAM, DAVID P  
69-55284

**PUYALLUP TRIBE OF INDIANS**

ANTHONY, ALEJANDRO E  
69-55257

APOSTOL, RENZ D  
69-55297

BROWN, ANDRE L JR  
69-55225

BRUCE, LUTHER L  
69-55179

CHAMBERS, ROBERT W JR  
69-55215

DOMINGUEZ CARDELL, NICHOLAS A  
69-44597

ESCATEL, LORENA  
69-55295

FRANCIS, DEVIN A  
69-55192

FREEMAN, EVERT L  
69-55316

GENEEHA, GABRIEL E  
69-52737

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**PUYALLUP TRIBE OF INDIANS**

HARRIS, QUINCY T  
69-52740

JOHNSON, DERRICK  
69-55178

KOSANOVICH, ZACHARY M  
69-55142

LIRA, ROBERT A JR  
69-55193

NORDGREN, KENNETH J  
69-55151

OSERA, FLORIEBETH S  
69-55201

POLLOCK, AUTUMN A  
69-55152

POSTLETHWAITE, GINA L  
69-55287

SOLE, JAKOB T  
69-55296

SUAREZ, ANDREW  
69-55191

UMAGAT JARATA, MIKHAEL A  
69-52689

YELLADAY, PATRICK J  
69-55150

**QUINULT NATION**

ARMSTRONG, CLINTON R II  
69-55168

PHILBRICK, DAREY A  
69-55169

PRESCOTT, EDWARD R  
69-44713

**SHOALWATER BAY TRIBE**

OLSEN, TREVOR M  
69-55180

**SNOQUALMIE TRIBE**

BONHOMME, DANIELLE C  
69-55226

BOYLE, CARSON A  
69-55266

BUI, NGUYEN M  
69-55308

BYERS, CARISSA A  
69-55267

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**SNOQUALMIE TRIBE**

CAEZ, CHRISTIAN J  
69-55268

CHAN, JEREMIAH K  
69-55208

CHAO, HSIUMING M  
69-55207

CHRONINGER, BAILEY N  
69-55265

ELDRIDGE, ANDREW W  
69-55205

FUHRMAN, JULIANNA J  
69-55313

HUDSON, MARCUS R  
69-55307

LEI, YAN YAN  
69-55270

MOLLESTON, CHANDLER A  
69-55306

MORGAN, BELTON J  
69-55206

OIU, ZHUO  
69-55310

SEGUYA, ANDREA T  
69-55305

TA, THI THUY TRANG  
69-55269

VILLAROU, MIREILLE A  
69-55312

YANG, MEI HUA  
69-55309

ZHENG, HAO  
69-55311

**SPOKANE TRIBE**

BAKER, RYAN M  
69-46839

CHANNELL, KEEGAN T  
69-55214

CUNNINGHAM, RYAN J  
69-55274

GRIMM, ROBERT E  
69-55135

LEPORE, PATRICK A  
69-46917

MARCEAU, ROBERTA L  
69-55282

MCDANIEL, ZANE A  
69-55134

MCDOUGALL, CONNER E  
69-55177

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**SPOKANE TRIBE**

MICHAEL, KAYLEE E  
69-42007

NAYLOR, DINA R  
69-55200

NOON, CONSTANCE D  
69-55275

SENER, JUSTIN R  
69-55176

WADE, LESLIE  
69-55199

**SQUAXIN ISLAND TRIBE**

HUBBARD, DYLAN T  
69-55249

OLSON, ANDREW G  
69-55211

**SUQUAMISH TRIBE**

BRIGHAM, JOHNATHAN M  
69-55196

CHAMPEAU, STEVEN D JR  
69-55292

FOX, NICHOLAS E  
69-55250

GREEN, DARNELL G  
69-55245

HANNIFAN, JASON H  
69-55174

HERNANDEZ, HANNAH L  
69-55248

HUTTON, CORI V  
69-55251

MCLEAN, WILLIAM E  
69-55247

OGITANI, KAI T  
69-55186

RICHEY, DANI M  
69-45235

RIZZO, KYLE J  
69-55246

SWARTZ, DEANA C  
69-04300

WAHOVIK, ZACHERY B  
69-55252

WALLACE, KEVIN L  
69-55183

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

**SWINOMISH INDIAN TRIBAL COMMUNITY**

ANDRES, WILSON C  
69-55216

KAUFMAN, DANIEL C  
69-55298

RADKE, APRIL M  
69-55217

SMITH, EMMA R  
69-55299

**THE TULALIP TRIBES**

HANLEY, CHRISTIAN Z  
69-55164

HUNWAN, SAYPIN S  
69-55159

LOVATO, ROBERT M  
69-55139

LYONS, MICHAEL J  
69-55262

NELSON, JEFFREY D  
69-55221

PAYNE, CARLY D  
69-43418

RICCO, MELISSA A  
69-55264

SALVATI, CHRISTOPHER J  
69-55185

SCHULTZ, MATTHEW L  
69-29307

TURNER, PAL E  
69-55158

WILDE, ELEANOR G  
69-52145

YOUNG, KATIE D  
69-55138

**UPPER SKAGIT INDIAN TRIBE**

GORDON, KYLE J  
69-55231

SEBURN, ALEXANDER D  
69-55213

WRIGHT, THOMAS S  
69-55279

**YAKAMA NATION**

ANZAR, BRIANNA C  
69-44498

CORDOVA, NICHOLAS A  
69-55332

PERSON'S NAME

CERTIFICATION / ELIGIBILITY NUMBER

**NEW APPLICATIONS**

**CLASS III GAMING EMPLOYEE**

YAKAMA NATION

JIM, DEBRA P  
69-55333

WHITNEY, VICTORIA L  
69-40186

WYMAN-DAVE, KEISHA L  
69-55331



## HOUSE-BANKED PUBLIC CARD ROOM REPORT

<b>Licensed and Operating</b>			<b>37</b>		
	City	Commission Approval Date	License Expiration Date	Org #	License #
ALL STAR CASINO	SILVERDALE	Jan 14, 1999	Jun 30, 2024	00-18357	67-00058
BLACK PEARL RESTAURANT & CARD ROOM	SPOKANE VALLEY	Jan 10, 2013	Sep 30, 2023	00-22440	67-00321
BUZZ INN STEAKHOUSE/EAST WENATCHEE	EAST WENATCHEE	Oct 10, 2002	Dec 31, 2023	00-11170	67-00183
CARIBBEAN CARDROOM	KIRKLAND	Nov 14, 2019	Sep 30, 2023	00-24515	67-00343
CASINO CARIBBEAN	KIRKLAND	Nov 14, 2019	Sep 30, 2023	00-24512	67-00341
CASINO CARIBBEAN	YAKIMA	Nov 14, 2019	Sep 30, 2023	00-24513	67-00342
CHIPS CASINO/LAKEWOOD	LAKEWOOD	Apr 8, 1999	Dec 31, 2023	00-17414	67-00020
CLEARWATER SALOON & CASINO	EAST WENATCHEE	Feb 14, 2019	Dec 31, 2023	00-24296	67-00339
COYOTE BOB'S CASINO	KENNEWICK	Jul 10, 2009	Mar 31, 2024	00-21848	67-00282
CRAZY MOOSE CASINO II/MOUNTLAKE TERRACE	MOUNTLAKE TERRACE	Jul 10, 2009	Mar 31, 2024	00-21849	67-00283
CRAZY MOOSE CASINO/PASCO	PASCO	Jul 10, 2009	Mar 31, 2024	00-21847	67-00281
FORTUNE CASINO - LACEY	LACEY	Jul 14, 2022	Mar 31, 2024	00-24868	67-00347
FORTUNE CASINO - RENTON	RENTON	Jan 8, 2015	Sep 30, 2023	00-23339	67-00327
FORTUNE CASINO - TUKWILA	TUKWILA	Oct 8, 2015	Jun 30, 2024	00-23465	67-00329
GOLDIES SHORELINE CASINO	SHORELINE	May 13, 1999	Dec 31, 2023	00-17610	67-00016
GREAT AMERICAN CASINO/EVERETT	EVERETT	Nov 12, 1998	Dec 31, 2023	00-19513	67-00194
GREAT AMERICAN CASINO/TUKWILA	TUKWILA	Jan 15, 1998	Sep 30, 2023	00-12554	67-00012
IMPERIAL PALACE CASINO	AUBURN	Jan 9, 2003	Dec 31, 2023	00-19477	67-00192
JOKER'S CASINO SPORTS BAR & FIESTA CD RM	RICHLAND	Nov 12, 1998	Dec 31, 2023	00-15224	67-00006
LANCER LANES/REST AND CASINO	CLARKSTON	Nov 13, 2008	Sep 30, 2023	00-21681	67-00276
LILAC LANES & CASINO	SPOKANE	Jul 12, 2007	Jun 30, 2024	00-21305	67-00267
MACAU CASINO	TUKWILA	Nov 14, 2019	Sep 30, 2023	00-24514	67-00344



<b>Licensed and Operating</b>			<b>37</b>		
	<b>City</b>	<b>Commission Approval Date</b>	<b>License Expiration Date</b>	<b>Org #</b>	<b>License #</b>
MACAU CASINO	LAKEWOOD	Nov 14, 2019	Sep 30, 2023	00-24516	67-00345
NEW PHOENIX	LA CENTER	Oct 6, 2022	Jun 30, 2024	00-24981	67-00349
NOB HILL CASINO	YAKIMA	Sep 12, 2001	Dec 31, 2023	00-13069	67-00173
PAPAS CASINO RESTAURANT & LOUNGE	MOSES LAKE	Aug 13, 1998	Jun 30, 2024	00-02788	67-00004
RC'S AT VALLEY LANES	SUNNYSIDE	Nov 16, 2017	Mar 31, 2024	00-16220	67-00336
RIVERSIDE CASINO	TUKWILA	Aug 14, 2003	Jun 30, 2024	00-19369	67-00187
ROMAN CASINO	SEATTLE	Feb 10, 2000	Mar 31, 2024	00-17613	67-00057
ROXBURY LANES AND CASINO	SEATTLE	Nov 18, 2004	Jun 30, 2024	00-20113	67-00231
SILVER DOLLAR CASINO/MILL CREEK	MILL CREEK	Sep 9, 2010	Jun 30, 2024	00-22131	67-00302
SILVER DOLLAR CASINO/RENTON	RENTON	Sep 9, 2010	Jun 30, 2024	00-22134	67-00305
SILVER DOLLAR CASINO/SEATAC	SEATAC	Sep 9, 2010	Jun 30, 2024	00-22128	67-00299
SLO PITCH PUB & EATERY	BELLINGHAM	Aug 12, 1999	Jun 30, 2024	00-16759	67-00038
THE PALACE	LA CENTER	Apr 9, 1998	Jun 30, 2024	00-16903	67-00010
WILD GOOSE CASINO	ELLENSBURG	Apr 8, 2004	Dec 31, 2023	00-20009	67-00212
ZEPPOZ	PULLMAN	Nov 13, 2008	Mar 31, 2024	00-18777	67-00209

<b>Licensed but Not Currently Operating</b>			<b>5</b>		
	<b>City</b>	<b>Commission Approval Date</b>	<b>License Expiration Date</b>	<b>Org #</b>	<b>License #</b>
EMERALD DOWNS	AUBURN	May 11, 2017	Mar 31, 2024	00-23814	67-00335
GREAT AMERICAN CASINO/LAKEWOOD	LAKEWOOD	Aug 14, 2003	Jun 30, 2024	00-19258	67-00184
LUCKY DRAGONZ CASINO	SEATTLE	Mar 10, 2022	Jun 30, 2024	00-23001	67-00323
ROYAL CASINO	EVERETT	Sep 9, 2010	Jun 30, 2024	00-22130	67-00301
WIZARDS CASINO	BURIEN	Feb 11, 2010	Dec 31, 2023	00-21998	67-00287

**Applications Pending****3**

	City	Commission Approval Date	License Expiration Date	Org #	License #
IMPERIAL PALACE CASINO	TUKWILA			00-24893	67-00348
PALACE CASINO LAKEWOOD	LAKWOOD			00-16542	67-00028
RED DRAGON CASINO	MOUNTLAKE TERRACE			00-22459	67-00315



**STATE OF WASHINGTON  
GAMBLING COMMISSION**

*"Protect the Public by Ensuring that Gambling is Legal and Honest"*

07 2023

Chanmalaty Touch  
License No. 65-04600

Tab 2 – Placeholder



**STATE OF WASHINGTON  
GAMBLING COMMISSION**

*“Protect the Public by Ensuring that Gambling is Legal and Honest”*

August 10, 2023

<b>TO:</b>	<b>COMMISSIONERS</b> Alicia Levy, Chair Julia Patterson, Vice Chair Bud Sizemore Sarah Lawson Anders Ibsen	<b>EX-OFFICIO MEMBERS</b> Senator Steve Conway Senator Jeff Holy Representative Shelley Kloba Representative Skyler Rude
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**FROM:** Tony Czar, Special Agent  
Regulation Unit

**SUBJECT:** Special Olympics of Washington – 2022 Western Washington Enhanced Raffle Results

At the July 2022 Commission meeting, the Commissioners approved a plan submitted by the Special Olympics of Washington (SOWA) to conduct an enhanced raffle in Western Washington. SOWA held the grand prize drawing on December 2, 2022.

In accordance with WAC 230-11-103, charitable or non-profit licensees conducting enhanced raffles must have an independent audit conducted on each enhanced raffle and the associated smaller raffles. SOWA submitted the auditor’s report in accordance with the rule.

The purpose of this memo is to report the results of the enhanced raffle and the agent’s review. This is the tenth enhanced raffle SOWA has reported on.

The grand prize offered was a 2022 Winnebago Hike H120S (valued at \$41,000), plus the choice between a Ford F-150 (valued at \$40,000) or \$40,000 cash. Prizes 2-335 included vacations, cash or merchandise.

**The results of the December 2, 2022, enhanced raffle and the associated raffles are as follows:**

Tickets Sold	Sales of Raffle Tickets	Add-On Tickets Sold	Sales of Add-On Tickets	Gross Raffle Ticket Sales	Prizes Awarded	Other Expenses	Net Proceeds from Enhanced Raffle
13,276	\$485,275.	11,725	\$161,525.	\$646,800.	\$190,900	\$274,210.	\$181,690.

**Drawing details and prizes:**

Drawing	Date	Location	Prizes Awarded
Appreciation	September 9, 2022	SOWA Office	\$1,000
Early Bird	November 4, 2022	SOWA Office	Winner's choice: Tesla Model 3, BMW X5, or \$50,000 cash.
Add-On	December 2, 2022	SOWA Office	\$50,000
Grand Prize	December 2, 2022	SOWA Office	2022 Winnebago Hike H120S (valued at \$41,000), plus choice between Ford F-150 (valued at \$40,000) or \$40,000 cash. Prizes 2-335 include cash or merchandise.  2 <sup>nd</sup> & 3 <sup>rd</sup> prize: \$3,500 4 <sup>th</sup> – 10 <sup>th</sup> prize: \$3,000 to \$1,000*

\* In addition to the prizes noted above, on grand prize drawing day at the SOWA office on December 2, 2022, there were an additional 325 prizes awarded with values ranging from \$50 to \$100.

**Use of Proceeds**

Net proceeds of \$181,690 from the Enhanced Raffle will benefit SOWA by supporting program activities.

**Regulatory Review**

An agent from the Regulation Unit conducted an inspection of the enhanced raffle. Prior to the inspection, he reviewed the approved enhanced raffle plan and reviewed the case reporting system for compliance history.

The agent compared the enhanced raffle ticket sales to the bank statements and verified the money from all ticket sales was deposited. The agent noted 13,276 tickets were sold for the grand prize drawing and 11,725 tickets were sold for the Add-On drawing. The agent contacted the top-tier Grand Prize Drawing winner, the Appreciation Drawing winner, the Early Bird Winner, the Add-On prize winner, and winners of the 2<sup>nd</sup> through 10<sup>th</sup> prizes. All winners contacted confirmed that they received their prizes.

The agent reviewed the licensee's gambling records to verify accuracy and compliance with WAC. He noted no discrepancies.

The agent confirmed that SOWA operated the enhanced raffle within the plan approved by the Commissioners.

**Regulatory Actions**

There were no state or federal regulatory actions taken in relation to this enhanced raffle.



### **Purpose for Conducting the Enhanced Raffle**

To provide the necessary resources for the organization to enhance its programming, and to grow its athlete base.

### **Enhanced Raffle Details**

Ticket costs: \$50 each, 3-pack for \$125, or 6-pack for \$200.

Weekly Add-on tickets are \$20 each, 3-pack for \$50, or 6-pack for \$75.

50/50 Add-on tickets are \$20 each, 3-pack for \$50, or 6-pack for \$75.

Value Pack, which includes an 8-pack of raffle tickets and a 12-pack of weekly add-on tickets for \$350.

Super Value Pack, which includes an 8-pack of raffle tickets, a 12-pack of weekly add-on tickets, and a 20-pack of 50/50 add-on tickets for \$500.

<b>Drawing</b>	<b>Date</b>	<b>Location</b>	<b>Prizes Available</b>
Appreciation	September 8, 2023	2815 2 <sup>nd</sup> Ave, Suite 370, Seattle, WA	\$1,000
Early Bird	November 3, 2023	2815 2 <sup>nd</sup> Ave, Suite 370, Seattle, WA	Winner's Choice: Ford Bronco Sport or \$25,000.
Grand Prize 50/50 Add-On	December 1, 2023	2815 2 <sup>nd</sup> Ave, Suite 370, Seattle, WA	Winner's Choice: 2024 Tesla Model Y, 2024 Ford F-150 Super Crew XLT 4x4 Truck or 2024 Mercedes Benz C-Class or \$50,000.
Weekly Add-on (9)	September 29, 2023 October 6, 2023 October 13, 2023 October 20, 2023 October 27, 2023 November 3, 2023 November 10, 2023 November 17, 2023 November 22, 2023	2815 2 <sup>nd</sup> Ave, Suite 370, Seattle, WA	\$2,500 (each)



### **Security and Purchase of Prizes**

All prizes will be purchased with the raffle revenue and awarded after each applicable drawing.

### **Protection of the integrity of the raffle**

SOWA will conduct an audit of ticket stubs prior to each drawing. The audit will be performed by a member of the SOWA staff who will use an Excel-generated random list of tickets to audit. The tickets will be made up of the entire population of tickets sold, both active and voided. The sample size will be no less than 90 tickets.

All ticket purchase proceeds of the raffle, whether the tickets are sold in the SOWA office by designated staff or through the call center, will be deposited into a SOWA raffle account which is separate from the organization's general operating funds.

An employee of SOWA will draw all winning raffle tickets.

### **Use of Proceeds**

The proceeds will be used to further drive the vision of SOWA.

### **Protection in the Event of Low Ticket Sales**

In the event that Special Olympics Washington determines ticket sales are insufficient to qualify for a complete enhanced raffle to move forward, the enhanced raffle winner must receive fifty percent of the net proceeds in excess of expenses as the Grand Prize. The enhanced raffle winner will receive a choice between an annuity value equal to 50% of the net proceeds in excess of expenses paid by annuity over 20 years, or a one-time cash payment of 70% of the annuity value. Unless, the raffle ticket sales fall below the breakeven amount of 5,395 tickets sold, and net proceeds in excess of expenses produce a negative value, Special Olympics Washington will consider refunding all purchases and cancelling the raffle due to insufficient sales of tickets or issuing a flat \$5,000 to the Grand Prize winner.

### **Projected Budget**

SOWA estimates the breakeven number of ticket sales to be 5,395 plus 4,765 weekly add-on tickets, and 4,765 50/50 add-on tickets. SOWA estimates net proceeds to be between \$0 and \$308,295, provided 13,277 grand prize tickets, 11,730 weekly add-on tickets, and 11,730 50/50 add-on tickets are sold.

### **Dedicated Employee Responsible for Oversight of the Enhanced Raffle Operation:**

Mary Do, Chief Operating Officer of SOWA, will be overseeing the enhanced raffle operation.

Commissioners and Ex Officios

August 10, 2023

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**Licensed Service Supplier Managing the Enhanced Raffle**

NZ Consulting, Inc., owned 100% by Neal Zeavy, is managing the enhanced raffle for SOWA.

**Licensed Call Center Contracted to Receive Enhanced Raffle Ticket Sales**

Incept Corporation, owned 100% by Salvatore Falletta, will be the call center contracted to receive enhanced raffle tickets sales for SOWA.

Attachments (1)

# **Special Olympics Washington**



## **Special Olympics Washington Enhanced Raffle Plan 2023 “Special Olympics Washington Dream Adventure Raffle”**

### **Purpose**

Special Olympics Washington serves more than 12,000 participants across the state which is just a fraction of the nearly 170,000\* individuals with intellectual disabilities (ID) in Washington who are eligible for its programs.

Through the challenges of the pandemic, one thing remained clear: Special Olympics Washington is a constant in the lives of its athletes. For individuals with intellectual disabilities in Washington, Special Olympics is often the only place where they can participate in physical activity, health education, and sports in their communities, as well as at a regional and state level. The need to continue these programs is more vital than ever.

Since the inception of the Special Olympics Washington Dream House Raffle in 2013 and the Dream Adventure Raffle in 2022, proceeds have enabled the organization to unlock old financial constraints and open the door to new programs, with the goal of serving more people with intellectual disabilities across the state. Both raffles allowed the organization to react and pivot quickly to provide athletes with critical resources and support during the unprecedented time of the pandemic, including critical sports, health and wellness programs, and leadership programming. Now, as the organization navigates through a post-pandemic world, proceeds from the raffles are enabling the organization to bring participants safely back onto the fields with their friends and reconnect with their communities.

With the funds earned from the Dream Adventure Raffle, Special Olympics Washington can continue the journey of reaching into every corner of the state to make sure EVERYONE has the opportunity to be tested like champions!

### **About Special Olympics Washington**

Special Olympics Washington was incorporated in 1975 and is a 501(c)(3) organization in Washington State. The mission of Special Olympics is to provide year-round sports training and athletic competition in a variety of Olympic-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy and participate in the sharing of gifts, skills and friendship with their families, other Special Olympics athletes and the community. Special Olympics Washington currently serves more than 12,000 participants and has a support system of nearly 4,000 volunteers. The organization is part of Special Olympics International, which serves more than 6.7 million athletes and Unified Sports partners in more than 200 countries and jurisdictions.

*\*Number of Individuals in Washington State with IDD: 170,000. Source: [Arc of Washington 2023 Advocates Notebook](#)*

## **About Our Athletes**

Special Olympics serves individuals with intellectual disabilities. The term is used when a person has certain limitations in cognitive functioning and skills, including communication, social and self-care skills. The goal of Special Olympics Washington is to reach the approximately 170,000 people in Washington State with ID. Special Olympics Washington athletes range in age from 8 years old to the oldest of our athletes who compete into their 70's. We also have a Young Athletes program for children with and without ID ages 2 to 7.

Special Olympics Washington celebrates people's abilities rather than focus on their disabilities. No matter the person's age or skill level, Special Olympics Washington has something for anyone with intellectual disabilities. We deliver high-quality, year-round competition and training opportunities in an inclusive culture that stresses athletic excellence, rewards determination, emphasizes health, brings together communities and celebrates personal achievement.

## **Empowering Leaders On and Off the Playing Field**

In addition to 23 Olympic-type sports offerings and 180+ local and state competitions, Special Olympics Washington also puts an emphasis on empowering our athletes off the playing field by providing opportunities through our Athlete Leadership Program, Unified Champions Schools®, and Inclusive Health initiatives.

Athlete Leadership: Athletes are empowered to use their voices to assume meaningful leadership roles, influence change in the Special Olympics movement, and help create more accepting and inclusive communities. In 2022, Special Olympics Washington inducted its first athlete as the chairperson of its board of directors.

Unified Champion Schools®: Special Olympics Unified Champion Schools® builds on Special Olympics' values, principles, practices, experiences, and impacts to shape a generation that welcomes everyone.

The Special Olympics Unified Champion Schools® program is aimed at promoting social inclusion through intentionally planned and implemented activities affecting systems-wide change. With sports as the foundation, the three-component model offers a unique combination of effective activities that equip young people with tools and training to create sports, classroom, and school climates of acceptance. These are school climates where students with disabilities feel welcome and are routinely included in, and feel a part of, all activities, opportunities, and functions.

Inclusive Health: Despite severe need and higher health risks, people with intellectual disabilities (ID) are often denied health services and die on average 16 years sooner than the general population. Special Olympics Health is creating a world where people with intellectual disabilities have every opportunity to be healthy.

Inclusive health means people with ID can take full advantage of the same health programs and services available to people who do not have ID. Currently, people with ID face significant challenges in accessing quality health care and obtaining opportunities that promote fitness and wellness, resulting in pronounced health disparities and reduced life expectancy. Special Olympics' health programming focuses on improving the physical and social-emotional well-being of people with ID by increasing inclusion in health care, wellness and health systems for Special Olympics athletes and others with ID.

All our programs and services are provided at no cost to our athletes, Unified partners and/or their families, and will continue to be made possible through the Dream House Raffle, Dream Adventure Raffle, individual giving, special events, grants, and corporate partnerships.

**SPECIAL OLYMPICS WASHINGTON**  
**Enhanced Raffle Rules**  
**2023**

Special Olympics Washington, a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code, is conducting this raffle pursuant to SB 5723, Washington Administrative Code 230-03-152, to raise funds for ongoing charitable purposes. The Rules and Regulations of the Special Olympics Washington raffle are set forth below. By purchasing a raffle ticket, the purchaser agrees to be bound by these rules and regulations. Special Olympics Washington's interpretation and application of the rules and regulations shall be final.

The 2023 Dream Adventure Raffle will start on August 15, 2023. The Grand Prize Drawing for Special Olympics Washington Dream Adventure Raffle will be held on Friday, December 1, 2023, at the Special Olympics Washington office at: 2815 2nd Ave, Suite 370, Seattle, WA, 98121. All drawings will be held at 2815 2nd Ave, Suite 370, Seattle, WA, 98121.

Tickets will not be sold after November 17, 2023. Tickets may sell out before that time. An independent raffle auditor will supervise the drawing. The drawing for prizes may be open to the public, but the winner does not need to be present to win.

Only 30,000 tickets will be sold. The chances of winning are based on that number. If fewer tickets are sold, the chances of winning the Grand Prize and other prizes improve. The IRS has taken the position that amounts paid for chances in raffles, lotteries or similar drawings for valuable prizes are not gifts, and consequently do not qualify as deductible charitable contributions.

Prize winners assume all fees, local, state, and federal taxes (including but not limited to income taxes based on the value of the prize). Likewise, there may be federal taxes and state and/or local tax consequences if winners select alternate cash prizes (See Prizes section below). Special Olympics Washington takes no responsibility for any tax liabilities. Consult your tax advisor. This offer is void where prohibited by law, and all federal, state and local laws and regulations apply.

By entering this raffle, entrants accept and agree (1) to be bound by all the rules, limitations and restrictions set forth here and (2) that their names and/or likenesses may be disclosed to and used by the news media and may otherwise be used by Special Olympics Washington for publicity purposes and in lists of prize winners to be published in area newspapers and announced on the Special Olympics Washington raffle website. Special Olympics Washington will provide purchasers with all raffle information as required by WAC 230-11-015. Other rules and regulations may apply. Please contact Special Olympics Washington if you have questions. Special Olympics Washington's interpretation and application of the rules and regulations shall be final.

By entering this raffle, each participant releases Special Olympics Washington, its directors, officers, employees and agents from any and all liability for injuries, losses or damages of any kind caused by participating in the raffle or winning any prize or resulting from acceptance, possession, use or misuse of any prize, and each winner agrees to indemnify and hold Special Olympics Washington harmless from any and all losses, damages, rights, claims and actions of any kind rising in connection with or as a result of participating in the raffle or the winner's acceptance or use of any prize.

Special Olympics Washington will provide a "Q&A" document that will be given to potential ticket purchasers and be prominently displayed on the Dream Adventure Raffle website:  
[www.PugetSoundRaffle.com](http://www.PugetSoundRaffle.com).

**Tickets:**

- Raffle tickets cost \$50 each, 3-packs for \$125, or 6-packs for \$200.
- Weekly Add-On Tickets are one for \$20, 3-pack for \$50 or 6-pack for \$75.
- 50/50 Add-On Tickets are one for \$20, 3-pack for \$50 or 6-pack for \$75.
- A Value Pack is available for purchase and includes an 8-pack of raffle tickets and a 12-pack of weekly add-on tickets for \$350.
- A Super Value Pack is available for purchase and includes an 8-pack of raffle tickets, a 12-pack of weekly add-on tickets, and a 20-pack of 50/50 add-on tickets for \$500.

Only one method of payment, one name, and one mailing address are permitted per ticket or ticket pack. Only one eligible person may be entered in the raffle per ticket sold. If the name of more than one person is submitted with a ticket purchase, and that ticket is selected as a winning ticket, then the person named first will be deemed the holder of record of that ticket and declared the winner regardless of who paid for the ticket. Division of prize by a group purchasing a ticket in common shall be the sole responsibility of the person named as the holder of record of that ticket, should that ticket be selected as a winner.

Tickets will be available for purchase starting August 15, 2023.

Tickets purchased by August 25, 2023, will be eligible for the Appreciation Drawing - \$1,000 (drawing date: September 8, 2023), the Early Bird Drawing - Ford Bronco Sport or \$25,000 cash (drawing date: November 3, 2023), and the Grand Prize Drawing (drawing date: December 1, 2023).

Tickets purchased by October 20, 2023, will be eligible for the Early Bird Drawing – Ford Bronco Sport or \$25,000 cash (drawing date: November 3, 2023) and the Grand Prize Drawing (drawing date: December 1, 2023).

All such tickets, including all winning tickets from the Appreciation Drawing and the Early Bird Drawing, will be included in applicable subsequent drawings as well as the Grand Prize drawing. Tickets purchased by November 17, 2023, will be eligible for the Grand Prize drawing (drawing date: December 1, 2023).

**New to 2023:** In addition, raffle participants who purchase at least one raffle ticket are eligible to purchase a Weekly Add-On ticket which provides entry into any remaining Weekly Add-On Drawings and a 50/50 Add-On ticket which provides entry into the 50/50 Add-On drawing. Weekly Add-On tickets are one for \$20, 3-pack for \$50 or 6-pack for \$75. 50/50 Add-On tickets are one for \$20, 3-pack for \$50 or 6-pack for \$75. Rules for purchasing Add-On tickets are as follows:

Add-On tickets must be ordered in conjunction with a raffle ticket. Add-On ticket orders will not be accepted after the original raffle ticket order. Only one method of payment and only one mailing address are permitted. An individual can purchase as many Add-On tickets as they wish. There is no limit on the maximum number of Add-On tickets that may be sold.

Special Olympics Washington reserves the right to reject any entry form that is submitted with payment that does not constitute “good funds.” All defective or physically altered entry forms will be immediately disqualified by Special Olympics Washington. Prior to the Grand Prize drawing, Special Olympics Washington will make a reasonable effort to notify the individual and/or entity that submits such an entry form or one which has been rejected because the credit card or check did not clear that the entry has been rejected by attempting to make contact through the information provided at the time of submitting the purchase request. All orders for tickets for the Weekly-Add On drawings, Appreciation drawings, and Early Bird drawings must be received and/or

purchased by the indicated deadlines. Any orders received after these deadlines will be held for the subsequent drawings, if applicable and Grand Prize drawing. Special Olympics Washington assumes no responsibility for lost, late, misdirected, or non-delivered mail or fax messages, or any other failure to receive orders or deliver receipts prior to the drawing deadlines.

A raffle participant's sole and exclusive remedy for Special Olympics Washington's breach shall be limited to the return of the purchase price paid for his or her raffle ticket(s). In no event shall Special Olympics Washington, its directors, officers, employees, agents, or representatives be liable to any party for any loss or injuries to earnings, profits, or goodwill, or for any incidental, special, punitive or consequential damages of any person or entity whether arising in contract, tort or otherwise, even if advised of the possibility of such damages.

#### **How to Purchase:**

To purchase tickets: use the order form provided and fax the order form to (206) 361-8158, or you may mail it to Special Olympics Washington Dream Adventure Raffle, 2815 2<sup>nd</sup> Avenue, Suite 370 Seattle, WA, 98121 or call 877-740-9633, providing your name, address, phone number, email address for confirmation along with your credit card number, credit card security code and expiration date. Tickets cannot be purchased on the raffle website or by email. **Any entry form submitted by email will be rejected.** You may also purchase tickets in person at Special Olympics Washington 2815 2<sup>nd</sup> Avenue, Suite 370, Seattle, WA 98121. All entries must include payment by cash, check, money order or credit card in US dollars. Special Olympics Washington reserves the right to reject any entry form that is submitted with payment that does not constitute "good funds." No refunds will be made except under the following circumstances: any ticket order with payment received after 30,000 tickets have been sold or after November 17, 2023, will be returned. No other refunds are available except in the exclusive discretion of Special Olympics Washington. Special Olympics Washington assumes no responsibility for lost, late, misdirected, or non-delivered mail or fax messages, or any other failure to receive orders or deliver receipts prior to the drawing deadlines.

#### **Selection of Winners:**

The Special Olympics Washington Dream Adventure Raffle Grand Prize drawing will be held on December 1, 2023, from all eligible raffle tickets. Winners need not be present to win. In addition to the Grand Prize drawing, Special Olympics Washington will conduct the following additional drawings:

- Appreciation Drawing on September 8, 2023
- Early Bird Drawing on November 3, 2023
- Weekly Add-On drawing on September 29, 2023
- Weekly Add-On drawing on October 6, 2023
- Weekly Add-On drawing on October 13, 2023
- Weekly Add-On drawing on October 20, 2023
- Weekly Add-On drawing on October 27, 2023
- Weekly Add-On drawing on November 3, 2023
- Weekly Add-On drawing on November 10, 2023
- Weekly Add-On drawing on November 17, 2023
- Weekly Add-On drawing on November 22, 2023
- 50/50 Add-On drawing on December 1, 2023

All drawings will take place at the Special Olympics Washington office: 2815 2<sup>nd</sup> Avenue, Suite 370, Seattle, WA, 98121.



Winners will be notified according to the contact information provided to Special Olympics Washington at the time of ticket purchase. In addition to the list of winners posted on the Special Olympics Washington raffle web site (PugetSoundRaffle.com), a list of winners may be obtained from Special Olympics Washington or by sending a self-addressed, stamped envelope to Special Olympics Washington Dream Adventure Raffle, 2815 2<sup>nd</sup> Avenue, Suite 370, Seattle, WA, 98121 within one week of the drawing.

In order to collect prizes valued \$5,000 or more, a ticket winner must sign and deliver to Special Olympics Washington: (a) a sworn affidavit of eligibility in accordance with these Rules and applicable law, including without limitation that he or she is at least 18 years old; (b) such written information as is required by any applicable tax and/or real estate laws, including without limitation his or her Social Security Number; (c) proof of identity in forms satisfactory to the Special Olympics Washington showing that the person claiming the prize is the same person who is named on the winning raffle ticket.; and (d) the winning ticket stub. Winners of prizes of \$5,000 or more may be required to submit a W-2G, Form 5754 or similar tax form (provided by Special Olympics Washington) for tax withholding purposes. There are a total of 335 prizes for the Grand Prize drawing.

**Eligibility:**

Anyone 18 years of age or older may enter. Special Olympics Washington employees, members of the Board of Directors, authorized agents and employees thereof, consultants, attorneys, independent accountant firm, and their spouses and children living in the same household are excluded from participating and are not eligible to win a prize. All federal, state, and local laws and regulations apply. The raffle is void where prohibited or restricted by law. An affidavit of eligibility may be required from prize winners.

**Prizes:**

The Grand Prize is the winner's choice between a 2024 Tesla Model Y, 2024 Ford F-150 SuperCrew XLT 4x4 Truck, or 2024 Mercedes Benz C-Class, or \$50,000 in cash (Value: \$50,000). A detailed description will be referred to in all raffle materials. Complete prize list below:

All vehicles come as base model factory equipped unless otherwise noted on the raffle website. Winner(s) are responsible for all state or local license, title, registration, taxes, or fees associated with the vehicle, as well as insurance (proof of which must be shown prior to delivery) and pickup or delivery costs at the dealership as well as any non-standard options chosen by the winner and negotiated with the dealership. All contracted vehicles are subject to availability at the automobile dealer and may be selected by Special Olympics Washington and may be substituted with a comparable vehicle by Special Olympics Washington or with the cash alternate prize.

Vacation travel is as noted on the raffle website. Please note that vacation travel is for land only and does not include airfare unless otherwise noted on the raffle website. All vacation and travel prizes are subject to space and availability. All gratuities, taxes and fees are the responsibility of the winner. Winners of travel related prizes must comply with all applicable requirements and restrictions related to said prizes including without limitation applicable travel dates, age restrictions, liability waivers, travel documentation and reservation and confirmation procedures. All vacations are subject to availability and may be substituted with a comparable vacation prize or with a cash alternate prize.

All unclaimed prizes will be returned to Special Olympics Washington 60 days after the Grand Prize drawing date.

**Appreciation Drawing:**

\$1,000 cash (Value: \$1,000)

**Early Bird Drawing:**

Winner's choice between a 2024 Ford Bronco Sport or \$25,000 in cash (Value: \$25,000)

**Weekly Add-On Drawing:**

Prizes: 9 - \$2,500 cash prizes awarded over 9 weeks (Value: \$22,500)

**50/50 Add-On Drawing:**

Prize: Winner will be awarded half the jackpot of the 50/50 Add-On Drawing.

**Grand Prize Drawing:**

Grand Prize: The Grand Prize is the winner's choice between a 2024 Tesla Model Y, 2024 Ford F-150 SuperCrew XLT 4x4 Truck, or 2024 Mercedes Benz C-Class, or \$50,000 in cash (Value: \$50,000).

2nd Prize: Las Vegas Car Racing Experience or \$1,000 cash (Value: \$1,000)

3rd Prize: Vacation to Mexico or \$1,000 cash (Value: \$1,000)

4th Prize: Vacation to Italy or \$1,000 cash (Value: \$1,000)

5th Prize: Caribbean Cruise or \$1,000 cash (Value: \$1,000)

6th Prize: Seattle Mariner Tickets or \$1,000 cash (Value: \$1,000)

7th Prize: Seattle Kraken Tickets or \$1,000 cash (Value: \$1,000)

8th Prize: Seattle Seahawks Tickets \$1,000 cash (Value: \$1,000)

Prizes 9-58: 50 - \$100 gift cards (Value: \$5,000)

Prizes 59-88: 30 - \$75 gift cards (Value: \$2,250)

Prizes 89-335: 247 - \$50 gift cards (Value: \$12,350)

Gift card winners (9-335) will be notified via email and will have a choice between receiving a gift card from one of the following brands:

- AMC Theaters
- Amazon.com
- Best Buy
- Chipotle
- Darden Restaurants
- Grubhub
- Home Depot
- HomeGoods
- Hotels.com
- Landry's Restaurants
- Panera Bread
- REI
- Target
- Visa Prepaid Card

**General Terms and Conditions:**

No express warranties are given and no affirmation of Special Olympics Washington by words and/or actions will constitute a warranty. The vehicles will be transferred to the prize winners "as is, where is, and with all faults." Special Olympics Washington does not provide any guarantee or warranty, expressed or implied, in connection with the vehicles and accepts no liability or

responsibility regarding the construction or condition of the vehicles. Special Olympics Washington does not warrant that the vehicles are of mercantile quality or that it can be used for any particular purpose.

All federal and state income taxes based on the value of the grand prize, if selected, will be due from the Grand Prize winner. If the Grand Prize winner selects the one-time cash payment, as well as winners of other prizes of \$5,000 or more, all appropriate and required federal and state taxes will be withheld by Special Olympics Washington in accordance with federal and state law and Special Olympics Washington will remit the balance of the cash prizes to the winners. Special Olympics Washington takes no responsibility for any tax liabilities. Consult your tax advisor.

Any controversy or claim arising out of or relating to the contract, or the breach thereof, shall be settled by binding arbitration administered by the American Arbitration Association (pursuant to its expedited procedures) under its Commercial Arbitration Rules, and judgment on the award rendered by the arbitrator may be entered in any court having jurisdiction thereof.

**c(i) Dates of raffle and drawing:**

- Start Date – August 15, 2023
- Appreciation Deadline – August 25, 2023
- Appreciation Drawing – September 8, 2023
- Weekly Add-On Drawings –
  - September 29, 2023 (deadline 9/22)
  - October 6, 2023 (deadline 9/29)
  - October 13, 2023 (deadline 10/6)
  - October 20, 2023 (deadline 10/13)
  - October 27, 2023 (deadline 10/20)
  - November 3, 2023 (deadline 10/27)
  - November 10, 2023 (deadline 11/3)
  - November 17, 2023 (deadline 11/10)
  - November 22, 2023 (deadline 11/17)
- Early Bird Deadline – October 20, 2023
- Early Bird Drawing – November 3, 2023
- Grand Prize and 50/50 Add-On Deadline – November 17, 2023
- Grand Prize Drawing and 50/50 Add-On Drawing – December 1, 2023

**c(ii) Cost of raffle ticket:**

- Raffle tickets cost \$50 each, 3-packs for \$125, or 6-packs for \$200.
- Weekly Add-On Tickets are one for \$20, 3-pack for \$50 or 6-pack for \$75.
- 50/50 Add-On Tickets are one for \$20, 3-pack for \$50 or 6-pack for \$75.
- A Value Pack is available for purchase and includes an 8-pack of raffle tickets and a 12-pack of weekly add-on tickets for \$350.
- A Super Value Pack is available for purchase and includes an 8-pack of raffle tickets, a 12-pack of weekly add-on tickets, and a 20-pack of 50/50 add-on tickets for \$500.

**c(iii) Prizes available:**

**Appreciation Drawing:**

\$1,000 cash (Value: \$1,000)

**Early Bird Drawing:**

Winner's choice between a 2024 Ford Bronco Sport or \$25,000 cash. (Value: \$25,000)

**Weekly Add-On Drawing:**

Prizes: 9 prizes of \$2,500 cash each. (Value: \$22,500)

**50/50 Add-On Drawing:**

Prize: Winner will be awarded half the jackpot of the 50/50 Add-On Drawing.

**Grand Prize Drawing:**

Grand Prize: The Grand Prize is the winner's choice between a 2024 Tesla Model Y, 2024 Ford F-150 SuperCrew XLT 4x4 Truck, or 2024 Mercedes Benz C-Class, or \$50,000 in cash (Value: \$50,000).

2nd Prize: Las Vegas Car Racing Experience or \$1,000 cash (Value: \$1,000)

3rd Prize: Vacation to Mexico or \$1,000 cash (Value: \$1,000)

4th Prize: Vacation to Italy or \$1,000 cash (Value: \$1,000)

5th Prize: Caribbean Cruise or \$1,000 cash (Value: \$1,000)

6th Prize: Seattle Mariner Tickets or \$1,000 cash (Value: \$1,000)

7th Prize: Seattle Kraken Tickets or \$1,000 cash (Value: \$1,000)

8th Prize: Seattle Seahawks Tickets \$1,000 cash (Value: \$1,000)

Prizes 9-58: 50 - \$100 gift cards (Value: \$5,000)

Prizes 59-88: 30 - \$75 gift cards (Value: \$2,250)

Prizes 89-335: 247 - \$50 gift cards (Value: \$12,350)

Gift card winners (9-335) will be notified via email and will have a choice between receiving a gift card from one of the following brands:

- AMC Theaters
- Amazon.com
- Best Buy
- Chipotle
- Darden Restaurants
- Grubhub
- Home Depot
- HomeGoods
- Hotels.com
- Landry's Restaurants
- Panera Bread
- REI
- Target
- Visa Prepaid Card

**c(iv) Security of prizes:**

Prizes including cash, vacations, and cars, which will be purchased and awarded after each applicable drawing with raffle revenue, thus prizes don't need to be protected since they are not being purchased prior to the raffle drawing.

**c(v) Plans for selling raffle tickets:**

Raffle tickets will be sold via phone, fax, mail, and in person.

Please refer to the Raffle Ticket Process document attachment (**Attachment A**)

**c(vi) Description of how the integrity of the raffle will be protected:**

Special Olympics Washington will conduct an audit of ticket stubs prior to each drawing.

The audit will be performed by a member of the Special Olympics Washington staff who will use an Excel generated random list of tickets to audit. The tickets will be made up of the

entire population of tickets sold, both active and voided. The sample size will be no less than 90 tickets.

All ticket purchase proceeds of the raffle, whether the tickets are sold in the Special Olympics Washington office by designated staff or through the call center, will be deposited into a Special Olympics Washington raffle account which is separate from the Organization's general operating funds.

An employee of Special Olympics Washington will draw all winning raffle tickets.

**d) Explanation of how the proceeds from the raffle will be used:**

Funds will be used to further drive the vision of Special Olympics Washington as described on page 1 of this document.

**e) Plan to protect the licensee in the event of low-ticket sales and other risks:**

In the event that Special Olympics Washington determines ticket sales are insufficient to qualify for a complete enhanced raffle to move forward, the enhanced raffle winner must receive fifty percent of the net proceeds in excess of expenses as the Grand Prize. The enhanced raffle winner will receive a choice between an annuity value equal to 50% of the net proceeds in excess of expenses paid by annuity over 20 years, or a one-time cash payment of 70% of the annuity value. Unless, the raffle ticket sales fall below the breakeven amount of 5,395 tickets sold, and net proceeds in excess of expenses produce a negative value, Special Olympics Washington will consider refunding all purchases and cancelling the raffle due to insufficient sales of tickets or issuing a flat \$5,000 to the Grand Prize winner.

**f) Explanation of how the prize(s) will be purchased for the raffle:**

Cash prizes are offered from the sale of raffle tickets. Non-cash prizes, such as vacations and cars will be purchased if the winner chooses such prize in lieu of cash.

**g) Projected budget includes the following (Attachment B):**

- i. Estimated gross gambling receipts, expenses, and net income for the raffle.
- ii. Corresponding sales and prize levels with projected revenues and expenses for each level.
- iii. Minimum and maximum prizes available.

**h)** Special Olympics Washington's dedicated employee is Mary Do.

**i)** NZ Consulting Inc. will be the licensed service supplier.

**j)** Incept will be our licensed call center.

**k)** Raffle Ticket Process Document (**Attachment A**)

**l) New to 2023 - Website Chat Feature:**

Special Olympics Washington may communicate with the public via a chat feature on the raffle website to answer questions about the raffle including how to purchase raffle tickets although raffle tickets may not be purchased via the website chat feature directly. Special Olympics Washington will only use the chat feature to communicate information on how to order a ticket such as communicating the phone order number, fax number or mailing address for entry forms or to confirm whether an entry form has been received for processing. Ticket numbers will not be communicated via the chat feature.

**SPECIAL OLYMPICS WA**

WSGC Ticket Sales

2023 Fall Raffle

U:\Admin\Commission Meetings\2023 Commission meetings\08 August\08 2023 Tab 3d 2023 SOWA Fall Raffle Budget -7-28-23.xlsx\WSGC Budget

	Breakeven	% of revenue	Budget	% of total revenue
Total # of Raffle Tickets	5,395		13,277	
Average Price/ticket	\$ 36.55		\$ 36.55	
<b>GROSS RAFFLE TICKET SALES</b>	<b>\$ 197,187</b>	<b>60.0%</b>	<b>\$ 485,274</b>	<b>60.0%</b>
Total # of Weekly Add On Tickets	4,765		11,730	
Average Price/ticket	\$ 13.77		\$ 13.77	
<b>GROSS ADD ON TICKET SALES</b>	<b>\$ 65,610</b>	<b>20.0%</b>	<b>\$ 161,522</b>	<b>20.0%</b>
Total # of 50/50 Add On Tickets	4,765		11,730	
Average Price/ticket	\$ 13.77		\$ 13.77	
<b>GROSS 50/50 TICKET SALES</b>	<b>\$ 65,610</b>	<b>20.0%</b>	<b>\$ 161,522</b>	<b>20.0%</b>
<b>TOTAL SALES</b>	<b>\$ 328,408</b>		<b>\$ 808,318</b>	

**Expenses:**

Advertising	62,000	18.9%	62,000	7.67%	Fixed
Professional Fees	49,261	15.0%	146,027	18.07%	Variable
Personnel	18,392	5.60%	45,268	5.60%	Variable
Sales Expense	24,729	7.5%	24,729	3.06%	Fixed
Prize Expense	157,905	48.1%	205,861	25.47%	Variable
Regulatory Expense	16,138	4.9%	16,138	2.00%	Fixed
<b>TOTAL EXPENSE</b>	<b>328,425</b>	<b>100.0%</b>	<b>500,023</b>	<b>61.86%</b>	
<b>NET INCOME</b>	<b>(17)</b>		<b>308,295</b>	<b>38.14%</b>	

Breakeven Budget

**PRIZES**

	Breakeven	Budget
09/08/23 <i>Appreciation Drawing:</i> \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
11/03/23 <i>Early Bird Drawing:</i> Winner's choice between a 2024 Ford Bronco Sport or \$25,000 in cash	\$ 25,000	\$ 25,000
<i>Weekly Add-On Drawing:</i> Prizes: 9 - \$2,500 cash prizes awarded over 9 weeks (Value: \$22,500)		
09/29/23 #1	\$ 2,500	\$ 2,500
10/06/23 #2	\$ 2,500	\$ 2,500
10/13/23 #3	\$ 2,500	\$ 2,500
10/20/23 #4	\$ 2,500	\$ 2,500
10/27/23 #5	\$ 2,500	\$ 2,500
11/03/23 #6	\$ 2,500	\$ 2,500
11/10/23 #7	\$ 2,500	\$ 2,500
11/17/23 #8	\$ 2,500	\$ 2,500
11/22/23 #9	\$ 2,500	\$ 2,500
12/01/23 <i>50/50 Add-On Drawing:</i> Prize: Winner will be awarded half the jackpot of the 50/50 Add-On Drawing.	\$ 32,805	\$ 80,761
12/01/23 <i>Grand Prize Drawing:</i> Prize: 2024 Tesla Model Y, 2024 FordF-150 SuperCrew XLT 4x4 Truck, or 2024 Mercedes Benz C-Class, or \$50,000 in cash (Value: \$50,000).	\$ 50,000	\$ 50,000
12/01/23 <i>2nd Prize:</i> Las Vegas Car Racing Experience or \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
12/01/23 <i>3rd Prize:</i> Vacation to Mexico or \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
12/01/23 <i>4th Prize:</i> Vacation to Italy or \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
12/01/23 <i>5th Prize:</i> Caribbean Cruise or \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
12/01/23 <i>6th Prize:</i> Seattle Mariner Tickets or \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
12/01/23 <i>7th Prize:</i> Seattle Kraken Tickets or \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
12/01/23 <i>8th Prize:</i> Seattle Seahawks Tickets \$1,000 cash (Value: \$1,000)	\$ 1,000	\$ 1,000
12/01/23 <i>Prizes 9-58:</i> 50 - \$100 gift cards (Value: \$5,000)	\$ 5,000	\$ 5,000
12/01/23 <i>Prizes 59-88:</i> 30 - \$75 gift cards (Value: \$2,250)	\$ 2,250	\$ 2,250
12/01/23 <i>Prizes 88-335:</i> 247 - \$50 gift cards (Value: \$12,250)	\$ 12,350	\$ 12,350
	<b>\$ 157,905</b>	<b>\$ 205,861</b>



**STATE OF WASHINGTON  
GAMBLING COMMISSION**

*"Protect the Public by Ensuring that Gambling is Legal and Honest"*

August 10, 2023

**TO: COMMISSIONERS:**  
Alicia Levy, Chair  
Julia Patterson, Vice Chair  
Bud Sizemore  
Sarah Lawson  
Anders Ibsen

**FROM:** James Richardson, Legal Manager, Legal and Records Division

**SUBJECT: Sue Chen, CR 2023-00239  
Final Order – August 10, 2023 Commission Meeting**

Sue Chen has a gambling license authorizing Public Card Room Employee activity; Chen's license is not currently linked to an employer. Her license expires on August 18, 2023.

On February 3, 2023, WSGC received an email from Roman Casino General Manager Gus Routos. Routos reached out to inform the Agent that Chen had been found trying to steal a \$300 gaming chip but dropped it on the floor when attempting to place it up her sleeve. The Agent reviewed the incident report and video provided by Routos wherein Chen appeared to take five \$300 gaming chips totaling \$2700. When interviewed Chen admitted to the allegations, said she made a big mistake, and knows what she did was wrong.

Director Tina Griffin through Gary Drumheller issued Chen a Notice of Administrative Charges on June 13, 2023, by certified mail to her last known address on file. Pursuant to WAC 230-17-010, a response was required to be received by the Commission by July 11, 2023. Chen declined to respond in writing but did reach out to Legal Manager James Richardson to state that she did not wish to contest the charges.

Sue Chen's deliberate failure to respond to the charges or timely request a hearing is a waiver of Chen's right to a hearing in Case No. CR 2023-00239. You may take final action against her gambling license. Chen took gambling chips valued at \$1,500, with the intent of depriving Roman Casino of it when she took the chips into her possession. In doing so, Chen is in violation of RCW 9A.56.040(1)(a) and 9.46.075(1) and (8) and WAC 230-03-085(1), (3), and 9(d). Based on her conduct, Chen cannot show by clear and convincing evidence that she is qualified to keep her gambling license. Therefore, staff recommends that the Commission sign the proposed final order and revoke Sue Chen's Public Card Room Employee license, Number 68-36334.

**STATE OF WASHINGTON  
GAMBLING COMMISSION**

In the Matter of:

NO. CR 2023-00239

SUE CHEN,  
License No. 68-36334,

FINAL ORDER OF THE  
GAMBLING COMMISSION

Licensee.

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This matter having come before the Washington State Gambling Commission (Commission) on August 10, 2023, the Commission makes the following Findings of Fact, Conclusions of Law, and issues its Final Order:

**I. FINDINGS OF FACT**

1. The Washington State Gambling Commission issued Sue Chen License No. 68-36334 authorizing Public Card Room Employee activity; Chen’s license is not currently linked to a House-Banked Card Room.
2. This license, which expires on August 18, 2023, was issued subject to Chen’s compliance with state gambling laws and Commission rules.
3. Chen has been licensed since 2021.
4. On February 3, 2023, a WSGC Special Agent received an email from Roman Casino General Manager Gus Routsos. Routsos was writing to inform the Agent that a licensed Card Room Employee, Sue Chen, had been found trying to steal a \$300 gaming chip, but dropped it on the floor while attempting to place it up her sleeve.



5. Along with the email, the Agent received an incident report, written by Routsos, and an iTrak incident file, written by Surveillance Observer Nate Sybouts. These reports detail Chen's actions on February 2, 2023:

6. At 20:29:44, Chen can be seen palming the purple \$300 gaming chip while putting green and red chips into the tray.

7. At 20:29:45, Chen can be seen moving her now clenched/closed hand from the purple stack to the back of the card shoe.

8. At 20:29:46, Chen moves her hand from the back of the shoe to under the table's edge.

9. At 20:29:452, Chen can be seen with both hands below the table edge appearing to place a chip up her sleeve. Chen is then seen manipulating her fingers to move the chip into her sweater. Chen's other hand is opening the sleeve to allow the chip to move past the sweater's cuff.

10. At 20:29:54, Chen notices the chip fell to the ground.

11. At 20:29:57, Chen can be seen placing a purple \$300 gaming chip into the chip tray.

12. On February 7, 2023, Agent Maxwell received an email from Roman Casino Surveillance Manager Daniel Porcelli that included the incident file.

13. This incident file stated that Chen removed approximately \$1,200.00 in \$300 gaming chips and placed them into the cuff of her left sleeve at 20:21 on January 29, 2023. Chen then spoke to a person identified as Yuen Mak from 21:04 to 21:07 while Mak was seated at Table 10. Both Chen and Mak then walked toward the cage, where Mak cashed out two \$300 purple chips for a total of \$600.00. Mak then walked into the restroom, appeared to give Chen the money, and exited the restroom at the same time.

14. The report states that a player identified as Suu Pham departed Table 7 and followed Chen into the restroom by the main pit. Chen appeared to give Pham "something" off camera as Pham placed something into her pocket upon exiting the bathroom.

15. At 21:44, Chen was dealing at table 15, when she appeared to take five purple \$300 gaming chips (equaling \$1,500.00) into her left hand while her right arm covered the purple chips. She then placed her hands under the table and appeared to place them into the cuff of her left sleeve.

16. On February 9, 2023, Agent Maxwell interviewed Chen at the WSGC office in Federal Way, Washington, with Special Agent Supervisor Sonja Dolson.

17. Agent Maxwell informed Chen that WSGC received information that she attempted to take a chip from the tray while she was dealing at Roman Casino on February 2, 2022. Agent Maxwell asked if that was true. Chen responded “yes.” Agent Maxwell asked Chen if she was successful. Chen said “no.” She explained that she dropped the chip and picked it back up and put it back in the tray. Agent Maxwell asked Chen if she had done this before. Chen said “yes.” Agent Maxwell asked how many times Chen had done this before. She said it had probably been three months. Agent Maxwell asked how much she took. Chen said she didn’t know, but said sometimes it was \$300.00 or \$400.00 and sometimes it was \$900.00. Agent Maxwell asked how often Chen did this. Chen said sometimes once a month and sometimes twice a week. Agent Maxwell asked her what she thought her average take would be. Chen said \$500.00.

18. Chen continued to admit to instances of stealing chips throughout the interview. She stated she gave stolen chips to Yuen Mak and Suu Pham because she owed them money. Agent Maxwell informed Chen that surveillance video shows Chen taking at least \$2,700.00 in chips from the table. Chen admitted that she made a big mistake. Chen said she should be punished and she knows what she did was wrong.

19. Gary Drumheller issued Administrative Charges on behalf of Director Tina Griffin on June 12, 2023 alleging that Chen’s actions constituted a violation of RCW 9A.56.040(1)(a) and 9.46.075(1) and (8) and WAC 230-03-085(1), (3), and 9(a) and (d). Further, that Chen could not show by clear and convincing evidence that she was qualified for licensure as required by RCW 9.46.153(1), and that her actions warranted revocation of her license pursuant to RCW 9.46.075(1) and (8) and WAC 230-03-085(1), (3), and (9)(c).

20. Chen was sent the charges by certified mail on June 13, 2023, and the charges were delivered on June 21, 2023 to the last address the Gambling Commission had on file.

21. Pursuant to WAC 230-17-010, a response was required to be received by the Commission by July 11, 2023. Prior to that date, Ms. Chen reached out to the legal manager and stated that she did not want to pursue a legal defense regarding her license.

## **II. CONCLUSIONS OF LAW**

1. Sue Chen received proper notice of the charges on June 21, 2023 via certified mail, pursuant to RCW 34.05.413, RCW 34.05.434, WAC 230-17-005, WAC 230-17-010, and WAC 10-08-130.

2. The Commission can take final action against Sue Chen's gambling license under Case Number CR 2023-00239 pursuant to RCW 9.46.075, RCW 34.05.440(1), RCW 34.05.461, and WAC 230-03-085.

3. Sue Chen's license should be revoked under Case Number CR 2023-00239 pursuant to RCW 9.46.075, RCW 9.46.153(1), RCW 34.05.440(1), RCW 34.05.461, and WAC 230-03-085.

[SIGNATURE PAGE TO FOLLOW]

### III. ORDER

This matter having come before the Commission at its August 10, 2023, Commission meeting, the Commissioners having heard arguments, been given the chance to review the administrative record, and being fully advised in this matter, now therefore:

It is hereby **ORDERED** that Sue Chen's gambling license, Number 68-36334, is **REVOKED**.

DATED this \_\_\_ day of August, 2023.

\_\_\_\_\_  
ALICIA LEVY, Chair

\_\_\_\_\_  
JULIA PATTERSON, Vice Chair

\_\_\_\_\_  
BUD SIZEMORE

\_\_\_\_\_  
ANDERS IBSEN

\_\_\_\_\_  
SARAH LAWSON

## NOTICE

Reconsideration: RCW 34.05.470 and WAC 230-17-140 provide that a party may file a petition for reconsideration of a final order. A petition for reconsideration must be received no later than thirteen (13) days after the date this final order is mailed. Any motion for reconsideration must state the specific grounds supporting the party's request for reconsideration.

Stay of Final Order: Filing for reconsideration does not stay the effectiveness of this Order. WAC 230-17-145 provides that a party may petition the Commission for a stay of a final order. Any petition for a stay should be received by the Commission within thirteen (13) days after the date this final order is mailed.

Judicial Review: RCW 34.05.542 provides that a party may appeal this final order by filing a petition for judicial review within thirty (30) days after service of this order. A petition for judicial review must be filed with the appropriate superior court and served upon both the Commission and the Office of the Attorney General.

Service: This Order was served on you three days after it was deposited in the United States Postal Service regular mail, excluding the date of mailing. WAC 230-17-035.

Any motions or petitions for judicial review should be served on or mailed to:

Washington State Gambling Commission  
Legal and Records Division  
4565 7<sup>th</sup> Avenue S.E., Lacey, WA  
P.O. Box 42400  
Olympia, WA 98504-2400

Doug Van de Brake  
Attorney General's Office  
1135 Washington St. SE  
P.O. Box 40100  
Olympia, WA 98504-0100

**CERTIFICATE OF SERVICE**

I certify that on the date below I served a copy of the foregoing document on all parties and/or their counsel by United States Postal Service regular mail to the following:

SUE CHEN  
2901 22<sup>ND</sup> AVE S  
SEATTLE, WA 98144

EXECUTED this \_\_\_ day of August, 2023, at Lacey, Washington.

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Rashida Robbins  
Forms and Records Analyst



**Rule Petition for a New Rule**  
WAC 230-13-135 Maximum wagers and prize limitations

**AUGUST 2023 – Commission Review**  
**JULY 2023 – Rule-Making Petition Received**

**Tab 5: AUGUST 2023 Commission Meeting**

**Statutory Authority 9.46.070**

**Who Proposed the Rule Change?**

Darren Des Roches, GameWorks Seattle, Seattle, WA

**Background**

Darren Des Roches of GameWorks Seattle submitted a petition to amend WAC 230-13-135 (Maximum wagers and prize limitations) to increase the maximum wager for amusement games from \$3.50 to \$5.00. Des Roches notes that the last increase was over 10 years ago, when it was raised from \$0.50 to \$3.50. Given that the cost of everything has increased and that the cost of prizes have risen dramatically, the petitioner believes that the cost per play should increase as well in order to offset the operator's costs.

Amusement games are played for entertainment only and require the active participation of the player; the outcome of an amusement game depends in a material degree upon the skill of the contestant; and only merchandise prizes may be awarded in the presence of all those participating in the activity (RCW 9.46.0201).

Currently, amusement games operated at the following locations have a wager limit of \$3.50 and a prize limit of \$500 (WAC 230-13-135):

- 1) Regional shopping centers; and
- 2) Movie theaters; and
- 3) Bowling alleys; and
- 4) Miniature golf course facilities; and
- 5) Skating facilities; and
- 6) Family sports complexes; and
- 7) Amusement centers; and
- 8) Grocery or department stores; and
- 9) Any business whose primary activity is to provide food service for on premises consumption and who offers family entertainment.

Attachments:

- Petition
- WAC 230-13-135 Maximum wagers and prize limitations

**Policy Considerations**

Washington state's maximum fee was set at \$0.50 in 1992. The Commission considered wager limit and/or prize limit increases again in 1997, 2007, and 2008 where discussion centered on concern about increasing wagering limits on games geared toward children. Commissioners finally approved an increase in the wager limit from \$0.50 to \$3.50 that took effect in February 2011, where the petitioner and discussion focused more on comparison of operator costs to profits. While the petitioner originally

requested an increase to \$5.00, the request was modified to \$3.50 to allow the operator to reap a \$0.17 profit per play.

According to the CPI Inflation Calculator, \$3.50 in 2011 would be the equivalent of \$4.75 today.

Staff reviewed the statutes from two dozen states on their practices related to amusement games. The majority of states do not set any wager limits on amusement games; several states do set limits on prize values. For the few states that had wager limits, the limits range from \$3.00 in Wyoming to \$20.00 in New Jersey.

#### **Staff Recommendation**

Under the requirements of the Administrative Procedure Act, the Commission must take action on a petition within 60 days of receiving it. Your options are to:

- 1) Initiate rule-making proceedings for further discussion; or
- 2) Deny the petition in writing, a) stating the reasons for the denial, specifically addressing the concerns stated in the petition, or b) indicating alternative means by which the agency will address the concerns raised in the petition.



## McLean, Lisa (GMB)

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**From:** no-reply@wsgc.wa.gov on behalf of Washington State Gambling Commission via Washington State Gambling Commission <no-reply@wsgc.wa.gov>  
**Sent:** Wednesday, July 5, 2023 3:42 PM  
**To:** Rules Coordinator (GMB)  
**Subject:** Request a Rule Change Submission from wsgc.wa.gov

External Email

Submitted on Wednesday, July 5, 2023 - 3:41pm Submitted by anonymous user: 50.78.41.235 Submitted values are:

Petitioner's Name: Darren Des Roches

Mailing Address: 1511 Avenue

City: Seattle

State: WA

Zip Code: 98101

Phone: 5102092221

Email: darren@gameworks.com

Rule Petition Type: Amend Rule – I am requesting WSGC to change an existing rule.

==Amend Rule – I am requesting WSGC to change an existing rule.==

List rule number (WAC) if known: 230-13-135.

I am requesting the following change: In 2009, the limit was actually raised from \$0.50 to \$3.50, which was a pretty significant increase. As you can see, it hasn't been raised since then. The rule is now 13 years old, yes a couple of years were COVID years, it just seems since the cost of everything has increased, the rule should be in step with it.

This change is needed because: Costs for prizes have risen dramatically, therefore the cost per play should be increased.

The current max window is \$3.50, maybe make it up to \$5.00

The effect of this rule change will be: Cost offset to the operator.

The results of this submission may be viewed at:

<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwsgc.wa.gov%2Fnode%2F18%2Fsubmission%2F4150&data=05%7C01%7Crules.coordinator%40wsgc.wa.gov%7C7df12ac4292f43c8ada908db7da8fd02%7C11d0e217264e400a8ba057dcc127d72d%7C0%7C0%7C638241936978065001%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C3000%7C%7C%7C&sdata=3t6%2BpaHxS4VjLt54i1UMgrHUepN%2FAONYXJofLgaft%2B4%3D&reserved=0>

**WAC 230-13-135 Maximum wagers and prize limitations.** (1) The maximum wager is three dollars and fifty cents and the maximum cost for a prize is five hundred dollars if school-aged minors are allowed to play amusement games at the following locations:

- (a) Regional shopping centers; and
- (b) Movie theaters; and
- (c) Bowling alleys; and
- (d) Miniature golf course facilities; and
- (e) Skating facilities; and
- (f) Family sports complexes.

(i) A "family sports complex" is a facility, at a permanent location, to which people go to play sports. A family sports complex must offer multiple sports activities, such as indoor soccer, outdoor soccer, lacrosse, baseball, Frisbee, and lawn bowling and the gross receipts must be primarily from these sports activities.

(ii) A family sports complex does not include a facility owned or operated by a school or school district; and

- (g) Amusement centers; and

(h) Grocery or department stores. A "department or grocery store" means a business that offers the retail sale of a full line of clothing, accessories, and household goods, or a full line of dry grocery, canned goods, or nonfood items plus some perishable items, or a combination of these. A department or grocery store must have more than ten thousand square feet of retail and support space, not including the parking areas; and

(i) Any business whose primary activity is to provide food service for on premises consumption.

(2) For group 12 amusement games, the maximum wager is five dollars and the maximum cost for a prize is one thousand dollars.

[Statutory Authority: RCW 9.46.070, 9.46.0201. WSR 16-08-033 (Order 718), § 230-13-135, filed 3/30/16, effective 4/30/16. Statutory Authority: RCW 9.46.070, 9.46.0331, and 9.46.0201. WSR 11-04-004 (Order 674), § 230-13-135, filed 1/20/11, effective 2/20/11. Statutory Authority: RCW 9.46.070. WSR 09-15-067 (Order 650), § 230-13-135, filed 7/13/09, effective 8/13/09; WSR 08-11-036 (Order 625), § 230-13-135, filed 5/14/08, effective 7/1/08; WSR 07-15-064 (Order 612), § 230-13-135, filed 7/16/07, effective 1/1/08.]



**Rule Petition for a New Rule**  
Authorizing gambling for youth

**AUGUST 2023 – Commission Review**  
**JUNE 2023 – Rule-Making Petition Received**

**Tab 6: AUGUST 2023 Commission Meeting**

**Statutory Authority 9.46.070**

**Who Proposed the Rule Change?**

Johnathon Schwartz of Enumclaw, WA

**Background**

Johnathon Schwartz of Enumclaw, WA submitted a petition for adoption of a new rule allowing children who are at least 10 years old to gamble for either fake money, i.e., chips, that can be used to purchase goods (new shoes, clothes, food, hot cocoa, or milk), or no more than \$100 in real money. Schwartz believes that making this change would be fun for children and allow them to learn why some of their parents are so addicted. It would also give children some resources to acquire things that they have wanted.

RCW 9.46.228 states that it “is unlawful for any person under the age of 18 to play in authorized gambling activities including, but not limited to, punchboards, pull-tabs, or card games, or to participate in fund-raising events. Persons under the age of 18 may play bingo, raffles, and amusement game activities only as provided in commission rules.”

WAC 230-06-010 Age restrictions for players states that “no person must allow anyone under the age of 18 to participate in gambling activities except: (1) to play in licensed bingo games when accompanied by an adult member of his or her immediate family or a guardian who is at least 18 years old; (2) to play bingo at agricultural fairs or schools carnivals; (3) to play amusement games; or (4) to sell raffle tickets for a charitable or nonprofit organization that has development of youth as a primary purpose, has at least three members or advisors who are at least 18 years old and who supervise the operation of the raffle, and has an adult member or advisor designated as the manager of the raffle.”

Attachments:

- Petition

**Policy Considerations**

RCW 9.46.0237 defines “gambling” as “staking or risking something of value upon the outcome of a contest of chance or a future contingent event not under the person’s control or influence, upon an agreement or understanding that the person or someone else will receive something of value in the event of a certain outcome.”

RCW 9.46.010 lays out the clear legislative intent to “promote the social welfare of the people by limiting the nature and scope of gambling activities and by strict regulation and control.” It then goes on to explicitly state that those under the age of 18 may not participate in gambling activities, except under very limited conditions defined by the Commission’s rules. Those rules define the conditions as limited to bingo, amusement games, and raffles under certain restricted conditions and with the supervision of an adult.

The petitioner, first, suggests allowing individuals under 18 to gamble for fake money that could be used to purchase goods. Under the definition of “gambling,” the idea of exchanging fake money for the purchase of goods would represent an exchange for things of value, which would not be permitted legally. The petitioner also suggests that individuals under the age of 18 should be allowed to gamble for no more than \$100 in real money, which would be gambling – and contrary to the Legislative intent of the Gambling Act and RCW 9.46.228.

Every state in the union that allows gambling in any form sets the minimum age for allowed gambling activities to 18 – or in some cases 21.

With the expansion of gambling across the United States, including expanded advertising of gambling venues and lotteries, problem gambling among adults – and increasingly among adolescents – has become a growing public health concern. See the following studies:

[Gambling and Problem Gambling among Youths - RANDY STINCHFIELD, KEN C. WINTERS, 1998 \(sagepub.com\)](#)

[Youth-Problem-Gambling-Brochure.pdf \(evergreencpg.org\)](#)

[GGTU | Youth and problem gambling \(camh.ca\)](#)

The Commission takes the issue of problem gambling seriously, having participated in the Problem Gambling Task Force, supporting increased funding resources for addressing problem gambling, and standing up a robust self-exclusion program. Allowing youth to take part in gambling activities once they reach the age of 10 could create more problem gambling issues.

Attachments:

- Gambling and Problem Gambling among Youths, Randy Stinchfield, Ken C. Winters, 1998
- Youth Problem Gambling Brochure, Evergreen Council on Problem Gambling
- Youth and problem gambling, Gambling, Gaming and Technology Use, Centre for Addiction and Mental Health

#### **Staff Recommendation**

Under the requirements of the Administrative Procedure Act, the Commission must take action on a petition within 60 days of receiving it. Your options are to:

- 1) Initiate rule-making proceedings for further discussion; or
- 2) Deny the petition in writing, a) stating the reasons for the denial, specifically addressing the concerns stated in the petition, or b) indicating alternative means by which the agency will address the concerns raised in the petition.

Staff recommends denying the petition because it is contrary to the legislative intent expressed in RCW 9.46.010 and the restrictions outlined in RCW 9.46.228, as well as having the potential to negatively impact problem gambling among youth.

## McLean, Lisa (GMB)

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**From:** no-reply@wsgc.wa.gov on behalf of Washington State Gambling Commission via Washington State Gambling Commission <no-reply@wsgc.wa.gov>  
**Sent:** Saturday, June 17, 2023 9:26 AM  
**To:** Rules Coordinator (GMB)  
**Subject:** Request a Rule Change Submission from wsgc.wa.gov

External Email

Submitted on Saturday, June 17, 2023 - 9:26am Submitted by anonymous user: 136.228.206.236 Submitted values are:

Petitioner's Name: Johnathon Schwartz

Mailing Address: 1247 Merritt Ave

City: Enumclaw

State: WA

Zip Code: 98022

Phone: 4259410226

Email: garyard14@hotmail.com

Rule Petition Type: New Rule – I am requesting WSGC to adopt a new rule.

==New Rule – I am requesting WSGC to adopt a new rule.==

Subject or purpose of the rule: I think that children at the age of 10 and up should be able to gamble for either fake money or no more than \$100 in real money. The chips would immediately to buy some new shoes, clothes, food, hot cocoa or chocolate milk (of course we would be taking allergies and "vegetarian" and "Vegan" into mind).

The rule is needed because:

I think it would be fun and it would allow kids to learn why some of their parents are so addicted, and it would allow them to get something they have been wanting recently for less money or by using the chips they have gained. I would be cool and I have dreamed of making this idea a reality for six years now and I am finally taking action. Thank you for your time.

Johnathon Schwartz

The effect of this rule change will be: Beneficial because it allows kids to learn and purchase things they have been wanting for years.

The results of this submission may be viewed at:

<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwsgc.wa.gov%2Fnode%2F18%2Fsubmission%2F4110&data=05%7C01%7Crules.coordinator%40wsgc.wa.gov%7C4af359be4894420ca68a08db6f4f9b69%7C11d0e217264e400a8ba057dcc127d72d%7C0%7C0%7C638226159950358795%7CUnknown%7CTWFpbGZsb3d8eyJWljojMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6I1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=kuL7e82vnq3n4CWdrDIDo3EY7csLJxGWmFtR2Ehygu0%3D&reserved=0>

# Youth gambling problems: a public health perspective

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## SUMMARY

*Problem gambling has recently emerged as a significant public health issue. While most efforts target adult pathological gamblers, there is growing concern that adolescents and young adults represent the highest risk group for gambling problems. Prevailing public health initiatives addressing youth problem gambling are only beginning to be examined. Drawing upon the Ottawa Charter for Health Promotion as a guiding framework, a prevention model and framework for action are presented*

*to better understand and address problem gambling from a population-based perspective. This framework applies denormalization, protection, prevention, and harm-reduction principles to youth gambling problems and describes primary, secondary and tertiary prevention objectives. A foundation for the development, implementation and evaluation of comprehensive, multi-level health promotion and prevention strategies for youth problem gambling is provided.*

*Key words:* youth gambling; public health; prevention

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## INTRODUCTION

Problem gambling among youth is a growing public health concern. While gambling activities are predominantly viewed as an innocuous adult pastime, more underage youth, exposed to the widespread availability of regulated and unregulated forms of gambling, are succumbing to the temptation and pressures to engage in these activities [Jacobs, 2000; National Research Council (NRC), 1999]. Similar to adults, research reveals that problem gambling during adolescence can lead to adverse outcomes such as strained relationships, delinquency and criminal behaviour, depression and even suicide (Derevensky and Gupta, 2004). Such negative outcomes have short- and long-term implications for the individual, significant others, as well as for society at large (Derevensky *et al.*, 2003). Yet, despite these negative consequences, problem

gambling in youth has only recently emerged as a significant public health concern (Korn and Shaffer, 1999). To date, little effort has been made to respond to this important adolescent risk behaviour.

The prevailing attitudes of governments and the general population indicate that new gambling venues (e.g. casino expansion) will continue to rapidly expand. Gambling, or gaming (the widely accepted industry terminology), is no longer a vice accompanied by negative connotations and stigmatization but rather a legitimate form of entertainment. Today's lottery corporations deliberately associate the proceeds of lottery sales with funding of public education and health/social welfare initiatives. There is also literature which discusses the potential health-related benefits (Korn and Shaffer, 1999).

However, gambling continues to remain a contentious social policy issue worldwide. [See reports from the US National Gambling Study Impact Commission (National Opinion Research Center, 1999), Canada West Foundation (Azmier, 2000), the National Centre for the Study of Gambling, South Africa Report (Collins and Barr, 2001).]

Gambling has become a popular form of recreation for adolescents. While legislative statutes generally prohibit youth from participating in legalized forms of gambling, there is little doubt that they engage in both legal and illegal forms of gambling. Research in Canada, the US and internationally suggests that upwards of 80% of adolescents have engaged in some form of gambling during their lifetime (see reviews by the NRC, 1999, and meta-analysis by Shaffer and Hall, 1996).

Most alarming, however, is evidence indicating that between 4 and 8% of adolescents have a very serious gambling problem, while another 10–15% are at-risk (Derevensky and Gupta, 2000; Jacobs, 2000). While there are some methodological issues involved in the measurement of pathological gambling for youth, there are consistent reports that adolescent prevalence rates of pathological gambling (4–8%) are higher than the general adult population (1–3%) (NRC, 1999; Derevensky *et al.*, 2003).

Trends between 1984 and 1999 point to a significant increase in the proportion of youth who report gambling within the past year and those who report gambling-related problems (Jacobs, 2000). In the US and Canada, it is estimated that approximately 15.3 million 12–17 year olds have gambled, while 2.2 million are reported to be experiencing serious gambling-related problems (Jacobs, 2000). While most adolescents report having gambled for money (NRC, 1999), the lure of excitement, entertainment and financial freedom accompanying gambling is particularly attractive to youth. This, coupled with a general lack of prevention and awareness programmes, may render youth particularly vulnerable to the risks and negative consequences associated with gambling.

Gambling problems in adolescents have often gone unnoticed as they are difficult to measure and observe (Derevensky and Gupta, 1998). In contrast to alcohol, tobacco and other drug use, there are no visible signs of intoxication or consumption. Furthermore, problem gambling remains socially invisible and masked by popular

misconceptions. Moreover, advertising and the mass media have succeeded in legitimizing and destigmatizing gambling (Zangeneh *et al.*, In press).

## **COSTS AND CONSEQUENCES**

Research has demonstrated that problem gambling among adolescents has been associated with a number of other mental health outcomes including higher rates of depressive symptomatology, increased risk of alcohol and substance abuse disorders (Hardoon *et al.*, 2002), increased risk of suicide ideation and attempt, higher anxiety (Gupta and Derevensky, 1998) and poor general health (Potenza *et al.*, 2002). Further, these adolescents, relative to their peers, are at increased risk of delinquency and crime, disrupted familial/peer relationships and poor academic performance (Wynne *et al.*, 1996). The consequences borne by youth experiencing gambling-related problems are serious, and the damage can be devastating to the adolescent, and his/her peers and family.

The degree of potential costs of problem gambling in youth can be measured along a continuum of gambling risk. Individuals who gamble infrequently, or in a low-risk manner, have few, if any, negative outcomes. At this level, Korn and Shaffer (1999) suggest that most people enjoy some degree of pleasure, enjoyment or benefit. As one moves up the continuum of gambling risk, the negative outcomes begin to outweigh any potential benefits. As a result, adolescent gamblers begin to experience a wide array of impaired personal, health and social consequences.

## **DETERMINANTS AND RISK FACTORS**

Problem gambling is governed by a complex set of interrelating factors, causes and determinants ranging from biology and family history to social norms and existing statutes. An ecological approach to health behaviour requires one to view gambling behaviour from multiple perspectives. Proposed by McLeroy *et al.* (1988), an ecological health promotion model focuses on addressing health behaviour from both an individual and socio-environmental level; strategies are directed at shifting intrapersonal, interpersonal,

institutional, community and public policy factors. It is the interplay of these five factors that determine one's propensity to develop a gambling-related problem (Jacobs, 1986). An ecological perspective on gambling predicated moving beyond simply offering problem gamblers treatment and counselling; instead, interventions work at modifying all five levels within this multi-dimensional model (see Table 1).

Intrapersonal and interpersonal level factors have been the focus of considerable research, treatment and prevention programmes in the past. There is extensive research outlining the many intrapersonal risk factors, as well as the effects of parents, peers and family on the acquisition, development and maintenance of gambling problems (for a review of the substantial empirical research outlining risk factors and correlates see Derevensky and Gupta, 2004). However, more research is needed to better understand the role of community factors such as

civil/local organizations, social norms, socio-economic variables and the media in shaping social identity, norms, values, beliefs and behaviours regarding gambling. The aetiology of gambling behaviour and problems, although still not fully understood, includes the interaction of both biological and psycho-social factors.

Institutional structures, regulations and policies either promote or hinder health behaviour and outcomes. The gambling industry's policies/practice on the development of products and venues, their promotion and sale, and the enforcement of existing legal statutes prohibiting access to minors are important determinants of gambling participation and behaviour. Yet, retailers and venue operators lack the knowledge and motivation to properly enforce such statutes. Furthermore, some school practices may unwittingly be promoting gambling through fundraising activities including lottery/raffle draws, casino nights and permitting card playing

**Table 1:** Levels of influence on gambling behaviour

Levels	Factors	Youth gambling examples
Intrapersonal	Individual characteristics: knowledge, attitudes, beliefs, skills, and personality traits.	Male <sup>a</sup> Risk-taking propensity <sup>a</sup> Low self-esteem <sup>b</sup> Poor coping skills <sup>a</sup> Impulsivity, sensation seeking <sup>a</sup> Anxiety and/or depression <sup>a</sup>
Interpersonal	Social networks and support systems: family and peers that provide social identity, support, and role definition.	Family history of gambling <sup>c</sup> Parental or peer conflict <sup>d</sup> Parental or peer attitudes <sup>b</sup> Family connectedness <sup>b</sup>
Institutional	Social institutions with formal/informal rules, regulations, policies that constrain or promote behaviour.	School policy/programmes <sup>e</sup> Industry policies and enforcement <sup>f</sup>
Community	Relationships, standards and networks that exist among individuals, groups and institutions.	Social norms <sup>g</sup> Media <sup>h</sup> Community resources <sup>i</sup> Availability and accessibility factors <sup>j</sup>
Public policy	Local, state, federal policies and laws that regulate, support, or constrain healthy actions and practices.	Federal and Provincial Policies <sup>f</sup> on: age restrictions, enforcement, advertising, legislation

Adapted from McLeroy *et al.* (1988).

<sup>a</sup>Gupta and Derevensky (1998).

<sup>b</sup>Hardoon *et al.* (2002).

<sup>c</sup>Gupta and Derevensky (1997).

<sup>d</sup>Fisher (1993).

<sup>e</sup>Derevensky *et al.* (2001).

<sup>f</sup>Derevensky *et al.* (2004).

<sup>g</sup>Hardoon and Derevensky (2001).

<sup>h</sup>Zangeneh *et al.* (in press).

<sup>i</sup>Henriksson (1999).

<sup>j</sup>Griffiths (2002).



within schools. These institutional factors can be viewed as targets for change; they can be challenged and modified to help create healthy organizational culture and practices.

Public policy factors related to gambling intersect a number of different domains including social, educational, health, economic, legislative and judicial. The rapid expansion of the gambling industry is a global phenomenon. Governments around the world continue to control and regulate gambling in a manner that promotes and sustains economic benefits. In an effort to recoup losses, governments have sought various means to bolster the economy, reduce deficits and increase revenues (Campbell and Smith, 1998). Under economic constraint many governments have become highly dependent on gambling revenues and are reluctant to change regulations in favour of more sound public health policies. Applying political economy theories to gambling, Sauer (Sauer, 2001) maintains that gambling expansion has been driven by the need for larger governments to generate greater revenue. Legislation on advertising and promotion, laws regulating minimum age-requirements and their enforcement, provision of programmes for harm minimization, fiscal measures and regulation on the availability of products are examples of public policy initiatives that can influence the social environment and minimize unhealthy behaviour. Clearly, however, policies need to balance public health interests with the economic gains to governments and the industry.

### POPULATION-BASED APPROACH

Rose (Rose, 1992) aptly noted that ‘mass diseases and mass exposures require mass remedies’ (p. 95). Accordingly, gambling expansion and the rising number of youth with gambling problems need to be conceptualized as a community/social issue and not merely the problem of sick individuals, reflecting a medical model. Without addressing the underlying causes and factors that result in individuals developing a gambling problem, a flow of new individuals (incidence cases) will continue. Public health and gambling professionals must refocus from the individual to society, and seek to balance high-risk strategies with those that strive to address gambling issues from a societal perspective.

Although only a small minority of youth develop gambling problems, and most adolescents

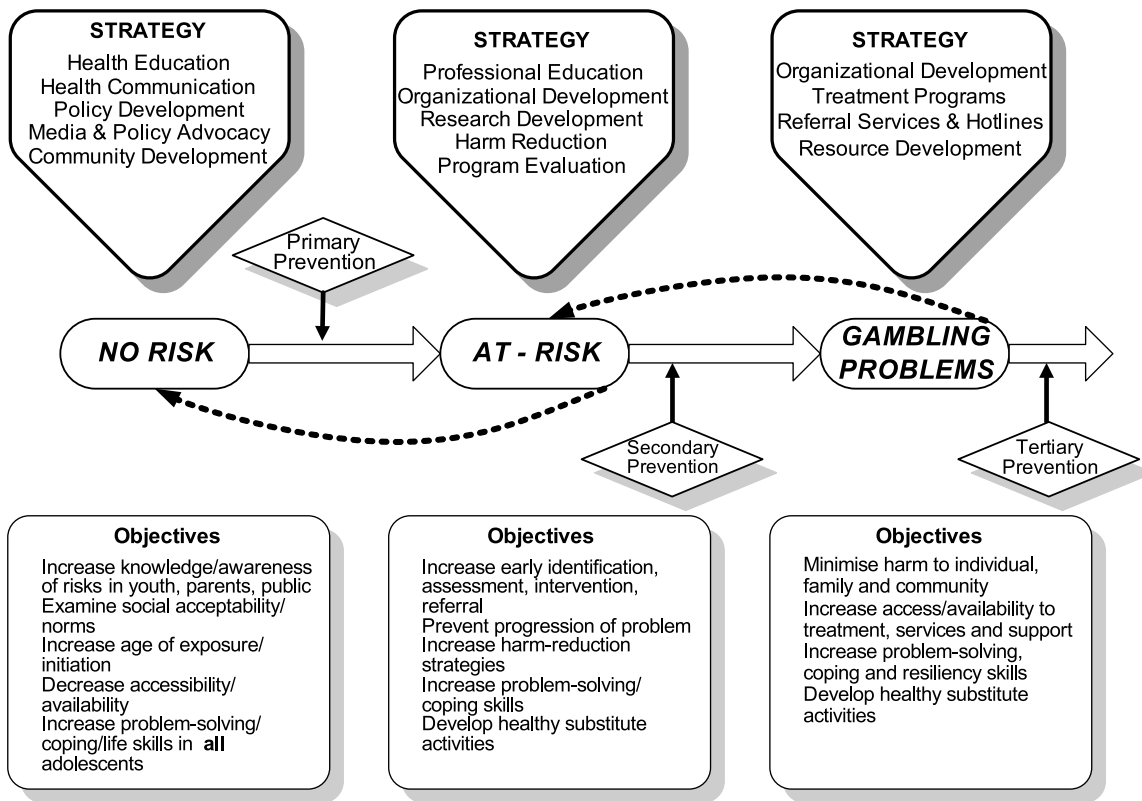
who gamble experience few negative effects, from a public health and population-based perspective, the greater the number of young ‘social’ gamblers that exist, the greater the potential for more youth to develop a gambling addiction. In order to significantly reduce the overall prevalence of gambling-related problems in youth, public health strategies must focus on shifting the continuum of risk downward (i.e. reducing the number of young at-risk and high-risk gamblers as well as preventing low-risk youth from becoming at-risk) by addressing the individual, environmental and socio-economic determinants of gambling.

### RECOMMENDED ACTION

The Youth Gambling Risk Prevention Model, Figure 1, illustrates (a) the continuum of gambling risk, (b) the primary, secondary and tertiary prevention intervention points, (c) the related prevention objectives for each level of risk along the continuum and (d) the recommended health promotion strategies required to achieve the prevention objectives. This model emphasizes the importance of addressing youth gambling behaviour along a continuum and the need for different forms of intervention to address each level of risk.

The benefit of this model is that it is bidirectional and delineates two main trajectories: a risk continuum and a prevention pathway. The risk continuum moves from no-risk to at-risk and from at-risk to gambling problems. The prevention pathway moves in the opposite direction and aims to reverse the risk at every level along the continuum. The three prevention points impede the progression at each stage in the gambling risk continuum. Further, the model links clusters of health promotion strategies to prevention objectives outlined at all three levels of risk. The health promotion strategies should be designed, tailored and implemented to address and achieve every objective as per the needs of individual communities.

Derevensky *et al.* (Derevensky *et al.*, 2001) conducted a comprehensive review of existing gambling prevention initiatives and concluded that while empirical knowledge of the prevention of youth gambling problems and its translation into science-based initiatives is very limited, the emergent field of youth gambling can make use of the considerable literature and prevention initiatives on adolescent alcohol and substance



**Fig. 1:** Youth Gambling Risk Prevention model.

use given their many similarities. As such, the strategies and recommendation presented here are theory-based and require implementation and empirical evaluation in order to begin to develop the evidence-base necessary for best practices.

**Primary prevention**

Youth who do not gamble or gamble infrequently are categorized under no-risk on the continuum; the majority of young people (80%) would fall under this level of risk (Derevensky and Gupta, 1998). Their behaviour does not currently place them at risk, however, this does not suggest that there is no need for public health intervention on a population level. In fact, since a large percentage of youth gamble a potential exists for increased gambling and problems (Gupta and Derevensky, 1998).

Primary prevention strategies aim to prevent the onset of at-risk gambling behaviour and

maintain youth at the healthy end of the continuum. Primary prevention objectives include increasing knowledge and awareness of the risks and consequences of at-risk gambling for not only the adolescents themselves, through school-based programmes, but for their parents, professionals and the general public. To date, there have been few attempts at such a goal and those that have been implemented lack empirical evaluation (NRC, 1999).

Public education measures, such as social-marketing and the use of the media, are important measures given that adolescents’ attitudes about gambling may be formed through marketing and promotion of gambling in the mass media (Griffiths, 2002) and modelling of parents and peers (Hardoon *et al.*, 2002). Such strategies help persuade the public to question the social acceptability of underage gambling and have the potential to influence social norms. In order to be effective, however, public education

strategies need to be part of an integrated approach, which includes implementing healthy public policy that modifies the existing environment, thereby enabling behaviour change. In addition, involving the community in the development and implementation of programmes and the policy-making process may strengthen public support, enhance community capacity and improve public knowledge and perception of the risks of youth gambling.

Advocacy for healthy public policy on regulating and limiting the expansion of gambling in communities may help foster a more supportive environment—one where gambling is curtailed and less visible to minors. Given that age of onset is a significant risk-factor (Derevensky and Gupta, 2004), increasing the age of first exposure to gambling participation by limiting the availability of gambling products and venues is a necessary goal. Information programmes for retailers on the importance of enforcing age restrictions increases the point of purchase barriers for youth trying to gamble. There also remains a need to develop standards and policies regulating the promotion and marketing of gambling products and venues, in light of research suggesting that youth are adversely affected by advertising tactics (Griffiths, 2003) (for a detailed discussion of social policy issues see Derevensky *et al.*, 2004). Without the development of policies that foster an environment supportive of behaviour change, educational programmes at the community or school level are not likely to be effective (Campbell *et al.*, 1999).

### Secondary prevention

Approximately 10–15% of youth are at-risk of developing a severe gambling problem, experiencing one or more negative consequences associated with their gambling while not meeting the DSM criteria (Shaffer and Hall, 1996). Nevertheless, these youth exhibit multiple signs of problematic gambling behaviour, and without appropriate secondary prevention they remain at an increased risk for pathological gambling.

Secondary prevention attempts to avert at-risk youth from escalating towards pathological gambling and includes early identification strategies. For example, by developing and implementing effective professional education and training programmes for primary health care workers (e.g. physicians, school counsellors, social workers), adolescents can be more easily identified. With appropriate education and

training, professionals will have the knowledge and resources needed to understand the risks, recognize the signs of early gambling troubles in underage youth, and respond effectively.

Organizational development, including policy development, is yet another approach used to influence health services. This includes developing standards of care oriented towards gambling prevention. For example, outpatient facilities including clinics and community health centres can offer staff training on how to identify, assess, and provide brief intervention to youth that may be at-risk of developing a gambling problem. Staff should also have at their disposal the resources and tools needed to respond to youth gambling issues, including access to gambling screens, information pamphlets, treatment guidelines and referral contacts.

Programmes founded on a harm-reduction approach inform youth of the risks and dangers associated with gambling, and help them develop the necessary skills to remain in control, however such programmes do not advocate abstinence (Single, 2001). Relatively few gambling prevention or sensitization programmes exist and those prevention programmes that are being implemented lack empirical validity as to their effectiveness (Derevensky *et al.*, 2001). Harm-reduction strategies need to identify and target at-risk youth, including communities and/or schools known to have gambling problems. Evidence-based harm-reduction and outreach programmes need to form part of an overall gambling prevention approach. (For a complete discussion see Dickson *et al.*, 2004.)

### Tertiary prevention

Adolescents engaging in excessive gambling and experiencing multiple serious gambling-related problems are considered to be problem or pathological gamblers. Symptomatic of pathological gambling is a continuous or periodic loss of control over gambling, irrational thinking, a preoccupation with gambling and with obtaining money to gamble, as well as a continuation with gambling behaviour despite adverse consequences, and an inability to stop in spite of their desire to do so [American Psychiatric Association (APA), 1994].

Tertiary prevention strategies aim to increase access and availability of treatment, services and support. Such treatment services can be developed specifically for gambling, or gambling

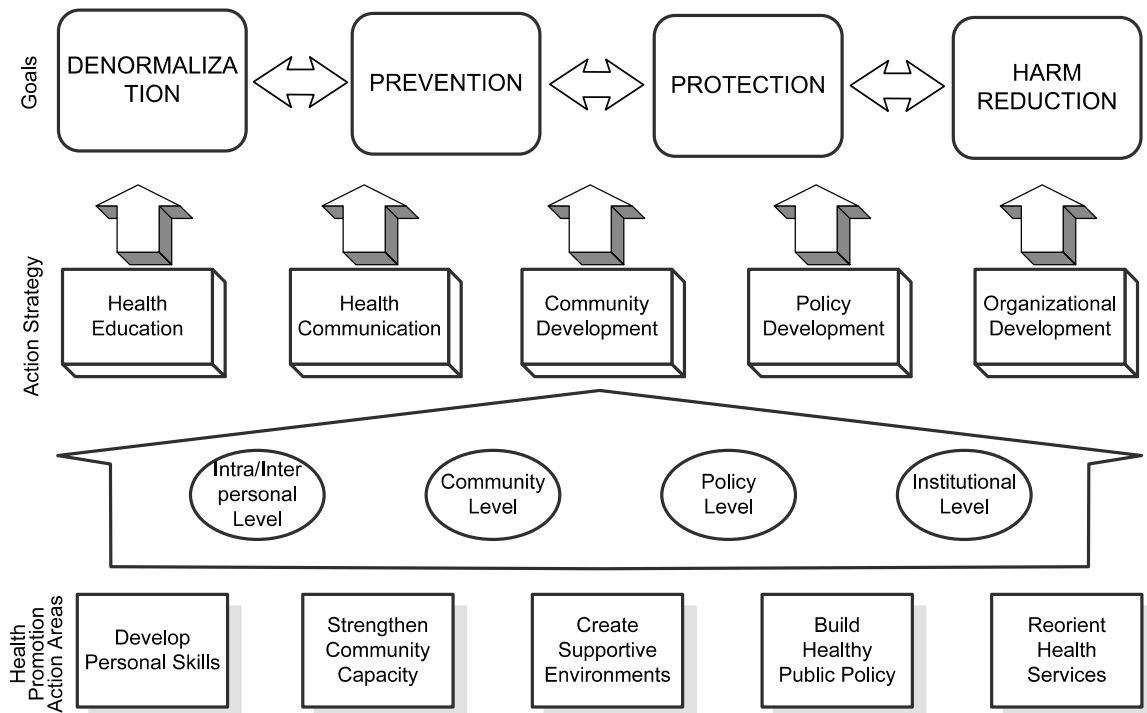
treatment can be incorporated into existing addiction programmes. Marketing services as free, confidential and youth-friendly may help increase the utilization of these services. It is essential that treatment programmes be tailored to the needs and developmental age of each individual (see Derevensky *et al.*, 2001). The promotion of referral services and telephone helplines is also important. Telephone helplines are confidential and easily accessible, and may be an ideal vehicle for youth to ask questions, obtain information and acquire referrals to services.

**FRAMEWORK FOR ACTION**

The Framework for Action (Figure 2) depicts an overall structure to guide public health action in the area of youth gambling. The Ottawa Charter for Health Promotion [World Health Organisation (WHO), 1986] forms the basis for action within this framework. Drawing upon the Charter’s five action areas—development of personal skills, strengthening community action, creating supportive environments, reorienting

health services and building healthy public policy—this model can help direct and shape public health action for the prevention of youth gambling. The five pillars of health promotion represent the foundation upon which public health goals are achieved. The framework emanates from the bottom with the five health promotion action areas, and flows upward to the four gambling-related goals. Within each stage, the framework guides and directs action towards achieving the principal public health goals, attainable through a multi-level approach.

The four public health goals—denormalization, prevention, protection and harm-reduction—although independently relevant and important are reciprocally related, and together address the spectrum of issues underlying gambling problems. Denormalization, within the context of youth problem gambling, assumes social de-normalization, where society begins to question and assess underage gambling. Similar to the strategies incorporated in tobacco prevention, denormalization includes drawing attention to the marketing strategies employed by the gambling industry, influencing social norms and attitudes on



**Fig. 2:** A public health policy Framework for Action.

youth gambling, challenging current myths and misconceptions among youth and the general public, and promoting realistic and accurate knowledge of the impact of youth gambling.

Prevention in the area of youth problem gambling should incorporate the following aims: increasing knowledge and awareness of the risks of excessive gambling among youth, professionals and the general public; promoting informed decision-making among individuals; the early identification and treatment of youth experiencing gambling problems or at-risk of developing one; helping youth develop problem-solving, coping and social skills required for healthy development; and minimizing harm of gambling problems in youth, their families and communities.

Governments, the industry and the public have a responsibility to protect children and adolescents from potentially harmful products. This goal aims to protect youth from exposure to gambling products and promotion through effective institutional policy and government legislation thereby reducing the accessibility and availability of all state regulated gambling to underage youth. Further, efforts to protect youth from the direct and indirect marketing of gambling products and venues is required.

Harm-reduction focuses on preventing the specific problem behaviour from developing. As an overall goal, harm-reduction should be targeted to all youth, especially those at-risk, thereby decreasing the potential negative consequences of excessive gambling.

Health promotion strategies that develop personal skills aim to help youth, parents, and professionals acquire accurate knowledge and skills required to make sound decisions concerning gambling behaviour. Professionals and parents, if alert, can identify, protect or support youth who may be experiencing a gambling problem or at-risk for developing a problem.

Strengthening community capacity is an important prerequisite for action in addressing youth gambling problems. Effective public health action must be formulated with an appreciation of the history of each community and appropriate within the local context. Approaches that seek to educate and empower communities will ultimately bring gambling issues to the policy agenda. Raising the visibility and awareness of the burden of gambling within communities can help catalyse action toward policy and community development. Furthermore, the importance of increasing the visibility of youth problem

gambling to those in a position that affect policy changes should not be overlooked. Political commitment may be acquired by emphasizing our social responsibility to protect youth. Facilitating communication and dissemination of information on the social consequences of problem gambling and the preventability can garner political support for public health action.

Creating supportive environments includes fostering a physical, socio-economic, political and cultural environment that promotes the health and well-being of individuals and of society. Policy development necessitates promoting barriers in order to restrict access to gambling venues. Environments where children and youth live and play should be supportive and conducive to their developmental needs and to their life skills and decision-making ability.

Building healthy public policy consists of implementing strategies that promote healthier choices through government legislation, regulation and fiscal measures while advocating for the development of responsible social policy. All governmental sectors have a responsibility to develop policies and regulations, provide a duty of care that limit/monitor the expansion of gambling in communities, fund research examining the social and health impact of gambling, enforce existing regulations and statutes, as well as regulate advertising and marketing of gambling to youth.

Reorienting health services in primary care settings and social services care facilities would ensure that professionals working with youth are sensitive to their unique needs, able to identify potential gambling problems, and intervene when necessary. Professional training can help ensure that early identification and support for gambling problems is provided. Health centres and organizations need to provide appropriate gambling prevention and treatment programmes. Science-based treatment programmes should be readily available and easily accessible in communities.

Assuming that despite the possible barriers to adopting a public health approach (see Korn *et al.*, 2003) policy makers, professionals and other proponents embrace it, this theoretical framework helps direct health promotion action on multiple levels, and suggests a range of strategies needed to achieve and attain public health goals. However, given that the framework is theory-based, further evaluation of its applicability and of any confounding issues is needed.

Public health recommendations incorporating the various elements of the Framework for

**Table 2:** Recommendations for action

Recommendation	Strategy	Health promotion action area
Develop, implement, and evaluate interactive school-based prevention programmes with a peer-led component, and booster sessions	Health education	Develop personal skills
Develop parent education programmes	organizational development	
Develop alternatives programmes for at-risk youth	Health education	Strengthen community capacity
Develop educational resources and materials for schools	community development	
Provide industry education and training for retailers	Health education	
Plan and implement education and training for teachers, health care professionals, and social service providers	community development	
Implement social-marketing/public awareness campaigns	Health communication	
Organize public education forums and conferences on the risks, costs and consequences of youth gambling	Community development	
Design point of purchase awareness materials (e.g. signs on lottery booths, statements on play slips or tickets)	Health communication	
Implement awareness programmes for retailers and venue operators	Health communication	
Develop community guidebooks on gambling: current research, community strategies and ideas	community development	
Develop and distribute educational materials such as harm-reduction wallet cards for each type of game	Community development	
Incorporate youth gambling harm-reduction programmes in existing youth services	Health communication	Create supportive environments
Promote existing telephone hotlines	Community development	
Advocate for youth-service groups to include gambling prevention	Community development	
Develop school policies	Organizational development	
	policy development	
Recommendation	Strategy	Health promotion action area
Advocate for development of industry policy on enforcement and on penalties for non-compliance	Organizational development	Create supportive environments
Advocate for government gambling regulatory agencies to ban aggressive advertising strategies	policy development	
Advocacy and development of policy on regulating expansion of gambling in communities	Policy development	Build healthy public policy
Limit the location and density of VLT outlets and ticket vendors	community development	
Develop and enforce regulations and statutes on underage gambling	Policy development	
Legislate policy on increasing the legal age for all gambling to 21	Policy development	
Develop government regulations and standards on marketing and advertising of gambling products and venues	Policy development	
Secure with levels/sectors of government (industry, education, health, environment) commitment and resources for gambling prevention	Community development	
Develop standards of care for gambling prevention	Community development	
Implement professional training on early identification and brief intervention	Organizational development	
Produce and distribute desk reference screening tools for physicians and other health professionals	Health communication	

**Table 2:** continued

Recommendation	Strategy	Health promotion action area
Develop manuals for community workers, health professionals, social service providers on assessment, brief intervention, referral and treatment	Organizational development	
Develop empirically validated youth treatment programmes	Organizational development	
Institute policy in hospitals, clinics, and treatment facilities on the provision of gambling prevention and treatment	Policy development	
Advocate for incorporation of gambling prevention in the curriculum of health professional institutions (e.g. nursing, medicine, social work, law)	Policy development	

Action are summarized in Table 2. As well, suggestions for future directions are provided.

## CONCLUSIONS

The burden of problem gambling among children and youth remains under-recognized. Our current knowledge and understanding of the magnitude of the problem and its considerable impact upon the health and well-being of youth compels us to respond in a timely, effective and pragmatic manner. Examining youth problem gambling along a continuum of possible and real risk necessitates setting prevention objectives in order to prevent the onset, reduce the risk, and minimize the negative consequences of gambling problems among youth.

A public health approach incorporates a multi-dimensional perspective, recognizes the individual and social determinants, draws upon health promotion principles, and applies population-based theory. As such, a public health framework remains a pro-active approach to addressing youth gambling. Governments should not minimize this issue. This is an important social and public health policy concern which will continue to grow. Our youth remain particularly vulnerable to the lure of gambling and require our immediate attention.

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## WHAT'S THE BIG DEAL?

Youth are at a higher risk of developing a gambling problem than adults. Easy access to online gambling, gambling at an early age, having family members who actively gamble, or engaging in other risky behaviors (such as drinking, drug use, and sex) can put an adolescent at a higher risk of developing a gambling problem.

An estimated 8% of youth—double the adult rate—are at risk. According to the National Council on Problem Gambling, 6% of college students struggle with a gambling disorder.

# WHAT'S THE BIG DEAL?

## A Guide to Youth Problem Gambling



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## YOUTH PROBLEM GAMBLING

Unlike the topic of drug and alcohol use, problem gambling is rarely discussed in school or at home, and many teens enter into adulthood without knowledge of the risks involved with gambling. For most people, gambling is fun and a source of recreation and entertainment. But for some, gambling can become an addiction that can destroy relationships and goals, and even lead to suicide.

### WARNING SIGNS

- Gambling to escape boredom, pain, or loneliness
- Needing to bet more and more money to maintain thrill
- Unexplained absences from school or work
- Losing a job or college scholarship because of gambling
- Talking frequently about gambling
- Becoming irritable and angry when trying to quit
- Gambling to win back losses or to chase wins
- Constantly borrowing money from friends to gamble
- Stealing money to gamble
- Possessing large sums of money or bragging about gambling wins
- Gambling to impress friends or family
- Damaging relationships with parents or others because of gambling

### YOUTH GAMBLE TO:

- Escape problems, boredom, or pain
- Get an adrenaline rush
- Make “easy” money
- Impress others or get attention
- Make friends

### YOUTH GAMBLE ON:

- Sports (including Fantasy Football and NCAA March Madness)
- Card and dice games
- Raffles
- Lottery and scratch tickets
- Social gaming and Internet gambling
- Casino games (blackjack, craps, roulette, and slot machines)

### GAMBLE RESPONSIBLY:

- Set a time limit—and stick to it
- Set a money limit—and stick to it
- Gamble ONLY to have fun
- Don't gamble when lonely or upset
- Don't gamble to win back a loss or chase a win
- Expect to lose—not win

### WHERE DO I GO FOR HELP?

If you or someone you care about has a gambling problem, there is hope. Help starts today by calling **1.800.547.6133**. More information is available at [www.evergreencpg.org](http://www.evergreencpg.org).

### ECPG YOUTH PROGRAMS

- ▶ **PEER-TO-PEER CAMPAIGN WITH MEDIA PARTNER**  
Each year, at least two schools (high school or college) are selected whose business students run a competitive, full marketing campaign with multi-media elements, such as logos, radio and TV commercials, and social media messaging. Students work in teams to “market” a youth problem gambling awareness campaign to their peers, with the winning team’s commercial airing on our media partner’s radio station.
- ▶ **YOUTH PROBLEM GAMBLING & THE ARTS GRANT**  
The YPGA Grant program empowers youth and young adults to make healthy choices around risky behavior, such as gambling. Each year, at least one student group is selected to produce a program or project using the arts—such as music, dance, visual, or media arts—that educates their peers and community about youth problem gambling prevention and awareness. YPGA Grants range from \$500–\$5,000.

For more information on our youth programs, visit [www.evergreencpg.org](http://www.evergreencpg.org) ▶ [Youth Programs](#).

help starts here ▶ **1.800.547.6133**

Washington State Problem Gambling Helpline | AVAILABLE 24/7

CONFIDENTIAL INFORMATION AND REFERRALS

## **Introduction**

Problem gambling can affect people across the lifespan, although young people aged 10 to 24 years have higher rates of problem gambling than adults. Different factors affect the risk of youth problem gambling compared to adults, and youth with problem gambling frequently experience co-occurring mental health problems. It is important to understand and apply developmentally appropriate screening, assessment and treatment practices for youth with problem gambling.

This webpage looks at the evidence on screening, assessing and treating youth with problem gambling, and shows you how to put it into practice. This information for mental health and addiction service providers is based on a review of the evidence and was reviewed by experts in the field of youth problem gambling.

## **About problem gambling in youth**

Research shows young people aged 10 to 24 years have higher rates of problem gambling than adults (Boak et al., 2018; Calado et al., 2017; Ialomiteanu et al., 2018). While these findings may vary due to the context and the tools used to estimate prevalence, the findings point to a need for more research and support services targeted to this population, as behaviours formed in adolescence can contribute to problem gambling in adulthood (Delfabbro et al., 2016; Dowling et al., 2017).

Most people tend to underestimate the number of young people that engage in gambling behaviour. Findings from the most recent Ontario Student Drug Use and Health Survey (Boak et al., 2020) showed that one-third (32 per cent) of students reported participating in one or more gambling activities in 2019. About 4 per cent of secondary school students reported symptoms of low- to moderately-severe gambling problems, and 2 per cent reported symptoms of a high-severity gambling problem.

The Canadian Youth Gambling Survey (Elton-Marshall et al., 2016) indicated that 41.6 per cent of adolescents in their sample (youth aged 13-19 in Newfoundland and Labrador, Saskatchewan and Ontario) had gambled in the past three months. This study also indicated that a higher proportion of youth who gambled online scored "high" (17.4 per cent) or "low-to-moderate" (18.2 per cent) in problem gambling severity than those who engaged in land-based gambling (1.2 per cent and 7.2 per cent respectively) (Elton-Marshall et al., 2016).

## **Common types of gambling activity**

Although most regulated gambling activities are illegal for adolescents due to legal age restrictions, youth still engage in various types of gambling activities (Derevensky & Gilbeau, 2015). For example, Ontario students in grades 7 to 12 report gambling predominantly on dares or private bets (11.6 per cent), sports pools (9.8 per cent) and card games (9-4 per cent) (Boak et al., 2018).

The distinction between gambling and gaming has been blurred in ways that make gambling more appealing and accessible to young people. Beyond traditional types of gambling, youth gambling activities include a variety of unconventional forms of gambling. These activities reflect the convergence of gambling and video game design, as well as newer technological innovations in online and Internet gambling. Some examples include the following:

### **Loot boxes/loot crates**

Loot boxes are mystery video game "grab bags" containing virtual items such as weapons or armour that are rewarded via game play or purchased with real money or in-game currency. Because the contents are unknown, randomly generated and may or may not be useful to the player, choosing to open them equates to gambling in that it involves both risking something of value and an element of chance.

### **Social casino games**

Social casino games are free-to-play gambling-themed games available on social media or mobile apps. They have their own virtual in-game currency (e.g., credits, coins, dice) that can be earned (e.g., watching advertisements, referring friends) or sometimes purchased with real money. These games typically introduce youth to gambling at an early age and offer better odds of winning, which can lead to gambling for money (Velselka et al., 2018).

### **Skins betting**

"Skins" (which can be obtained through loot boxes) are virtual, in-game items that provide cosmetic alterations to a player's weapons, avatar or equipment without increasing the character's abilities. They therefore offer no real advantage to game play. However, skins have value as a "collector's item" within a tiered system where rarer skins are harder to obtain and therefore hold more value. A gambling subculture on unregulated websites allows skins to be used as currency to place bets on e-sports or other games, such as roulette. A major concern in skins gambling is underage gambling, as websites often do not require age or ID verification checks (Greer et al., 2019).

## **E-sports betting**

E-sports are organized video game competitions between highly skilled game players or teams that fans watch either online or in-person where the event is being held. Because they share many of the same elements of traditional professional sports, e-sports gambling services, vendors and practices have proliferated in recent years. There is a lack of reliable data on the prevalence, characteristics, and gambling behaviour of e-sports bettors, although one study showed that rates of e-sports betting were highest among younger adults (18-24-year-olds and 25-34-year-olds). In addition, a greater proportion of the youngest demographic (18-24-year-olds) was more likely to bet on e-sports with skins rather than cash (Gambling Commission, 2018).

## **Focus on loot boxes**

Young people who play video games may consider acquiring & purchasing loot boxes as just a part of the game rather than a form of gambling. This is because loot boxes have become very common in video games, they are not traditional forms of gambling, and they are not subject to the same regulatory laws and restrictions that govern youth behaviour.

Research shows that a significant number of youth gamers purchase loot boxes (Hall et al., 2021; Zendle et al., 2019). There is growing concern among both regulators and researchers that spending money on loot boxes may be linked to gambling-related harm in adults and young people. One study of older adolescents (aged 16-18) found that the more money young people spent on loot boxes, the greater the severity of their problem gambling (Zendle et al., 2019).

## **Social media, gambling and youth**

Young people are active users and consumers across a variety of social media platforms. As a result, they can be exposed to a variety of gambling content, whether via industry-driven marketing campaigns or user-generated content. Some examples include the following (Kleynhans, & Sims, 2020):

- Even on social media sites like YouTube that have strict rules around gambling advertisements (e.g., restricting ads to minors), Mystery Box vendors can pay content creators to promote their products to subscribers (some of which have large youth audiences) and provide links for where to buy these boxes. Similarly, young social influencers commonly promote skins gambling on their channels to large audiences of children and adolescents (Greer et al., 2019).
- Social media streaming platforms such as Twitch allow users to stream themselves gambling for up to 30 minutes. Some streamers are directly sponsored by gambling companies, offering incentives (e.g., discounts, affiliate promo codes) and providing links to viewers for the gambling company's game/website.
- The social media video platform Tik Tok showcases a large amount of gambling-related content in the form of tipsters. Tens of millions of videos discuss gambling tips, fantasy sports, e-sports, and stock market investing, which attracts young viewers.

## **What does the evidence say?**

Several factors can put young people at risk for problem gambling, including (Afifi et al., 2016; Bergevin et al., 2006; Chinneck et al., 2016; Derevensky et al., 2007; Dickson et al., 2008; Dowling et al., 2017; Edgerton et al., 2015a, 2015b; Felsher et al., 2010; McBride & Derevensky, 2016):

- having a parent or other family member with a gambling problem
- substance use
- alcohol use
- depression and/or anxiety
- trauma
- childhood abuse
- impulsivity/attention-deficit hyperactivity disorder
- difficulty making friends
- not being connected or close to family members
- poor coping skills
- not having a sense of belonging at school
- being male.



Many of these risk factors can also co-occur with problem gambling in adolescents, including substance use disorders and mood or anxiety disorders (Ferrara et al., 2018).

Whereas adults are more likely to gamble for financial gain, adolescents are likely to gamble for entertainment, to escape negative emotions, to relieve boredom or loneliness, and to socialize or compete with others. Younger people are also more likely to take risks, which could lead to problem gambling (Derevensky & Gilbeau, 2015).

Youth with problem gambling can face a number of negative consequences, including (Afifi et al., 2016; Apinuntavech et al., 2012;

Brunelle et al., 2012; Cook et al., 2015; Derevensky & Gilbeau, 2015; Dickson et al., 2008; Neighbors et al., 2002):

- substance use problems
- mental health problems
- problem video gaming
- criminal behaviour
- family problems (e.g., parenting difficulties, family conflict)
- social/interpersonal difficulties
- difficulties in school
- financial problems.

Adolescents with gambling problems have also been found to have significantly higher rates of suicidal ideation and attempts than non-gamblers and social gamblers (Cook et al., 2015; Nower et al., 2004). While further research is needed to better understand the significant effects of problem gambling in young people's lives, studies of adult populations have shown that problem gambling produces a wide range of negative consequences that result in significant psychological distress (e.g., disrupted family relationships, financial pressure, deteriorating work or school performance, truancy, aggression, and criminal behaviours to finance gambling) (Nower, 2004).

The [Evidence Informed Practice page on suicide and problem gambling](#) includes more details, along with risk assessment and safety planning tools, some of which are designed specifically for youth.

## **How do I put the evidence into practice?**

When providing clinical care to a young person who may have a gambling problem, it is important to consider their developmental stage, needs and goals. The following screening, assessment and treatment approaches can be effective for youth at any point along the continuum of gambling severity.

## **Screening and assessment**

Although most screening tools for youth have been adapted from adult versions, the following have been validated for use in adolescents (Derevensky & Gupta, 2005; Elton-Marshall et al., 2016):

- Canadian Adolescent Gambling Inventory's Problem Gambling subscale (CAGI)
- South Oaks Gambling Screen-Revised for Adolescents (SOGS-RA)
- Diagnostic Statistical Manual-IV-MR-J (Adapted-Multiple Response format for Juveniles) (DSM-IV-MR-J)
- Massachusetts Adolescent Gambling Screen (MAGS).

If you determine that your client has a gambling problem, an assessment will help you understand their gambling behaviours and any co-occurring mental health problems, medical conditions or environmental factors that may be contributing to the problem (St-Pierre & Derevensky, 2016). Learn more about [screening and assessment](#).

## **Treatment**

Currently, there are no universal best practices for the treatment of youth with gambling problems. Since few youth are referred to or access treatment, there is little research in this area and most treatments used in practice are based on what has been proven effective for adults (St-Pierre & Derevensky, 2016). The following approaches have shown some promise for the treatment of youth problem gambling:



- **Cognitive-behavioural therapy (CBT)** is a time-limited form of psychotherapy that teaches clients to shift their thoughts and behaviours related to gambling and respond to their urges in a more healthy way. CBT was found to improve gambling outcomes and illusions of control up to six months after treatment when offered as weekly, one-on-one sessions over three months to youth aged 17 to 19 years (Ladouceur et al., 1994) and as weekly group sessions over four or six weeks to college students aged 19 to 25 years (Larimer et al., 2012).
- **Motivational and personalized feedback approaches**, either offered separately or together, have shown some promise for addressing problem gambling in college students aged 18 years and older. A motivational approach (i.e., motivational interviewing or motivational enhancement therapy) is a person-centred counselling style that addresses ambivalence toward change and emphasizes personal autonomy, while personalized feedback focuses on correcting perceived norms about gambling (St-Pierre & Derevensky, 2016). Two studies examining brief interventions with both motivational and personalized feedback elements found an improvement in gambling outcomes (Larimer et al., 2012; Petry et al., 2009). Other studies have found that personalized normative feedback or becoming aware of the gambling norms of peers can help prevent problem gambling in college-aged students (Neighbors et al., 2015; Takushi et al., 2004).
- **Family-based interventions** include parental monitoring, connectedness, and involvement in a youth's life. Research shows that these types of interventions lead to fewer gambling problems, although this may be age- and situation-specific (Allami et al., 2018; Dickson et al., 2008). Because parental gambling increases the likelihood of gambling participation and problem gambling in youth (Magoon & Ingersoll, 2006; Zhai et al., 2017), it may be beneficial to involve parents and family in treatment as appropriate.

## Other considerations

Depending on the severity of problem gambling and concurrent disorders, young clients may also benefit from these additional supports:

- If your client is experiencing co-occurring mental health problems, address these alongside their problem gambling (Ferrara et al., 2018). It is also important to work together with your client's other healthcare provider(s) to ensure they receive coordinated care.
- If your client expresses suicidal thoughts, address them immediately. Learn more about [suicide and problem gambling](#).
- If your client consents, consider involving family members in treatment sessions and/or providing supports to family members separately, as is done with adults (Kourgiantakis & Ashcroft, 2018; Kourgiantakis, et al., 2013). Parents can benefit from information about youth problem gambling, including ways to address it and engage the youth in treatment.

## Additional resources

The following websites provide additional information about youth gambling:

- YMCA Youth Gambling Awareness Program: [www.youthbet.com](http://www.youthbet.com)
- International Centre for Youth Gambling Problems and High-Risk Behaviors: [www.youthgambling.com](http://www.youthgambling.com)
- The Young Gamers and Gamblers Education Trust (YGAM) Parent Hub: <https://parents.ygam.org/>

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**STATE OF WASHINGTON  
GAMBLING COMMISSION**

**“Protect the Public by Ensuring that Gambling is Legal and Honest”**

**TO: COMMISSIONERS**  
Alicia Levy, Chair  
Julia Patterson, Vice-Chair  
Bud Sizemore  
Sarah Lawson  
Anders Ibsen

**Ex-Officios**  
Senator, Steve Conway  
Senator, Jeff Holy  
Representative, Shelley Kloba  
Representative, Skyler Rude

**FROM:** Tina Griffin, Director

**DATE:** August 10, 2023

**SUBJECT: Director’s Memo - Problem Gambling Topics for Discussion**

**Responsible Gaming Resolution adopted by the National Council of Legislators from Gambling States**

At the July Commission meeting, Vice Chair Patterson asked to review and discuss the Responsible Gaming Resolution adopted by the National Council of Legislators from Gambling States at their July 2023 meeting in Denver. (See attached)

There are 16 resolutions, many of which we have implemented within the state. Some of those that have not been implemented currently in Washington were listed as proposed strategies by the Problem Gambling Task Force in their December 2022 report to the legislature. Finally, a few have not been addressed in the state.

<b>NCLGS Resolution</b>	<b>What We Currently Do</b>	<b>PGTF Proposed Strategies</b>
Urges states to holistically address responsible gaming and problem gambling through a combination of prevention and harm reduction, public awareness, intervention and treatment, research, and adequate funding that address the specific measured needs of the state or jurisdiction and ensure all service are affordable, effective, and accessible for citizens who need them. (#1)	We have addressed responsible gaming and problem gambling through our laws, rulemaking, and the Tribal-State Compacts.	
Encourages cross-jurisdictional and multi-state collaboration among policy makers, regulators, gaming operators,	This was the purpose of the Problem Gambling Task Force. Implementation of their	



<p>gaming manufacturers, community leaders, researchers, treatment providers and others to develop evidence based responsible gambling research, policies, and services. (#2)</p>	<p>proposed strategies will be done amongst -the same groups that were part of PGTF.</p>	
<p>Recommends the establishment of responsible gaming and problem gambling regulations for all forms of legalized gaming, tailored as necessary to each form but consistent with jurisdictional policy goals. (#3)</p>	<p>RCW 9.46.071 sets out the framework for our problem gambling regulations. We have begun the rule-making process to address problem gambling signage.</p>	
<p>Encourages the promotion of safer gaming behaviors through the development and funding of public awareness campaigns coupled with prevention and harm reduction efforts within communities that educate consumers how to game in safety and raise awareness of potential signs of a gambling problem, including those that coexist with other public health concerns. (#4)</p>	<p>RCW 9.46.071 requires signage at all licensed locations. We have begun the rule-making process to further address signage at licensed locations.</p> <p>The Tribal-State Compacts require problem gambling contributions to address education, awareness, prevention, and treatment.</p>	
<p>Urges the use of education and harm minimization measures and policies involving limit-setting and exclusion for marketing, payments and payment processing (personal credit, credit card, cashless payments, check cashing, bank withdrawals, and ATM patterns/usage), as well as other precommitment tools and personal data information for players to make informed decisions about their gambling. (#5)</p>	<p>Responsible gambling provisions, that includes creating &amp; maintaining a responsible gaming policy that includes training for gaming employees and creating an interactive program for patrons are included in recent Tribal-State Compact Amendments.</p>	<p>Determine and decide which state agency will take the lead role in advancing consumer protections for existing and newly legalized gambling activities in the future. The approach would likely involve WSGC, HCA/DBHR, the WA State Attorney General’s Office, and other partners. (pg. 22)</p> <p>Incorporate responsible gambling education for players in brick-and-mortar vendors and operators, including odds/stats, common distortions, and problem gambling</p>

		resources. This would likely be initiated by ECPG, WSGC, and HCA/DBHR. (pg. 23)
Encourages policies and programs that enable customers to discontinue their play temporarily or permanently through exclusion programs from gaming activities statewide and across multiple jurisdictions with multiple term lengths. (#6)	RCW 9.46.071 and WAC Chapter 230-23 outline our statewide self-exclusion program. Tribes also offer programs for players to exclude themselves temporarily or permanently from gambling activities.	
Suggests that states and operators coordinate gambling exclusion lists to prevent people with gambling problems and others on exclusion lists from problematic play in other states. (#7)		
Urges formalized processes for family members to express problem gambling-related concerns to the state regulatory body and/or gaming operators. (#8)	Family members can express problem gambling related concerns to Commissioners at public meetings and staff through our website, email, and phone.	
Calls for responsible gaming and problem gambling policies and insurance coverage for all employees of gaming licensees. (#9)		
Supports the use of one accredited national problem gambling helpline number within all jurisdictions. (#10)		Evaluate problem gambling helpline practices and recommend improvements. (pg. 35)
Calls for the development of state or jurisdictional advertising guidelines to ensure marketing is only targeted to those who are of legal age to gamble, follow		

<p>standards to not offer content, themes, and promotions that have special appeal to those consumers most at risk for gambling problems, and to ensure there are programs that audit and monitor the content of third-party marketing affiliates. (#11)</p>		
<p>Recommends the creation of a specific staff/department function within a gaming regulatory body to oversee all aspects of responsible gaming and problem gambling regulations and to monitor compliance and program accountability and efficacy. (#12)</p>	<p>Staff from various units have been assigned to be resources on responsible gambling.</p>	<p>Washington State Gambling Commission will identify a staff position within the agency to be a resource person for staff and Commissioners on responsible gambling. This would likely be initiated by WSGC. (pg. 23)</p>
<p>Recommends integrating problem gambling services and screening into other substance use disorder, mental health and/or behavioral health services to identify, reduce, and prevent problem gambling. (#13)</p>		<p>Require existing and future clinical training programs for substance use disorder and behavioral health professionals to include problem gambling as a required topic. This would likely be initiated by the Washington State Legislature, HCA/DBHR, and UW. (pg. 22)</p>
<p>Endorses the establishment and funding to integrate problem gambling into other diversion or therapeutic courts to offer responses to defendants in the criminal justice system with gambling problems through a court-supervised, comprehensive recovery program. (#14)</p>		<p>Initiate grant-based funding project for behavioral health agencies to voluntarily integrate a short evidence-based / validated problem gambling screening tool with mental health and substance use disorder assessment processes. This will likely be initiated by HCA/DBHR. (pg. 21)</p> <p>Enable HCA/DBHR to integrate problem gambling with other behavioral health care services. This would likely be initiated by the</p>

		Washington State Legislature and implemented by HCA/DBHR. (pg. 21)
Emphasizes the need to include access to anonymized player data, research components, and funding for responsible gaming and problem gambling policies to gauge trends, program efficacy, adapt to current conditions, and expand evidence-based best practices and new prevention and treatment techniques. (#15)		
Stresses the need for dedicated funding earmarked for the delivery of the full range of responsible gaming and problem gambling services, including but not limited to prevention, awareness and education, harm reduction, workforce development, outreach, treatment, and research. (#16)	Addressed in E2SSB 5634 in the 2023 Legislative session and in current Tribal-State Compact Amendments.	Significantly increase state funding for problem gambling prevention activities. This would likely be initiated by the Washington State Legislature. (pg. 21)  Increase state funding for State Problem Gambling Program to meet current and future needs. (pgs. 25 – 26)

The PGTF’s December 2022 report can be found [here](#).

**Advisory Committee Representative**

Engrossed Second Substitute Senate Bill 5634, see attached, established an ongoing advisory committee to be facilitated by the Health Care Authority to:

- Hold quarterly meetings,
- Track progress on the recommendations in the PGTF’s 2022 final report to the legislature,
- Provide advice and feedback on the state problem gambling program, as requested by HCA, and
- Discuss emerging issues related to problem gambling and identify possible strategies for improvement.

The advisory committee membership must include at least one representative from each of the following: WSGC, Lottery Commission, Horse Racing Commission, HCA, tribal gaming industry, the gambling counselor certification committee, a nonprofit problem gambling organization, the recovery community including at least one member with lived experience of problem gambling and an established business primarily engaged in the selling of food or drink

for consumption on the premises and that offers punchboards/pull-tabs, and social card games as a commercial stimulant.

I will be appointing a staff representative to the advisory committee to represent the agency in fulfilling the requirements of RCW 41.05.750(4). The appointee will report committee interactions to me and Commissioners, as necessary.

**Attachments:**

- July 2023 Responsible Gaming Resolution adopted by the National Council of Legislators from Gambling States
- Engrossed Second Substitute Senate Bill 5634

# Responsible Gaming Resolution 2023

## The Committee on Responsible Gaming

*Sponsor: Senator Jon Ford*

### Topic: NCLGS Responsible Gaming and Problem Gambling Resolution

Whereas the National Council of Legislators from Gaming States (NCLGS) is an independent organization of elected officials dedicated to non-partisan gaming awareness and education of lawmakers and regulators; and

Whereas NCLGS believes the issue of responsible gaming and problem gambling policy deserves attention in every state; and

Whereas the United States system of granting states the power to determine what forms of legal gambling are made available under what circumstances has led to significant variations across the country in responsible gaming and problem gambling policy; and

Whereas responsible gaming and problem gambling-related regulations vary across different types of gambling products and delivery methods, including but not limited to retail and online casinos, retail and online lottery products, retail and online sports wagering (including esports and fantasy sports), charitable gaming, pari-mutuel facilities; and

Whereas problem gambling is a mental health issue that is often undetected, with only a small proportion of those directly affected either seeking or receiving treatment or other forms of support services; and

Whereas the goal of comprehensive responsible gaming policy to increase protective factors through safer gaming regulatory policies, operator practices and products, and informed-decision making practices by consumers is an evidence-based effort that requires coordination and collaboration; and

Whereas the goal of problem gambling policy to reduce prevalence and incidence rates and the personal, familial, and societal costs associated with problem gambling is a vast undertaking that requires a multitude of policy strategies and interventions tailored to different aspects of the strategy to address the problem; and

Whereas addressing responsible gaming and problem gambling can have significant benefits for the health of individuals, families, and communities, as well as state budgets because of its high level of interconnectedness to other health and social issues; and

Whereas there is little standardization on the amount of funding required to address a holistic approach, and how those funds are to be derived or spent in each jurisdiction for responsible gaming and problem gambling services or programs; now, therefore, be it...

Resolved, that The National Council of Legislators from Gaming States (NCLGS):

1. Urges states to holistically address responsible gaming and problem gambling through a combination of prevention and harm reduction, public awareness, intervention and treatment, research, and adequate funding that address the specific measured needs of that state or jurisdiction and ensure all services are affordable, effective, and accessible for citizens who need them;
2. Encourages cross-jurisdictional and multi-state collaboration among policymakers, regulators, gaming operators, gaming manufacturers, community leaders, researchers, treatment providers and others to develop evidence-based responsible gaming and problem gambling research, policies, and services;
3. Recommends the establishment of responsible gaming and problem gambling regulations for all forms of legalized gaming, tailored as necessary to each form but consistent with jurisdictional policy goals;
4. Encourages the promotion of safer gaming behaviors through the development and funding of public awareness campaigns coupled with prevention and harm reduction efforts within communities that educate consumers how to game in safety and raise awareness of potential signs of a gambling problem, including those that coexist with other public health concerns;
5. Urges the use of education and harm minimization measures and policies involving limit setting and exclusion for marketing, payments and payment processing (personal credit, credit card, cashless payments,

check cashing, bank withdrawals, and ATM patterns/usage), as well as other precommitment tools and personal data information for players to make informed decisions about their gaming;

6. Encourages policies and programs that enable customers to discontinue their play temporarily or permanently through exclusion programs from gaming activities statewide and across multiple jurisdictions with multiple term lengths;

7. Suggests that states and operators coordinate gambling exclusion lists to prevent people with gambling problems and others on exclusion lists from problematic play in other states;

8. Urges formalized processes for family members to express problem gambling-related concerns to the state regulatory body and/or gaming operators;

9. Calls for responsible gaming and problem gambling policies and insurance coverage for all employees of gaming licensees;

10. Supports the use of one accredited national problem gambling helpline number within all jurisdictions;

11. Calls for the development of state or jurisdictional advertising guidelines to ensure marketing is only targeted to those who are of legal age to gamble, follow standards to not offer content, themes, and promotions that have special appeal to those consumers most at risk for gambling problems, and to ensure there are programs that audit and monitor the content of third-party marketing affiliates;

12. Recommends the creation of a specific staff/department function within a gaming regulatory body to oversee all aspects of responsible gaming and problem gambling regulations and to monitor compliance and program accountability and efficacy;

13. Recommends integrating problem gambling services and screening into other substance use disorder, mental health and/or behavioral health services to identify, reduce, and prevent problem gambling;

14. Endorses the establishment and funding to integrate problem gambling into other diversion or therapeutic courts to offer responses to defendants in the criminal justice system with gambling problems through a court-supervised, comprehensive recovery program;

15. Emphasizes the need to include access to anonymized player data, research components, and funding for responsible gaming and problem gambling policies to gauge trends, program efficacy, adapt to current conditions, and expand evidence-based best practices and new prevention and treatment techniques; and

16. Stresses the need for dedicated funding earmarked for the delivery of the full range of responsible gaming and problem gambling services, including but not limited to prevention, awareness and education, harm reduction, workforce development, outreach, treatment, and research.

CERTIFICATION OF ENROLLMENT

**ENGROSSED SECOND SUBSTITUTE SENATE BILL 5634**

Chapter 284, Laws of 2023

68th Legislature  
2023 Regular Session

**PROBLEM GAMBLING—VARIOUS PROVISIONS**

EFFECTIVE DATE: July 1, 2023

Passed by the Senate March 8, 2023  
Yeas 31 Nays 18

DENNY HECK

**President of the Senate**

Passed by the House April 10, 2023  
Yeas 71 Nays 27

LAURIE JINKINS

**Speaker of the House of  
Representatives**

Approved May 4, 2023 11:03 AM

JAY INSLEE

**Governor of the State of  
Washington**

CERTIFICATE

I, Sarah Bannister, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **ENGROSSED SECOND SUBSTITUTE SENATE BILL 5634** as passed by the Senate and the House of Representatives on the dates hereon set forth.

SARAH BANNISTER

Secretary

FILED

May 4, 2023

**Secretary of State  
State of Washington**



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ENGROSSED SECOND SUBSTITUTE SENATE BILL 5634

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Passed Legislature - 2023 Regular Session

State of Washington            68th Legislature            2023 Regular Session

By Senate Ways & Means (originally sponsored by Senators Conway, Keiser, Hasegawa, Nguyen, Nobles, and Stanford)

READ FIRST TIME 02/24/23.

AN ACT Relating to problem gambling; amending RCW 41.05.750, 67.70.340, 82.04.285, 82.04.286, and 9.46.071; creating a new section; providing an effective date; and declaring an emergency.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION.    **Sec. 1.**    (1) The legislature finds that:

(a) The costs to society of problem gambling and gambling disorder include family disintegration, criminal activity, and financial insolvencies;

(b) Individuals experiencing problem gambling and gambling disorder are at significantly increased risks for other co-occurring disorders, including substance use disorder and mental health issues such as depression, anxiety, or other behavioral health concerns;

(c) Residents of Washington may participate in a variety of legal gaming activities such as the state-run lottery, tribal gaming by federally recognized Indian tribes, certain fund-raisers offered by bona fide charitable and nonprofit organizations, and punchboards, pull-tabs, and social card games approved as a commercial stimulant at established businesses primarily engaged in the selling of food or drink for consumption on the premises;

(d) A 2021 prevalence study found that among all adults, 1.5 percent are at a moderate-to-severe risk for developing a gambling disorder, and among adults who gamble, 3.5 percent are at a moderate-to-severe risk of a gambling disorder; and

(e) The 2022 problem gambling task force final report, delivered to the legislature in December 2022, determined there are critical gaps in providing state-funded comprehensive problem gambling services to Washington residents, including:

(i) Prevention efforts not coordinated with other behavioral health and substance abuse prevention initiatives;

(ii) Problem gambling treatment coverage is not available across the state; and

(iii) No state-supported residential treatment services are available in Washington state.

(2) The legislature intends to provide long-term, dedicated funding for prevention, public awareness efforts, and education regarding problem gambling disorder, clinical training, workforce development, and accessible treatment services for individuals impacted by problem gambling or gambling disorders as well as after-care support.

**Sec. 2.** RCW 41.05.750 and 2018 c 201 s 2004 are each amended to read as follows:

(1) A program for (a) ~~((the prevention and))~~ year-round integrated problem gambling prevention efforts that include community engagement and the treatment of problem ~~((and pathological))~~ gambling and gambling disorder; and (b) the support, certification, and training of professionals in the identification and treatment of problem ~~((and pathological))~~ gambling and gambling disorder is established within the authority ~~((, to be administered by a qualified person who has training and experience in problem gambling or the organization and administration of treatment services for persons suffering from problem gambling))~~. The department of health may license or certify ~~((and the))~~ behavioral health agencies for problem gambling treatment. The authority may

contract (~~((with treatment facilities))~~) for any services provided under the program. The authority shall (~~((track))~~) conduct a program evaluation, including tracking program participation and ((elient)) evaluating outcomes.

(2) To receive treatment under subsection (1) of this section, a person must:

(a) Need treatment for problem (~~((or pathological))~~) gambling or gambling disorder, or ((because of the problem or pathological gambling of a family member, but be unable to afford treatment)) be impacted by a loved one experiencing problem gambling or gambling disorder; ((and))

(b) Be (~~((targeted))~~) identified by the authority as being most amenable to and likely to benefit from treatment; and

(c) Be unable to afford treatment.

(3) Treatment under this section is available only to the extent of the funds appropriated or otherwise made available to the authority for this purpose. The authority may solicit and accept for use any gift of money or property made by will or otherwise, and any grant of money, services, or property from the federal government, any tribal government, the state, or any political subdivision thereof or any private source, and do all things necessary to cooperate with the federal government or any of its agencies or any tribal government in making an application for any grant.

(4) (a) The authority shall establish and facilitate an ongoing advisory committee (~~((to assist it in designing, managing, and evaluating the effectiveness of the program established in this section. The advisory committee shall give due consideration in the design and management of the program that persons who hold licenses or contracts issued by the gambling commission, horse racing commission, and lottery commission are not excluded from, or discouraged from, applying to participate in the program. The committee shall include, at a minimum, persons knowledgeable in the field of problem and pathological gambling and persons representing tribal gambling, privately owned nontribal gambling, and the state lottery.~~

~~(5) For purposes of this section, "pathological gambling" is a mental disorder characterized by loss of control over gambling, progression in preoccupation with gambling and in obtaining money to gamble, and continuation of gambling despite adverse consequences. "Problem gambling" is an earlier stage of pathological gambling which compromises, disrupts, or damages family or personal relationships or vocational pursuits)~~ that will hold quarterly meetings to:

(i) Track progress of recommendations from the 2022 legislative problem gambling task force final report;

(ii) Provide advice and feedback on the state problem gambling program upon request by the authority; and

(iii) Discuss emerging issues related to problem gambling and identify possible strategies for improvement.

(b) The advisory committee membership must include, at a minimum, at least one representative from each of the following:

(i) The Washington state gambling commission;

(ii) The Washington state lottery commission;

(iii) The Washington state horse racing commission;

(iv) The Washington state health care authority;

(v) The tribal gaming industry;

(vi) An established business primarily engaged in the selling of food or drink for consumption on the premises and that offers punchboards, pull-tabs, and social card games as a commercial stimulant;

(vii) The gambling counselor certification committee;

(viii) A nonprofit problem gambling organization; and

(ix) The recovery community including at least one member with lived experience of problem gambling.

**Sec. 3.** RCW 67.70.340 and 2012 1st sp.s. c 10 s 6 are each amended to read as follows:

(1) The legislature recognizes that creating a shared game lottery could result in less revenue being raised by the existing state lottery ticket sales. The legislature further recognizes that

the fund most impacted by this potential event is the Washington opportunity pathways account. Therefore, it is the intent of the legislature to use some of the proceeds from the shared game lottery to make up the difference that the potential state lottery revenue loss would have on the Washington opportunity pathways account. The legislature further intends to use some of the proceeds from the shared game lottery to fund programs and services related to problem ~~((and pathological))~~ gambling and gambling disorder.

(2) The Washington opportunity pathways account is expected to receive ~~((one hundred two million dollars))~~ \$102,000,000 annually from state lottery games other than the shared game lottery. For fiscal year 2011 and thereafter, if the amount of lottery revenues earmarked for the Washington opportunity pathways account is less than ~~((one hundred two million dollars))~~ \$102,000,000, the commission, after making the transfer required under subsection (3) of this section, must transfer sufficient moneys from revenues derived from the shared game lottery into the Washington opportunity pathways account to bring the total revenue up to ~~((one hundred two million dollars))~~ \$102,000,000.

(3)(a) The commission shall transfer, from revenue derived from the shared game lottery, to the problem gambling account created in RCW ~~((43.20A.892))~~ 41.05.751, an amount equal to the percentage specified in (b) of this subsection of net receipts. For purposes of this subsection, "net receipts" means the difference between (i) revenue received from the sale of lottery tickets or shares and revenue received from the sale of shared game lottery tickets or shares; and (ii) the sum of payments made to winners.

(b) In fiscal year ~~((2006))~~ 2024, the percentage to be transferred to the problem gambling account is ~~((one-tenth of one))~~ 0.20 percent. In fiscal year ~~((2007))~~ 2025 and subsequent fiscal years, the percentage to be transferred to the problem gambling account is ~~((thirteen one-hundredths of one))~~ 0.26 percent.

(4) The commission shall transfer the remaining net revenues, if any, derived from the shared game lottery "Powerball" authorized in RCW 67.70.044(1) after the transfers pursuant to this section into

the state general fund for support for the program of basic education under RCW 28A.150.200.

(5) The remaining net revenues, if any, in the shared game lottery account after the transfers pursuant to this section shall be deposited into the Washington opportunity pathways account.

**Sec. 4.** RCW 82.04.285 and 2014 c 97 s 303 are each amended to read as follows:

(1) Upon every person engaging within this state in the business of operating contests of chance; as to such persons, the amount of tax with respect to the business of operating contests of chance is equal to the gross income of the business derived from contests of chance multiplied by the rate of 1.5 percent.

(2) An additional tax is imposed on those persons subject to tax in subsection (1) of this section. The amount of the additional tax with respect to the business of operating contests of chance is equal to the gross income of the business derived from contests of chance multiplied by the rate of ~~((0.1))~~ 0.2 percent through June 30, ~~((2006))~~ 2024, and ~~((0.13))~~ 0.26 percent thereafter. The money collected under this subsection (2) shall be deposited in the problem gambling account created in RCW ~~((43.20A.892))~~ 41.05.751. This subsection does not apply to businesses operating contests of chance when the gross income from the operation of contests of chance is less than ~~((fifty thousand dollars))~~ \$50,000 per year.

(3) (a) For the purpose of this section, "contests of chance" means any contests, games, gaming schemes, or gaming devices, other than the state lottery as defined in RCW 67.70.010, in which the outcome depends in a material degree upon an element of chance, notwithstanding that skill of the contestants may also be a factor in the outcome. The term includes social card games, bingo, raffle, and punchboard games, and pull-tabs as defined in chapter 9.46 RCW.

(b) The term does not include: (i) Race meet for the conduct of which a license must be secured from the Washington horse racing commission, (ii) "amusement game" as defined in RCW 9.46.0201, or

(iii) any activity that is not subject to regulation by the gambling commission.

(4) "Gross income of the business" does not include the monetary value or actual cost of any prizes that are awarded, amounts paid to players for winning wagers, accrual of prizes for progressive jackpot contests, or repayment of amounts used to seed guaranteed progressive jackpot prizes.

**Sec. 5.** RCW 82.04.286 and 2005 c 369 s 6 are each amended to read as follows:

(1) Upon every person engaging within this state in the business of conducting race meets for the conduct of which a license must be secured from the Washington horse racing commission; as to such persons, the amount of tax with respect to the business of parimutuel wagering is equal to the gross income of the business derived from parimutuel wagering multiplied by the rate of ~~((0.1))~~ 0.2 percent through June 30, ~~((2006))~~ 2024, and ~~((0.13))~~ 0.26 percent thereafter. The money collected under this section shall be deposited in the problem gambling account created in RCW ~~((43.20A.892))~~ 41.05.751.

(2) For purposes of this section, "gross income of the business" does not include amounts paid to players for winning wagers, or taxes imposed or other distributions required under chapter 67.16 RCW.

(3) The tax imposed under this section is in addition to any tax imposed under chapter 67.16 RCW.

**Sec. 6.** RCW 9.46.071 and 2019 c 213 s 1 are each amended to read as follows:

(1)~~((a))~~ The legislature recognizes that some individuals in this state ~~((have a gambling problem or))~~ are negatively impacted by problem gambling and gambling disorder. Because the state promotes and regulates gambling through the activities of the state lottery commission, the Washington horse racing commission, and the Washington state gambling commission, the state has the

responsibility to continue to provide resources for the support of  
(~~(services for)~~) problem gambling (~~(and gambling disorders.~~

~~(b) The~~) services. Therefore, the Washington state gambling  
commission, the Washington horse racing commission, and the state  
lottery commission shall (~~(jointly develop)~~) maintain placement of  
problem gambling and gambling disorder informational signs which  
include a toll-free (~~(hotline)~~) helpline number for (~~(individuals~~  
~~with a gambling problem or)~~) problem gambling and gambling disorder.  
The signs shall be placed in the establishments of gambling  
licensees, horse racing licensees, and lottery retailers.

(~~(e)~~) The Washington state gambling commission, the Washington  
horse racing commission, and the state lottery commission may also  
contract with other qualified entities to provide public awareness,  
training, and other services to ensure the intent of this section is  
fulfilled.

(~~(d)~~) (2) Individuals and families impacted by (~~(a gambling)~~)  
problem gambling or gambling disorder will benefit from the  
availability of a uniform self-exclusion program where people may  
voluntarily exclude themselves from gambling at multiple gambling  
establishments by submitting one self-exclusion form to the state  
from one location for all gambling activities. Therefore, the  
Washington state gambling commission must establish a statewide  
self-exclusion program for all licensees. The commission has  
discretion in establishing the scope, process, and requirements of  
the self-exclusion program, including denying, suspending, or  
revoking an application, license, or permit. However, the initial  
program must comply with the following minimum requirements:

(~~(i)~~) (a) The program must allow persons to voluntarily  
exclude themselves from gambling at authorized gambling  
establishments that offer house-banked social card games;

(~~(i)~~) (b) The program must have a process for federally  
recognized Indian tribes or tribal enterprises that own gambling  
operations or facilities with class III gaming compacts to  
voluntarily participate in the self-exclusion program;



~~((iii))~~ (c)(i) Any individual registered with the self-exclusion program created under this section is prohibited from participating in gambling activities associated with this program and forfeits all moneys and things of value obtained by the individual or owed to the individual by an authorized gambling establishment as a result of prohibited wagers or gambling activities. The commission may adopt rules for the forfeiture of any moneys or things of value, including wagers, obtained by an authorized gambling establishment while an individual is registered with the self-exclusion program created under this section.

(ii) Moneys and things of value forfeited under the self-exclusion program must be distributed to the problem gambling account created in RCW 41.05.751 and/or a charitable or nonprofit organization that provides problem gambling services or increases awareness about problem gambling pursuant to rules adopted by the commission; and

~~((iv))~~ (d) The commission must adopt rules establishing the self-exclusion program by June 30, 2021.

~~((e))~~ (3) An individual who participates in the self-exclusion program does not have a cause of action against the state of Washington, the commission, or any gambling establishment, its employees, or officers for any acts or omissions in processing or enforcing the requirements of the self-exclusion program, including a failure to prevent an individual from gambling at an authorized gambling establishment.

~~((f))~~ (4) Any personal information collected, stored, or accessed under the self-exclusion program may only be used for the administration of the self-exclusion program and may not be disseminated for any purpose other than the administration of the self-exclusion program.

~~((2))~~ (5)(a) During any period in which RCW 82.04.285(2) is in effect, the commission may not increase fees payable by licensees under its jurisdiction for the purpose of funding services for problem gambling and gambling disorder. Any fee imposed or increased

by the commission, for the purpose of funding these services, before July 1, 2005, has no force and effect after July 1, 2005.

(b) During any period in which RCW 82.04.285(2) is not in effect:

(i) The commission, the Washington state horse racing commission, and the state lottery commission may contract for services, in addition to those authorized in subsection (1) of this section, to assist in providing for problem gambling and gambling disorder treatment; and

(ii) The commission may increase fees payable by licensees under its jurisdiction for the purpose of funding the problem gambling and gambling disorder services authorized in this section.

NEW SECTION. **Sec. 7.** If any provision of this act or its application to any person or circumstance is held invalid, the remainder of the act or the application of the provision to other persons or circumstances is not affected.

NEW SECTION. **Sec. 8.** This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect July 1, 2023.

--- END ---

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Filed in Office of Secretary of State May 4, 2023.

December 2022

# Recommendations for Improving Problem Gambling Prevention, Treatment & Recovery in WA State

*Submitted to:*  
Washington State Legislature

*Submitted on behalf of the Problem Gambling Task Force by:*  
Washington State Gambling Commission

# Acknowledgements

The Problem Gambling Task Force's leadership team recognizes that Task Force members spent many hours serving on the Task Force and its six committees over the past three years (January 2020 to November 2022).

A heartfelt thank you to everyone who supported this work, including legislators, non-profit organizations, Tribal representatives, state agencies, community members, representatives from commercial and Tribal gaming, clinical professionals, and our consultant facilitators for your dedicated and important service.

Despite impacts from the COVID-19 pandemic, including moving to online meetings and the need to extend the work by an additional year, PGTF members and staff consultants met these challenges with grace and patience. Members have come together to create and finalize this list of recommendations now being shared with the Legislature and people of Washington State.

## Participating Problem Gambling Task Force Members

### Legislators

- Senator Steve Conway
- Representative Shelley Kloba

### WA State Agencies

- Department of Health (Tim Farrell, Policy & Leg. Dev. Dir.)
- Gambling Commission (Commissioner Julia Patterson / Exec. Dir. Tina Griffin / Tommy Oakes / Past Exec. Dir. Dave Trujillo / Brian Considine)
- Health Care Authority / DBHR (Dir. Keri Waterland / Anthony Edwards-Lenton, Prevention / Ryan Keith, Recovery Navigator Pgm. / Roxane Waldron, Mgr. Problem Gambling Pgm.)
- Horse Racing Commission (Deputy Sec. Amanda Benton)
- State Lottery (Kristi Weeks, Dir. Legislative & Legal Affairs)

### Non-Profit Organizations

(problem gambling treatment & recovery)

- Evergreen Council on Problem Gambling (Exec. Dir. Maureen Greeley / Assoc. Dir. Tana Russell)
- Recovery Cafe Network (Dir. of Programs, Ruby Takushi)—PhD Psychologist

# Acknowledgements

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- Brad Galvin (Principal, Brief Therapy Works)—MS, SUDP, LMHC, LPC, ICGC-II
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- Rosina DePoe (Deputy Dir., WA Indian Gaming Association)
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## Tribal Representatives

- Alexandria Desautel (Exec. Dir., Lake Roosevelt Community Center)
- Amber Lewis (Lewis Consulting, on behalf of Chair Forsman & Suquamish Tribe)
- Glen Nenema (Chairman, Kalispel Tribe)
- Richard Swan, Sr. (Councilman, Colville Tribes)

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- Evergreen Council for Problem Gambling

# Message from the PGTF Chair & Vice-Chair

In 2019, the Washington State Legislature created the Joint Legislative Problem Gambling Task Force. It was created to address growing concerns about the impact of problem gambling on the residents of Washington State. Task Force membership includes legislators, state agencies, Tribal representatives, and stakeholders from clinical, gambling industry, recovery, community, and other sectors. While the emergence of the worldwide pandemic delayed our work by a full year, we are pleased to provide this comprehensive Final Report.

With an increasing number of ways to gamble, the work of this Task Force is extremely timely. The Task Force's work includes assessing the need for problem gambling-related services, whether the State is meeting those needs, identifying existing gaps, and, finally, making recommendations to the state legislature for improvements.

The entire Task Force has been meeting quarterly since January 2020. Topical workgroups were established to delve deeper and develop recommendations and strategies. In addition, the Washington State Health Care Authority was appropriated \$500,000 from the state problem gambling account for completion of an Adult Problem Gambling Prevalence Study. The findings of this study, along with multiple other data inputs, have enabled the Task Force to take an evidence-based approach to our work.

While our society increasingly understands the importance of providing services to address substance use disorder and mental health issues, the lack of federal funding for problem gambling services (including prevention, treatment, and recovery) is often left out of the equation. We hope this Final Report is a step toward positioning problem gambling as an issue that demands attention, deliberation, and resources.

**Chair Julia Patterson**



**Vice-Chair Brad Galvin**



# Acronyms

<b>CAWI</b>	Computer-Assisted Web Interviewing
<b>CMS</b>	Center for Medicare and Medicaid Services
<b>DOH</b>	Department of Health – Washington State
<b>DSM-5</b>	Diagnostic and Statistical Manual of Mental Health Disorders, 5th Edition
<b>ECPG</b>	Evergreen Council on Problem Gambling
<b>HCA</b>	Health Care Authority – Washington State
<b>DBHR</b>	Division of Behavioral Health and Recovery – WA State Health Care Authority
<b>DSHS</b>	Department of Health and Human Services – Washington State
<b>GF-S</b>	State General Funds
<b>GIS</b>	Geographic Information System
<b>HYS</b>	Healthy Youth Survey – Washington State
<b>ICGC</b>	International Gambling Counselor Certification
<b>ICRG</b>	International Center for Responsible Gaming
<b>LGBTQIA</b>	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual
<b>NAADGS</b>	National Association of Administrators for Disordered Gambling Services
<b>NCPG</b>	National Council on Problem Gambling

# Acronyms

<b>NWITC</b>	Northwest Indian Treatment Center
<b>OSPI</b>	Office of Superintendent of Public Instruction – Washington State
<b>PGAM</b>	Problem Gambling Awareness Month
<b>PGTF</b>	Problem Gambling Task Force
<b>RCW</b>	Revised Code of Washington
<b>SAMHSA</b>	Substance Abuse and Mental Health Services Administration
<b>SAQ</b>	Self-Administered Questionnaire – Paper-and-Pencil
<b>SESRC</b>	Social & Economic Sciences Research Center – Washington State University
<b>SFY</b>	State Fiscal Year
<b>UW</b>	University of Washington
<b>WAC</b>	Washington Administrative Code
<b>WHO</b>	World Health Organization
<b>WIGA</b>	Washington Indian Gaming Association
<b>WRA</b>	WA Recovery Alliance
<b>WSGC</b>	Washington State Gambling Commission
<b>WSGCCC</b>	Washington State Gambling Counselor Certification Committee



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# 1 | Overview and Highlights

## Three-Year Collaboration Illuminates Recommendations

This report represents the successful three-year collaboration among Problem Gambling Task Force (PGTF) members and subject matter experts. The recommendations and strategies reflect their deep expertise and perspective and offer a road map for improved problem gambling awareness, prevention, treatment, and recovery services in Washington State.

After gathering a broad-based and motivated group of stakeholders, the PGTF got right to work through a comprehensive review of current problem gambling services to surface gaps and develop recommendations. Our work was also informed by multiple sources of data and information, including the recently released 2021 Washington State Adult Problem Gambling Prevalence Study.

Our gap analysis and review of other state problem gambling programs reveals that our current state program lacks the requisite resources to provide comprehensive problem gambling services statewide. Despite that the federal government funds mental health and substance use disorder services, the fact remains that the federal government provides no funding support for problem gambling services.

Advancing work in each of the recommended areas is critical to meet the dynamic challenges brought forward by the increased availability of gambling across our state.

Problem gambling is a behavioral health issue that currently stands outside mainstream behavioral health services and funding. It is past time to remedy that situation and offer Washington State residents a complete suite of problem gambling services, especially now—when access to and availability of gambling is rapidly expanding nationally and worldwide, with increasing pressure on legislators to legalize sports wagering and online gambling.

## Problem Gambling Services – Key Gaps in WA State

<b>Prevention</b>	<ul style="list-style-type: none"> <li>* Multiple efforts in play across public, private, and Tribal nations</li> <li>* Not integrated with other prevention efforts (State)</li> </ul>
<b>Residential &amp; Non-Residential Treatment</b>	<ul style="list-style-type: none"> <li>* State program clearly underfunded</li> <li>* Problem gambling treatment coverage spotty across the state</li> <li>* Residential treatment unavailable through the state program</li> <li>* Nearest residential treatment program for gambling is in Salem, Oregon</li> </ul>
<b>After-Care Recovery Support</b>	<ul style="list-style-type: none"> <li>* Very little available that directly addresses problem gambling</li> <li>* Few problem gambling-trained peer and recovery support specialists</li> </ul>
<b>Program Monitoring &amp; Evaluation</b>	<ul style="list-style-type: none"> <li>* Prevalence studies should be done periodically, especially in an era where the availability of gambling is increasing</li> </ul>

## Problem Gambling Task Force Recommendations

<p><b>I. Comprehensive Problem Gambling Services</b></p>	<ul style="list-style-type: none"> <li>* Improve availability and access to all levels of treatment and recovery support services for problem gambling</li> <li>* Integrate problem gambling awareness, prevention, education, outreach, treatment, and recovery support services into behavioral health and substance use disorder programs</li> <li>* Integrate problem gambling information into clinical behavioral health curriculum, training, and counseling programs</li> <li>* Enhance consumer protections and responsible gaming for vendors, operators, and the public, including youth</li> <li>* Recognize impacts of internet use and gaming disorders on youth and adults</li> <li>* Assess the potential of including a gambling treatment diversion program within existing Washington State courts</li> </ul>
<p><b>II. Funding &amp; Infrastructure</b></p>	<ul style="list-style-type: none"> <li>* Increase state funding for the State Problem Gambling Program to meet current and future needs</li> <li>* Implement a new data system for the State Problem Gambling Program</li> </ul>
<p><b>III. Collaboration &amp; Partnerships</b></p>	<ul style="list-style-type: none"> <li>* The Governor, Washington State Gambling Commission, and Washington State Health Care Authority should work collaboratively with the state legislature, Tribal governments, relevant state agencies, and key stakeholders to determine funding and service strategies to best meet the needs of WA State residents</li> </ul>

## 2 | Gap Analysis: Problem Gambling Services

### Laying the Groundwork for the Recommendations

This section lays the groundwork for the recommendations and strategies found in the next section. See below for a thorough examination of current services and identified gaps. After much analysis and deliberation within the Task Force, members determined that there is a clear need to increase the accessibility and availability of problem gambling services. State agencies that have gambling, behavioral health, and related topics within their scope of responsibility need to work together to create a stronger infrastructure to serve people impacted by problem gambling. Collaboration by all sectors that touch upon problem gambling, along with more resources, are needed to bridge these identified gaps, with intentional focus to those populations and groups at higher risk for problem gambling.

To proactively respond to the gaps identified in the State Problem Gambling Program (State Program), the Washington State Health Care Authority Division of Behavioral Health and Recovery (HCA/DBHR) has put forth a Proposed Budget model that will significantly expand the services that the program now provides, both in numbers served and the breadth of the impact statewide.

This model will change the State Program from one that has, since it began in 2005, been focused on treatment reimbursement into a modern comprehensive program like those offered in states with robust problem gambling programs.<sup>1</sup> (Appendix A: Current & Proposed Budget Models – WA State Problem Gambling Program)

If funding for the State Program is doubled, based on the Proposed Model, these are the 3-5 year goals for the Program:

- **Prevention:** Initiate a year-round State Program
- **Treatment:** Increase treatment services to serve up to 700 clients annually<sup>2</sup>
- **Workforce Development:** Increase current number of Certified Gambling Counselors by a minimum of 25 percent<sup>3</sup>
- **Outreach, Awareness, and Education:** Increase outreach to community organizations and populations at higher risk for problem gambling
- **Program Monitoring and Evaluation:** Contract services with the University of Washington (UW) or other entity for continuous quality improvement as well as tracking and assessing outcomes based on quality of life for clients
- **Research:** Conduct a replication Prevalence Study and/or other research to assess the changing landscape of gambling to address access to care issues and health disparities.<sup>4</sup>

## Existing Problem Gambling Services in Washington State

### **Problem Gambling Prevention, Outreach, Awareness & Education Services**

Several entities within Washington State are known to conduct or have conducted problem gambling prevention activities:

- Evergreen Council on Problem Gambling (ECPG)
- Individual behavioral health agencies
- Recovery Cafe Network
- State Problem Gambling Program
- Tribal behavioral health agencies

Annually in March, during Problem Gambling Awareness Month (PGAM), the State Program coordinates and funds several specific PGAM-related activities with ECPG. Beyond the \$26,000 annually that is contracted with ECPG, HCA does not receive state or federal funding to initiate and sustain a robust, year-round problem gambling prevention program. Due to this lack of funding, problem gambling prevention is not integrated with all the other behavioral health topics, despite the high rate of co-occurring disorders that are correlated with problem gambling.

Many Tribes provide a significant amount of prevention and awareness-related activities. With funds set aside for problem gambling, Tribes may also choose to support prevention and other problem gambling services by contributing to non-profits and/or the state problem gambling account.

ECPG and the Recovery Cafe Network are two organizations that have received funding from Tribes, some of which has been used to support prevention, awareness, education, outreach, and other problem gambling services.

In addition to PGAM programming, ECPG hosts two conferences each year (Focus on the Future and Four Directions) that include concurrent sessions on a variety of topics related to problem gambling, including prevention and education, awareness, and outreach across the lifespan. ECPG also conducts on-going trainings on prevention topics focused on youth, young adults, older adults, Latino/Hispanic, Tribal, LGBTQIA, military/veterans, recovery community, and other populations at increased risks for problem gambling.<sup>5</sup>

### **Treatment Services**

To understand the extent of assessment and treatment services,<sup>6</sup> the PGTF collected information on the following resources:

- Certified Gambling Counselor (CGC) workforce<sup>7</sup>
- DOH-certified problem gambling treatment agencies<sup>8</sup>
- Tribal behavioral health agencies with problem gambling programs<sup>9</sup>

Using information on the locations of treatment services and data of land-based (brick and mortar) gambling locations, PGTF staff created a series of maps in ArcGIS.<sup>10</sup> Using this method allowed staff to create maps that show the gambling venues, problem gambling treatment service coverage, and the overlapping one-hour drive times.<sup>11</sup>

The following maps, when viewed in order, illustrate the method used by the PGTF to determine in which geographic areas of the state are currently unserved by a Certified Gambling Counselor. Based on this analysis, this report recommends increased workforce development to expand availability to the areas listed later in this section. (Appendix B: Availability of Gambling & Problem Gambling Treatment in WA State – GIS Maps)

**FIGURE A**<sup>12, 13, 14, 15</sup> (see all maps at the end of this chapter) shows the locations and one-hour drive time area coverage of all Certified Gambling Counselors and all Tribal behavioral health agencies.<sup>12</sup> Some Tribal behavioral health agencies employ Certified Gambling Counselors.<sup>13</sup> Among those Tribal agencies that do, several are Department of Health (DOH)-certified problem gambling behavioral health agencies.<sup>14</sup>

### Treatment Availability Findings

- Existing treatment services are widely available on the western side of the Cascades and along the I-5 interstate freeway corridor.
- The Spokane and Greater Columbia regions have partial coverage for problem gambling treatment within a one-hour drive.
- Large geographic areas of the state have no problem gambling treatment within a one-hour drive time. This includes both population centers and rural counties.

The next step in determining where additional treatment services are needed is to see the scope and availability of land-based gambling.

**FIGURE B**<sup>16</sup> shows the locations and one-hour drive time overlaps of traditional brick-and-mortar gambling by activity type, including

house-banked commercial card rooms, Tribal casinos, and horse racing (both track and off-track/pari-mutuel).<sup>16</sup>

As seen in Figure A, land-based gambling within one-hour drive time can be accessed in large areas of the state, with multiple types of gambling in some areas.

Once the availability of land-based gambling and problem gambling treatment was understood, staff created **FIGURE C**.<sup>17, 18</sup> The map shows the overlay of land-based gambling with Certified Gambling Counselors.

At this point in the analysis, it's important to highlight that the Program contracts only with DOH-certified problem gambling agencies as well as licensed mental health providers and/or substance use disorder professionals who are Certified Gambling Counselor sole providers (defined in the Behavioral Health WAC 246-341-0754). In the proviso that created the PGTF, one of the required tasks is to make recommendations to the Legislature regarding whether this state should expand state funding for prevention, treatment, and recovery services to address the need for these programs.<sup>19</sup>

### Tribal Behavioral Health Agencies Providing Problem Gambling Treatment Services

Tribal behavioral health agencies that do not currently employ a Certified Gambling Counselor but may offer problem gambling treatment, as indicated on their website, are not included in this portion of the analysis. It is worth noting that most Tribal clinics accept both Tribal and non-Tribal clients.<sup>20, 21, 22</sup>



## Identified Gaps in Locations of Certified Gambling Counselors

Having completed the mapping project, PGTF staff were able to determine which regions or population centers are currently unserved or under-served for problem gambling treatment services (i.e., do not have any DOH-certified problem gambling agencies or Certified Gambling Counselors within one-hour drive time). Based on this information as well as population density within areas, PGTF staff created a new map that shows where the greatest need is for problem gambling treatment services. State-certified problem gambling services include 1) Certified Gambling Counselors, and 2) DOH-certified problem gambling agencies. To expand state-certified problem gambling treatment services to these areas will require increasing the number of Certified Gambling Counselors by a minimum of 25 percent (ten additional clinicians). And to meet future anticipated needs, ongoing recruitment of Certified Gambling Counselors is crucial.

**FIGURE D** illustrates the boundaries of the proposed areas for Certified Gambling Counselors. There are additional areas that are currently under-served that are not on this map but are on the list for additional recruitment (Thurston and Pierce Counties, for example).

**FIGURE E** is the final map and dramatically illustrates the impact of expanding the Certified Gambling Counselor workforce. Based on this analysis, the PGTF is recommending that the Certified Gambling Counselor workforce be increased, focusing on the need to increase access to state-certified problem gambling treatment for unserved and under-served areas and population centers. This includes the need for more state funding to increase workforce development efforts, for example, more clinical trainings online, scholarships for candidates in

under-served areas, and other actions to reduce barriers and increase successful recruitment for new Certified Gambling Counselors.<sup>23</sup>

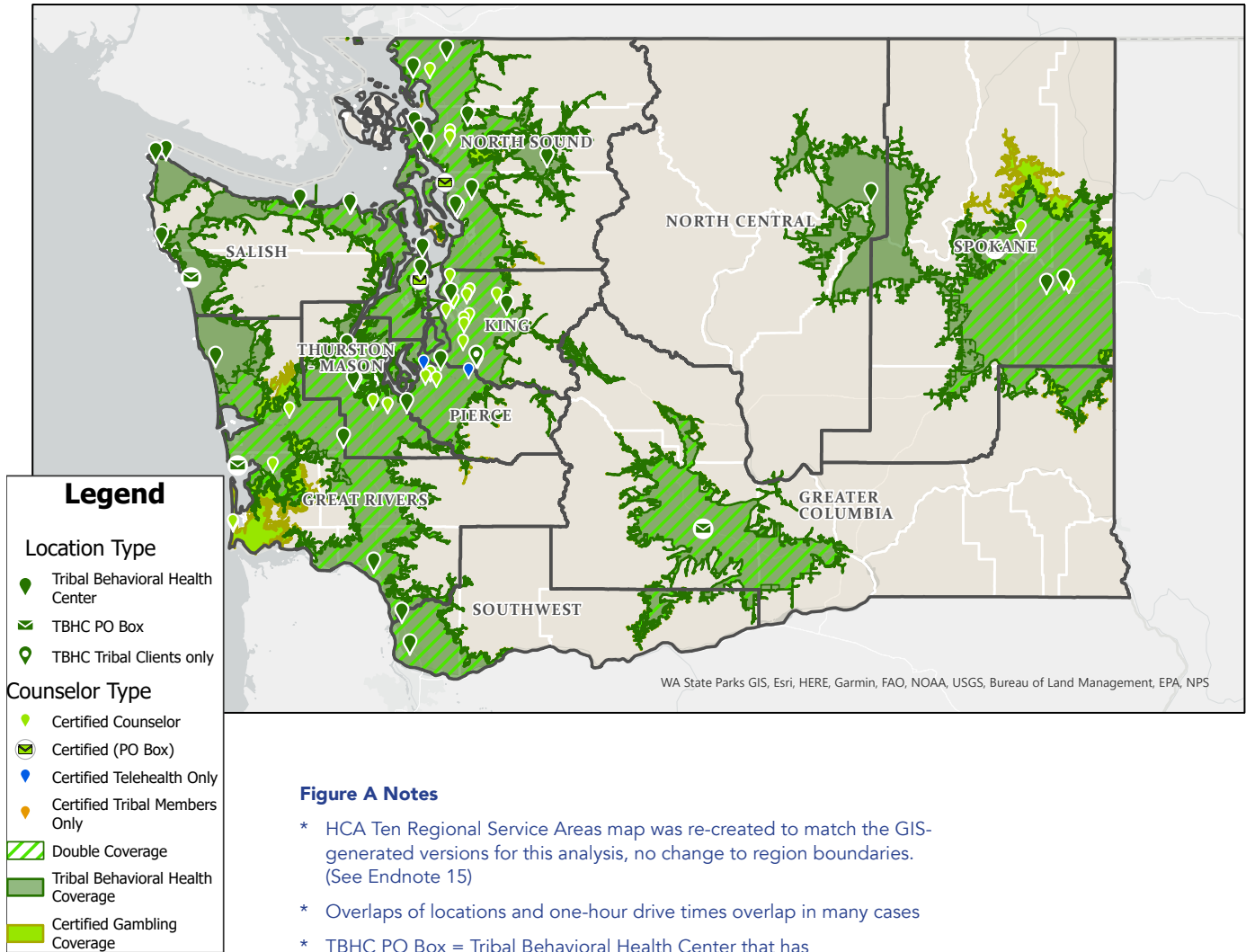
The goal of this expansion is to ensure that population centers have access to Certified Gambling Counselors. This plan will increase overall coverage of the population by over an additional 600,000 people, primarily focused in eastern and rural parts of the state that don't currently have access to treatment with a Certified Gambling Counselor.<sup>24</sup>

Regionally, when fully implemented, this plan to increase the Certified Gambling Counselor workforce will expand access to state-certified problem gambling treatment (light green areas) to include the yellow coverage areas (**Figure E**). The most dramatic increases in coverage will be on the eastern side of the Cascades (reported here as the percentage of the population in the region that will be within one-hour drive time, not physical geographic coverage).

For individuals in areas outside of the one-hour drive time access to state-certified problem gambling treatment, options may be available:

- **Telehealth:** The availability of clinical treatment via telehealth has greatly expanded in the past three years. Many of the state-certified problem gambling treatment providers now offer telehealth as an option. Services can be accessed (including telehealth) through the Problem Gambling Helpline (1-800-547-6133).<sup>25</sup>
- **Tribal behavioral health agencies:** As noted earlier, some Tribal behavioral health agencies have problem gambling programs. Individuals are encouraged to reach out to their local Tribal behavioral health agency for more information, as mental health and substance use disorder treatment is often available for both Tribal and non-Tribal community members.<sup>26</sup>

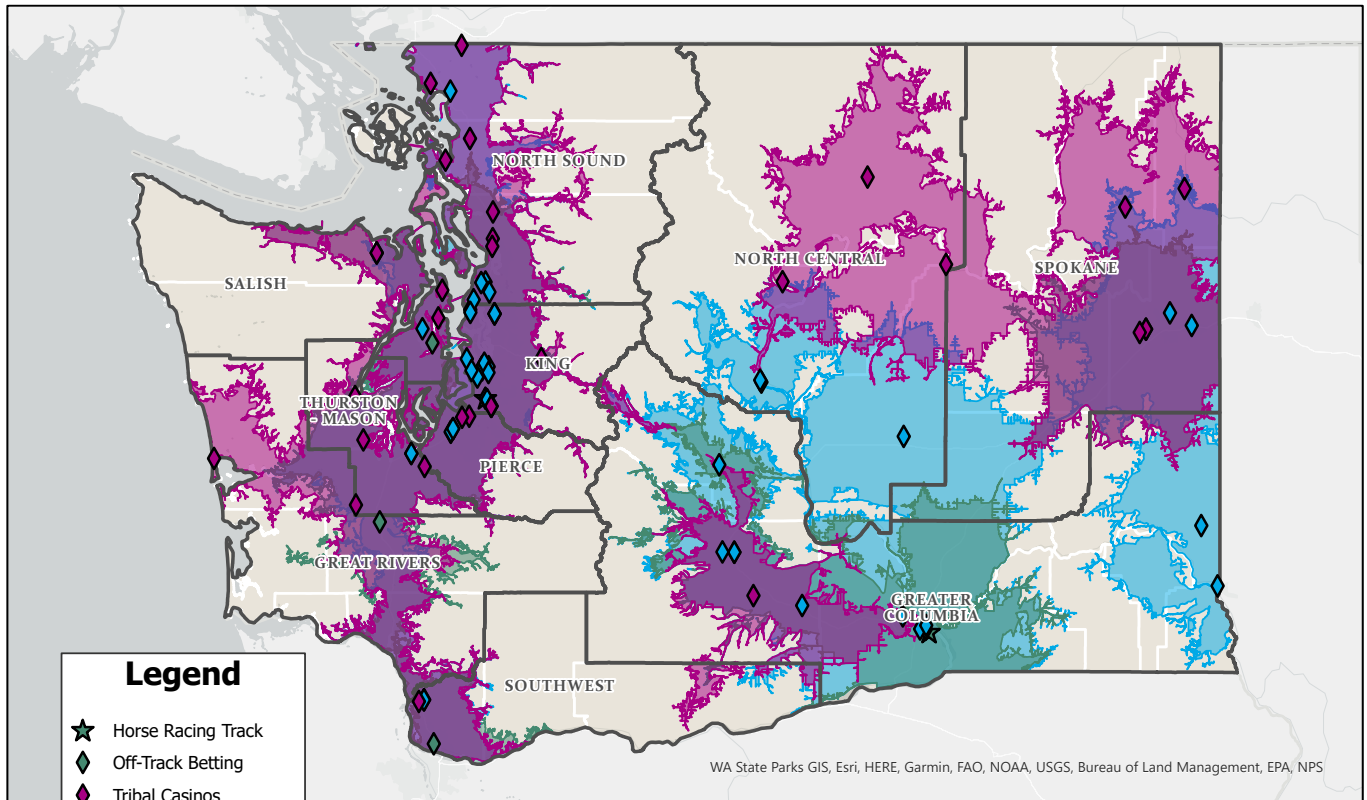
**Figure A:** Tribal Behavioral Health Agency Coverage & Certified Gambling Counselor Coverage (based on ten regional service areas)



**Figure A Notes**

- \* HCA Ten Regional Service Areas map was re-created to match the GIS-generated versions for this analysis, no change to region boundaries. (See Endnote 15)
- \* Overlaps of locations and one-hour drive times overlap in many cases
- \* TBHC PO Box = Tribal Behavioral Health Center that has a PO Box as location
- \* TBHC Tribal Clients only = Tribal Behavioral Health agency that accept only Tribal members
- \* Certified Counselor = location of Certified Gambling Counselors
- \* Certified Telehealth only = Certified Gambling Counselors providing telehealth only
- \* Certified Tribal members only = Tribal BH agency with Certified Gambling Counselor and only accepts Tribal members
- \* Double Coverage = Overlapping one-hour drive times (e.g., Certified Gambling Counselor and Tribal BH agency)
- \* Certified Gambling Coverage = Location and one-hour drive times for only Certified Gambling Counselor

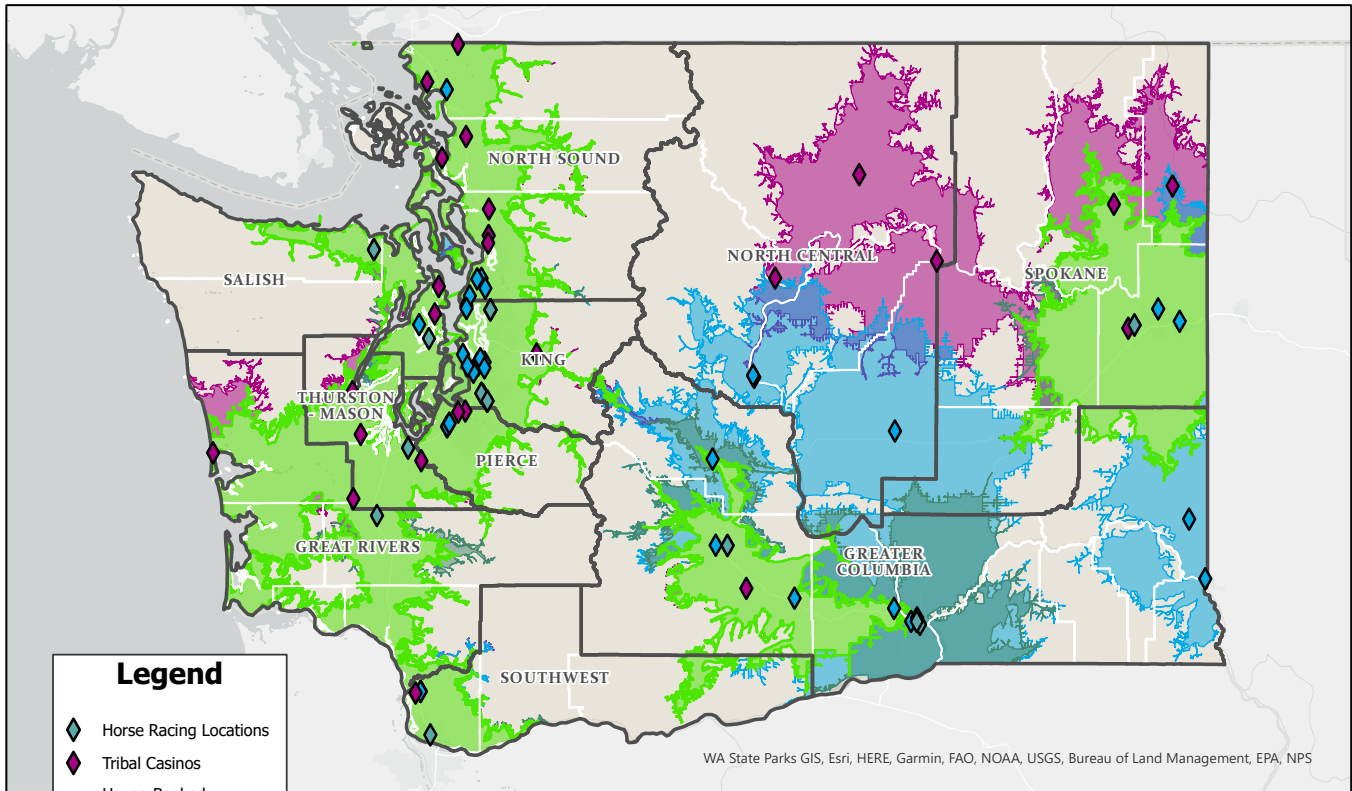
**Figure B:** Horse Racing, House-Banked Card Rooms & Tribal Casino Drive Times



**Figure B Notes**

- \* Overlaps of locations and one-hour drive times overlap in many cases
- \* Dark pink diamond = Tribal Casino
- \* Blue diamond = commercial house-banked card room
- \* Blue Star = horse racing track and dark green diamond indicates off-track betting location
- \* Areas covered by pink (Tribal Casinos), light blue (commercial house-banked card rooms), and teal (horse racetracks/off-site betting) are within one-hour drive time, with overlapping one-hour drive time indicated by the overlay of combined colors.
- \* Areas without color (grey) fall outside of the one-hour drive time limit.

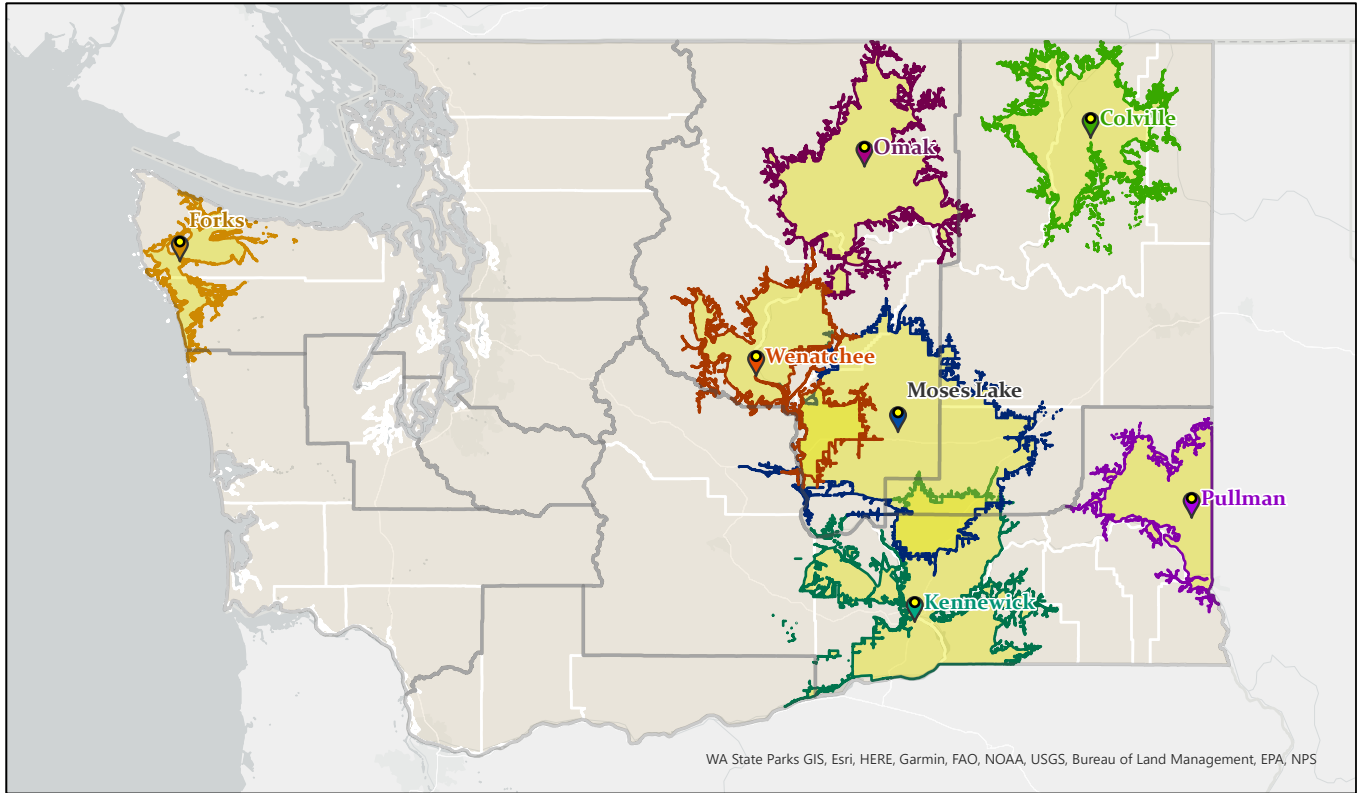
**Figure C:** Gambling Type Overlapping with Certified Gambling Counselor One-Hour Drive Times





**Figure C Notes**

- \* DOH-licensed problem gambling agencies are required to employ a Certified Gambling Counselor; therefore, those agencies are in the same place on this map as the corresponding gambling counselor.
- \* This includes both Tribal and non-Tribal DOH-certified problem gambling agencies.
- \* Areas not included in the light green coverage areas may have a Tribal behavioral health clinic that does not employ a Certified Gambling Counselor but does offer problem gambling treatment as indicated on their website.

**Figure D:** Proposed Certified Gambling Counselors  
(locations for focused recruitment)



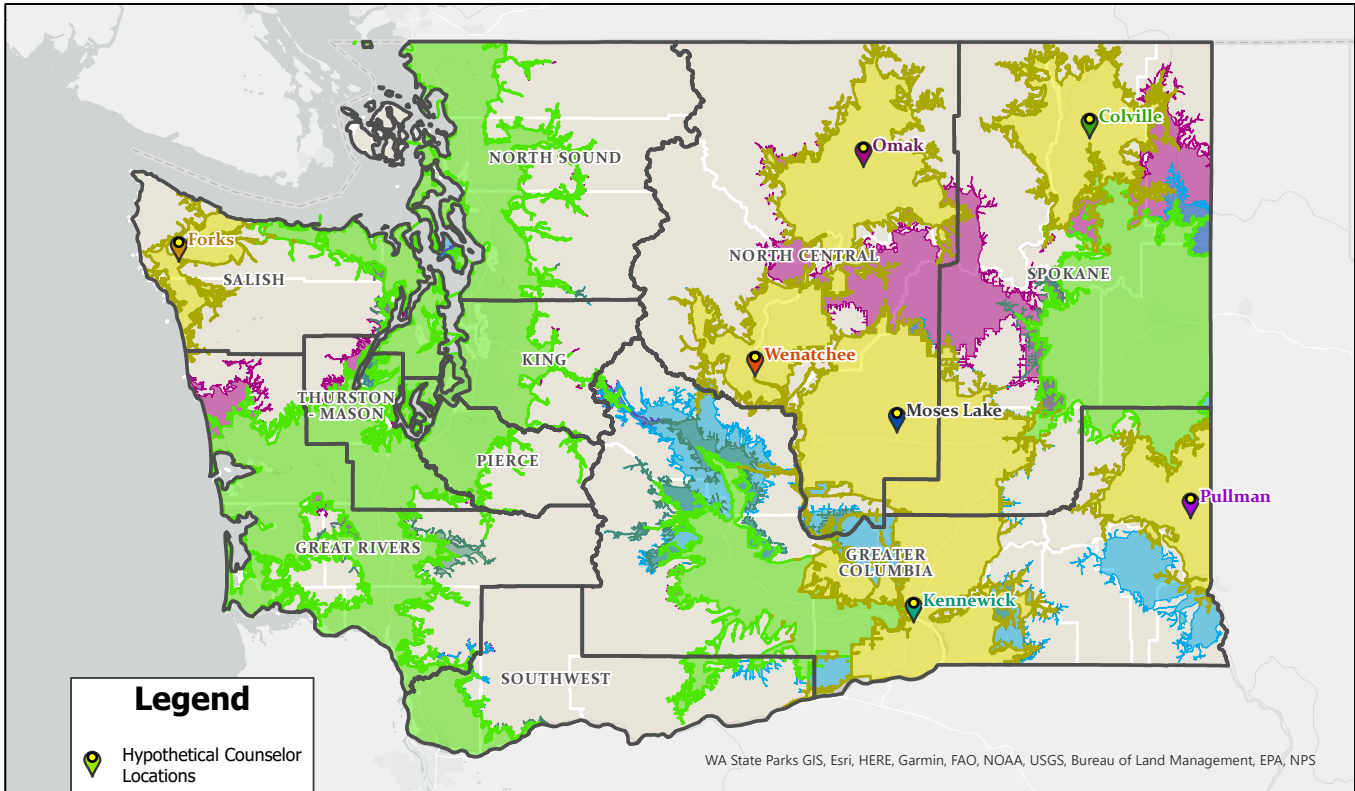
### Legend

-  Labeled Hypothetical Counselor Locations
-  Hypothetical 1-hour drive time

### Figure D Notes

- \* Areas included on this map that need recruitment for Certified Gambling Counselors: Omak/Okanogan, Wenatchee, Moses Lake/Ephrata, Colville, Pullman, Tri-Cities (Kennewick, Pasco, Richland), Forks.
- \* Other areas under consideration not shown on this map are Clarkston-Lewiston, as well as regions or population centers that only have one Certified Gambling Counselor agency.
- \* Most of the identified areas are on the eastern side of the Cascades.
- \* North Central region has no Certified Gambling Counselors or DOH-certified problem gambling agencies.

**Figure E:** State Coverage with Proposed New Certified Gambling Counselors



**Figure E Notes**

- \* Pink, light blue, and teal areas have gambling activity that is outside the one-hour drive time to a Certified Gambling Counselor.
- \* Areas with no color (grey) have no gambling activity nor Certified Gambling Counselor within one hour.
- \* North Central region coverage will increase from 0 percent to over 90 percent.
- \* Greater Columbia region coverage will increase from 50 percent to 90 percent.
- \* Spokane region coverage will increase from 90 percent to over 96 percent.



## Need for Increased Funding to Expand Treatment Service

- **Existing gap in funding for treatment:** Since 2019, the State Program treatment budget has been experiencing an ongoing treatment budget gap of \$100,000 to \$150,000 in each of the last two biennial program budgets (2019-2021 and 2021-2023). The gap is created by the pressure of increased community demand for treatment services on HCA-contracted problem gambling treatment providers, which translates into these contracted providers requesting more funding from the State Program to meet this increased demand for services. The State Program Manager has been able to gather funding to close the treatment gap each budget period, but this is not a long-term, sustainable solution.<sup>27</sup>
- **Expanding access to state-funded problem gambling treatment:** The State Program is, unfortunately, not contracted with all state-certified problem gambling treatment providers. The lack of funding for treatment is the largest barrier to offering new contracts.<sup>28</sup> A long-term goal of the State Program Manager is to contract with more of the state-certified problem gambling treatment provider agencies and sole providers. And as the Certified Gambling Counselor workforce grows over the next 3 to 5 years, the State Program will be eager to contract with these new providers and agencies, especially in unserved and underserved areas of the state. The State Program needs more funding for treatment to be able to expand access to state-funded problem gambling treatment.<sup>29, 30</sup>

## Legislature's Role in Funding for State Problem Gambling Program

Since 2005 when the State Program began, ongoing funding for the program has come from a small percentage of both a business and occupations tax on commercial gambling including horse racing and other games of chance, and a percentage of sales from the Lottery. Because the funding is statutory in nature, to make any changes the Legislature would need to address the amount of funding directed to the state problem gambling account (which, through appropriation, funds the State Problem Gambling Program).

The PGTF has identified several options that legislators might wish to consider: 1) increasing the existing contribution rate for one or more types of commercial gambling activities; 2) designating general state funds; 3) another mechanism yet to be determined; and 4) adopting a multi-pronged approach in which funding would be tied to both the amount of commercial and non-profit gambling (as it is now) and a specific set amount from general state funds. The advantage of the multi-pronged approach for funding tied to the amount would continue to reflect funding for services based on the amount of commercial gambling, while also protecting the State Program budget from the ups and downs of the gambling environment (such as when all land-based gambling except for the Lottery ceased for several months during the pandemic).<sup>31</sup>

## Recovery Support Services

As defined by the federal government:

*“(Recovery is) a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.”<sup>32</sup>*

On the whole, most recovery services focus on individuals successfully transitioning from treatment back into everyday life and may include some combination of peer support groups along with supportive housing and supportive employment. In most cases, due to the overlap with other behavioral health disorders, individuals in recovery from problem gambling can access services based on a co-occurring disorder(s).

Despite the broad range of recovery support programs and services available across the state, very few specifically offer support to individuals recovering from gambling disorders. A very few recovery support organizations have sought to create an inclusive recovery environment that specifically includes individuals in recovery from problem gambling. The Recovery Cafe Network has incorporated this approach. (Appendix C: Recovery Support Services in WA State)

## Geographic Distribution

As with Certified Gambling Counselors, most peer recovery support service organizations are located west of the Cascades, with those on the eastern side mostly located in Spokane. The following categories of Recovery Support highlight the different types of services that people in recovery may be able to access, depending on geographic location and eligibility (when applicable). Only a handful of recovery support services identify a specific focus on gambling or problem gambling.

- **Peer recovery support organizations** are designed and delivered by people in recovery. Examples include Recovery Cafés, Peer WA locations, and individual organizations like Consumer Voices Are Born. Local chapters of national organizations such as Gamblers Anonymous and Gam-Anon (for loved ones) can be found both in some areas and as online support groups.
- **Tribal recovery support** is provided by most Tribal behavioral health agencies and frequently take a holistic, wrap-around approach that focuses on the whole person rather than on the presenting problem. In addition, the Northwest Indian Treatment Center (NWITC) has a recovery support team that provides aftercare planning.<sup>33</sup>
- **Related recovery support** includes those individual behavioral health agencies that have programs and/or staff that specifically focus on recovery after treatment. Also included is the WA Recovery Alliance (WRA), which has nine local recovery coalitions across the state led by individuals in recovery, families impacted by behavioral health conditions, and community organizations. WRA works to advance recovery by changing public understanding and shaping pro-recovery public policy.<sup>34</sup>
- **State recovery support resources** include the Washington State Recovery Help Line (1-866-789-1511), Certified Peer Counselors and Recovery Coaches, Recovery Housing (including 45 Oxford Houses and 347 Recovery Residences), Foundational Community Supports (jobs/housing/living) and Coordinated Entry Sites for families and adults experiencing homelessness.<sup>35, 36</sup>



## Identified Gaps in Recovery Support Services

- Lack of geographic availability in areas other than along the I-5 corridor.
- Lack of focus on problem gambling specifically. Few of the resources above focus on problem gambling as an area of service or peer support. Outreach to the other organizations listed (as well as additional recovery services not included here) is needed to gain clarity about whether their scope of work includes an awareness of problem gambling and the challenges to recovery.
- Lack of services for family and others impacted by loved one who gambles
- Lack of services that are culturally diverse, specific/relevant, and offered in languages other than English.

## Existing Problem Gambling Services in Federal Government and Other States

### Problem Gambling Services and the Federal Government

The Federal government does not provide any funding for problem gambling services. There is no federal funding (including Medicaid and Medicare) for problem gambling treatment, prevention, clinical training, awareness, outreach, education, or research. In addition, states cannot access any funding for problem gambling from the mental health block grant, substance use block grant, federal block grant, or emergency block grants (to mitigate impacts of COVID-19, for example). There have been Congressional attempts (and a current effort) to include problem gambling under the umbrella of behavioral health on the federal level, but to date, this has been unsuccessful.

## Problem Gambling Services in Other U.S. States – Funding Mechanisms

Because there is no federal funding or programs for problem gambling, each state must decide if it wants to invest in problem gambling services at all. About 42 states provide problem gambling services at some level, but each state's program is unique to its gambling and funding environment.<sup>37</sup> These are the most typical funding mechanisms:<sup>38</sup>

- Provide a portion of either gross or net gambling revenue (may be on specific gambling activities, such as Lottery, commercial gambling, or a subset or combination)
- Set a specific contribution amount from Lottery (such as 2 percent of gross receipts)
- Include a general state funds line-item for problem gambling
- Designate a portion of Tribal revenue from gambling revenue to be deposited directly into state fund designated for problem gambling (negotiated by compact)

## Problem Gambling Services in Other U.S. States – Services Provided

Along with the great variety of funding mechanisms used by U.S. States, state problem gambling programs also have a wide range of services that they offer. In Washington State, 70 percent of the State Program budget is allocated for treatment services; by contrast, in 2021, Pennsylvania spent 63 percent of its problem gambling budget on prevention and awareness projects and services, with only 9 percent spent on treatment.<sup>39</sup>

## 2 | Gap Analysis: Problem Gambling Services

The following table shows the main categories of services with the number of state programs that offer that service.<sup>40, 41</sup>

Problem Gambling Services Provided in other U.S. States		
Service Provided	Number of States	Percent (of 42 states with state PG programs)
<b>Problem Gambling Helpline Number</b>	<b>36</b>	<b>86*</b>
<b>Public Awareness</b>	<b>36</b>	<b>86**</b>
<b>Treatment</b>	<b>34</b>	<b>81**</b>
<b>Counselor Training</b>	<b>31</b>	<b>74**</b>
<b>Prevention</b>	<b>27</b>	<b>64**</b>
<b>Counselor Certification</b>	<b>12</b>	<b>29*</b>
<b>Program Evaluation</b>	<b>18</b>	<b>43</b>
<b>Research</b>	<b>17</b>	<b>41</b>

(\*) available in Washington State but not funded by State Program  
 (\*\*) at least partially funded in Washington State as a regular budget line item through State Program (see End Note #41)

### Extent of Need in Washington State

The 2021 Prevalence Study estimates that between 66,000 and 108,000 adults in Washington State are at moderate-to-severe risk for problem gambling, with an average of 90,000 individuals. Based on existing research, approximately 1 in 10 may seek services, for a total of 9,000 individuals.<sup>42, 43</sup>

- Currently, the State Program at HCA/DBHR provides treatment reimbursement for 300-400 clients annually through contracts with DOH-certified problem gambling agencies and sole providers, at an average cost of \$1,472 in fiscal year 2021.

- As discussed above, additional Certified Gambling Counselors are needed across the state in regionally identified areas.
- The State Program has experienced treatment funding gaps of approximately \$150,000 in the 2019-2021 and 2021-2023 budget periods.
- Collectively, Tribes contribute a minimum of \$3-4 million towards problem gambling services (based on amounts reported by Tribes to the Gambling Commission). Some Tribes are known to spend more than the minimum reported.<sup>44</sup>
- Behavioral health agencies that provide problem gambling services but are not contracted with the State Program are not required to report any information about the number and type of problem gambling services provided (number of clients served, overall spending on treatment, outcomes, or average per client costs).

The gap analysis clearly demonstrates the myriad needs in the problem gambling space. The recommendations, strategies, and considerations that follow are crafted to address these needs. Problem gambling is a behavioral health issue that stands outside mainstream behavioral health services. It is past time to remedy that situation and offer Washington State residents a complete suite of problem gambling services, especially in a time where the access and availability of gambling is so prominent and poised to increase even further.

## Key Data Sources

### Gap Analysis

To complete the gap analysis, these data sources were referenced:

- 2021 Washington State Adult Problem Gambling Prevalence Study (HCA)<sup>45</sup>
- 2021 Washington State Healthy Youth Survey (DOH/OSPI/HCA)<sup>46</sup>
- Roster of Certified Gambling Counselors (WSCGC-I/II, ICGC-I/II) and locations in Washington State (ECPG)<sup>47</sup>
- Land-based gambling locations (excluding Lottery point-of-sale)<sup>48</sup>
- 2021 State of the States Report (NAADGS)<sup>49</sup>
- American Community Survey data (based on 2020 Census)<sup>50</sup>
- Washington state agencies (websites, including online data sources, materials, and staff)<sup>51</sup>
- ECPG website and materials<sup>52</sup>
- WIGA Responsible Gaming website
- Other jurisdictions' Problem Gambling Program websites, materials, and staff interviews
- Related research studies, reports, fact sheets

### Limitations

The lack of publicly accessible anonymized datasets that include all problem gambling services provided by all entities within the geographic boundaries of Washington State (including Tribal lands) hindered the Task Force from conducting a comprehensive gap analysis for the entire state. Only HCA-contracted problem gambling treatment agencies and sole providers are required to submit data in TARGET2000, the current Invoicing and Clinical Treatment Tracking Database. There is no requirement in Washington State that non-contracted problem gambling entities, including public agencies, sole providers, Tribal behavioral health agencies, and private agencies must submit data on their problem gambling services into one database. Medicaid doesn't currently cover problem gambling treatment (so this data isn't collected in Provider One). Therefore, this gap analysis has focused mostly on the services provided by the State Program, with additional information added about services provided by other entities whenever possible and readily available.

Additional limitations included the small number of staff available to do significant, in-depth research in time to meet the deadlines for the 2021 Prevalence Study final report and then final PGTF recommendations report to the Legislature.

# 3 | Problem Gambling Task Force Recommendations

The Problem Gambling Task Force recommendations are placed in three topical categories: (I) Comprehensive Problem Gambling Services, (II) Necessary Infrastructure, and (III) Collaboration and Partnerships.

## I. COMPREHENSIVE PROBLEM GAMBLING SERVICES

Improve availability and access to all levels of treatment and recovery support services for problem gambling.

Problem gambling treatment and recovery support services are a vital element of the state’s behavioral health services but are underfunded and need to be expanded.

State-funded problem gambling services are not easily accessible across all regions, including in some areas where consumers are near one or more gambling opportunities (e.g., commercial card rooms, Tribal casinos, and other gambling).

A study conducted in 2016 and administered to U.S. adults showed that proximity and access to gambling appears to be correlated to problem gambling, depending upon specific factors that include distance to and type of gambling activity. Some areas of WA State offer gambling within a one-hour drive, but do not have a

Certified Gambling Counselor within a one-hour drive. Expanding the availability of state-funded problem gambling treatment along with access to both residential and outpatient treatment is a major priority of the PGTF.<sup>53</sup>

The Washington State Gambling Counselor Certification Committee (WSGCCC) continues to work to reduce unnecessary barriers while maintaining high standards to expand the Certified Gambling Counselor workforce.

### Proposed Strategies

- Convene a stakeholder workgroup to determine if private insurers are, in fact, covering problem gambling treatment. This would likely be initiated by the Washington State Legislature.
- Expand use of resources beyond clinical counseling, for example, Certified Recovery Coaches, Certified Peer Coaches, and Peer Support Specialists. This would likely be initiated by HCA/DBHR and ECPG.
- Allow and provide funding for residential problem gambling treatment in state and out-of-state.<sup>54</sup> This would likely be initiated by the Washington State Legislature, HCA/DBHR, and other state agencies as needed.
- Increase number of Certified Gambling Counselors in parts of the state that don’t have problem gambling treatment services available within one hour drive time. This would likely be initiated by HCA/DBHR and ECPG. (Appendix B: Availability of Gambling & Problem Gambling Treatment in WA State – GIS Maps)

Integrate problem gambling awareness, prevention, education, outreach, treatment, and recovery support services into behavioral health and substance use disorder programs.

Despite being housed within the Washington State Health Care Authority Division of Behavioral Health and Recovery (HCA/DBHR), problem gambling services are not integrated with other mental health and substance use disorder services. Since the initiation of the State Program in 2005, the lack of any federal funding for problem gambling services has led to the State Program services not being included in the ongoing integration of behavioral health services. Administratively, this has also siloed the State Program from all other behavioral health prevention, treatment services, recovery services, and clinical training.<sup>55</sup>

Funding for the State Program is at about the same level in 2022 as it was in 2005, despite the rapidly changing gambling landscape over the past decade.<sup>56</sup>

Washington State has seen significant growth in population which translates to more people gambling. Analysis based on the 2021 Washington State Adult Problem Gambling Prevalence Study demonstrates that the need exists to significantly increase treatment services. Better integration within the behavioral health systems would help meet the clear needs in problem gambling services.

Currently in Washington State, very few behavioral health agencies screen clients for problem gambling despite that numerous research studies have shown that there is significant overlap between problem gambling and co-occurring disorders (mental health-related and/or substance use disorder). These are missed opportunities for clients to receive integrated treatment for both problem gambling and one or more co-occurring disorders.<sup>57</sup>

In addition, studies have shown that youth and young adults have a higher risk for problem gambling than adults (6.3 percent versus 3.5 percent in Washington State). However, prevention activities focused on problem gambling are not integrated with other state-level prevention activities. This is another missed opportunity to coordinate prevention initiatives on problem gambling with other topics, like alcohol and substance use, smoking, and other risky behaviors.

### **Proposed Strategies**

- Significantly increase state funding for problem gambling prevention activities. This would likely be initiated by the Washington State Legislature.
- Initiate grant-based funding project for behavioral health agencies to voluntarily integrate a short evidenced-based/validated problem gambling screening tool with mental health and substance use disorder assessment processes. This would likely be initiated by HCA/DBHR.<sup>58</sup>
- Surface and share the experience and success of our state and Tribal partners in this arena.
- Enable HCA/DBHR to integrate problem gambling with other behavioral health care services. This would likely be initiated by the Washington State Legislature and implemented by HCA/DBHR.



Integrate problem gambling information into clinical behavioral health curriculum, training, and counseling programs.

Information about problem gambling screening, assessment, referral, and treatment is not currently included or required for mental health and substance use disorder training programs in Washington State, including undergraduate and graduate level clinical degree programs. Washington State behavioral health clinicians should be aware of the impacts of problem gambling, how individuals and those around them are impacted, and how to access problem gambling treatment and recovery services.

### Proposed Strategies

- Require existing and future clinical training programs for substance use disorder and behavioral health professionals to include problem gambling as a required topic for example, the new University of Washington (UW) Behavioral Health Teaching Facility under development. This would likely be initiated by the Washington State Legislature, HCA/DBHR, and UW.
- Include information within all behavioral health clinical training programs and behavioral health-related higher education degree programs about how treatment and recovery are approached and how to become a Certified Gambling Counselor. This would likely be initiated by the Washington State Legislature, HCA/DBHR, and ECPG.
- Create opportunities to share the experience and success of our state and Tribal partners, likely be initiated by HCA/DBHR.

Enhance consumer protections and responsible gaming for vendors, operators, and the public, including youth.

Despite the known impacts from problem gambling and gambling disorder, the protections for consumers from the mechanisms of addiction need to be strengthened and expanded in Washington State. Prevention and consumer protections are especially important to have in place for people under 18.<sup>59</sup>

A related topic of concern is the need to improve responsible gaming messaging focused on adult consumers. As an example, in Washington State, clear messaging is required on every pack of cigarettes (warning label); every ad for alcoholic beverages (responsible drinking/legal age/don't drink & drive messages); and every cannabis distributor billboard has a disclaimer that products are for ages 21 and over. State law requires that land-based gambling establishments post signage about responsible gaming, the Problem Gambling Helpline, and other resources.<sup>60</sup>

Despite these state requirements for land-based gambling, the PGTF has determined that Washington State should take a more active approach on behalf of consumers to raise the bar on expectations for responsible gaming.

### Proposed Strategies

- Determine and decide which state agency will take the lead role in advancing consumer protections for existing and newly legalized gambling activities in the future. The approach would likely involve WSGC, HCA/DBHR, the WA State Attorney General's Office, and other partners.

- Incorporate responsible gambling education for players in brick-and-mortar vendors and operators, including odds/stats, common distortions, and problem gambling resources. Examples of common thought distortions are thinking ‘this machine is hot and will pay out’, ‘this machine just paid out so I won’t win again today,’ general superstitions about luck, lucky charms, rabbits feet, and ‘I should play these lucky numbers because X-Y-Z happened today.’ This would likely be initiated by ECPG, WSGC, and HCA/DBHR.
- Develop and distribute a mobile app that can be used by consumers to locate problem gambling services, including prevention, treatment, and recovery referrals and other resources. This would likely be initiated by ECPG and HCA/DBHR.
- Support enhanced problem gambling prevention services for youth (under age 18) that are integrated into existing HCA prevention efforts. This would likely be initiated by HCA/DBHR.
- Washington State Gambling Commission will identify a staff position within the agency to be a resource person for staff and Commissioners on responsible gambling. This would likely be initiated by WSGC.
- When legislators or state executive branch agencies consider expansion of gambling and/or any change to gambling law or statute, a policy analysis should be completed by legislative or agency staff that assesses the impact of the expansion or change on the need for expanding state-funded problem gambling services.<sup>61</sup>

## Recognize impacts of internet use and gaming disorders on youth and adults.

Washington State government doesn’t currently fund specialized clinical treatment services for individuals negatively impacted by online video gaming and/or internet disorders. The World Health Organization (WHO) recognizes gaming disorder; however, the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) does not currently recognize it. The DSM-5 does propose internet gaming disorder for future inclusion. This leaves an unmet need for treatment for online gaming/internet disorders that the State Program could meet if its scope of responsibility were to be expanded. See Chapter 6: Looking Ahead: Areas of Interest and Concern for more.

### Proposed Strategies

- Legislature to convene and engage a statewide stakeholder group to consider these initial issues:
  - » Study internet gaming, video gaming with gambling elements, and casino-style mobile gaming.
  - » Consider enacting consumer protections requiring that third-party vendors provide the ability to track time and money (if applicable) played, block oneself from play for a period of time, not receive promotional emails or texts, and not market to children. Remain open to other protections that may be required as the technology develops and as problems reveal themselves.
  - » Clarify definition of “thing of value” in gambling statutes beyond a monetary/tangible good to include time, energy or similar investment. Clarify that real

money spent to gain digital money or goods used for in-game gambling and online video gaming is gambling.

- » Assess if the state should make further investment into outreach towards parents, educators, and community members who interact with children and young adults, as well as the video game and entertainment industry in Washington State.
- » Amend RCW 41.05.750, which governs the State Program, to expand its scope to fund reimbursement services for individuals with diagnosed gaming disorder (as the state currently does with problem gambling).
- Legislature to change scope of responsibility in WAC/RCW(s) to allow the State Program (HCA/DBHR) to fund reimbursement services for individuals with diagnosed online gaming/internet disorder (as it currently does with problem gambling).

## Assess the potential of including a gambling treatment diversion program within existing Washington State courts.

Therapeutic Justice Courts, diversionary courts, and specialty courts are part of a concept developed over the last 30 years. This concept has changed the focus of the criminal justice system. Instead of the practice of cycling individuals in and out of the system, gambling treatment diversion gives them an opportunity for productive growth.

Gambling treatment diversion works on the same premise as the long-standing drug and family courts, relying on a system of sanctions and rewards to keep participants on track. In the standard practice of traditional courts, when participants fail to comply with program regulations, the judge usually imposes sanctions ranging from frequent court appearances to jail time. In contrast, with gambling treatment diversion, progress is rewarded by recognition from the bench during court visits, reduced supervision, and less frequent court appearances.

### **Benefits of Therapeutic Justice Programs for those Impacted by Gambling Disorder<sup>62</sup>**

- Participants in treatment can maintain employment, which increases likelihood of making financial restitution.
- Treatment recognizes restitution and financial accountability as essential goals of treatment.
- Treatment addresses family needs along with the participant.
- Participants can use supportive resources that would not be available in jail, such as Gamblers Anonymous and family support.
- Participants are often highly motivated to engage in and complete treatment to avoid negative consequences
- Positive consequence of having criminal record sealed provides additional motivation to succeed.
- Successful outcomes reduce social costs to the community and relieve future burden on courts.



The PGTF understands the importance of adding a gambling treatment diversion program within existing diversion courts. During 2012 to 2017, ECPG worked in partnership with the Pierce County Superior Court Drug Court and Family Court Programs and Pierce County Alliance to offer a Problem Gambling Track as part of the Therapeutic Justice programs. This program was supported by the Department of Justice, Lakewood City Police, and the Puyallup Tribe of Indians. The greatest challenge to its long-term continuation proved to be the reason for the program's demise – the inability to keep Certified Gambling Counselors on the staff at Pierce County Alliance, the sole treatment provider agency contracted with Pierce County Superior Court Drug and Family Courts.

When this innovative program launched in Washington State in 2012, there was only one other similar program in the country. Today there are approximately 3,700 Drug Courts across the United States, but only one Gambling Treatment Diversion Court program, located in Nevada. As of this writing, Ohio and New Jersey are exploring adding gambling treatment diversion courts.<sup>63, 64</sup>

### **Proposed Strategy**

Legislature to convene a work group made up of representatives from nonprofit problem gambling organizations, treatment providers and agencies, state agencies, the Office of the Administrator for the Courts, Superior Court judges and attorneys in Drug and Family Courts, law enforcement, Tribes, and the recovery community to consider the effectiveness and provide guidance on the implementation of a gambling treatment diversion program in Washington State.

## **II. NECESSARY INFRASTRUCTURE**

Increase state funding for the State Problem Gambling Program to meet current and future needs.

As presented in Chapter 2: Problem Gambling Services Gap Analysis, the PGTF identified a need to increase access to problem gambling prevention, treatment, recovery support, and other services offered by the State Program. Expanding access to services will require additional state funding for the State Program. The number of Certified Gambling Counselor must also be expanded by a minimum of 25 percent, and possibly more, to meet current and future anticipated need.<sup>65</sup>

### **Current State Problem Gambling Program Funding**

The State Program's clinical treatment reimbursement program was launched in 2005, with funding from Tribes and the state as a low-barrier program to bridge the gap for individuals not insured, or under-insured, for problem gambling/gambling disorder treatment. The State Program is funded by appropriation from the state problem gambling account.<sup>66</sup> Funds flowing into the state problem gambling account come from a business and occupation tax (0.13 percent) on net revenues above \$50,000 annually from commercial, charity, and non-profit gambling.<sup>67</sup> The Lottery also contributes at the same rate (0.13 percent) based on net sales receipts.<sup>68</sup>

The 2021-2023 State Program appropriation is \$1.463 million, with an additional \$150,000 appropriated in the 2022 Supplemental Operating Budget to close the gap for treatment funding in the current State Program budget.<sup>69</sup>

Additional funds have come from Tribes, and non-profit organizations have donated to the State Program over the years. As of May 2022, at least 70 percent of forfeited funds from commercial house-banked card rooms collected due to the Statewide Voluntary Self-Exclusion Program (VEP) are also being deposited into the problem gambling account.<sup>70</sup> In the first six months since the VEP opened, forfeited funds have averaged around \$1,000 per month.

Currently, there is either no funding or inadequate funding for critical components of a comprehensive state-funded problem gambling program across the range of services, including prevention, treatment, recovery support, clinical training, outreach/ education/ awareness, program monitoring and evaluation, and research.<sup>71</sup>

#### Proposed Strategies

- Legislature to increase funding for the state problem gambling account from \$1.463 million in the 2021-2023 biennium to \$2.8 million in the 2023-2025 biennium.<sup>72</sup> (Appendix A: Current & Proposed Budget Models – WA State Problem Gambling Program) This will require that the Legislature do the following:
  - » Determine mechanism(s) and enact increase of funds deposited into the state problem gambling account created by RCW 41.05.751; and
  - » Increase the spending authority (appropriation) to the State Program by the same amount.

- Legislature to consider diverse funding sources for the State Program when determining the mechanisms and sources used to increase funding (e.g., state problem gambling account and general fund state).

#### Implement a new data system for the State Problem Gambling Program.

Since 2005, the State Program has been using the TARGET2000 data system. Contracted problem gambling agencies and sole providers are required to enter client, assessment, and encounter data for all treatment services provided. At Department of Health and Human Services (DSHS), when TARGET2000 was rolled out over two decades ago, many of the behavioral health services utilized TARGET2000.

Over the years and continuing with the move of DBHR to HCA in July 2018, all other remaining behavioral health services were migrated into other data systems. Except for a few Tribal behavioral health agencies that have historically used TARGET2000 to track their own clients and encounters, the State Program is the only state program that still uses TARGET2000. TARGET2000 is no longer supported by the vendor, and only minimally supported on a case-by-case basis by HCA's IT unit.

In the 20 plus years since TARGET2000 was implemented, program evaluation and monitoring has moved away from proxy measures of success to actual quality of life measures of success, data fields not obtainable with TARGET2000. Many other state and national problem gambling programs have already transitioned to new data systems over the past 5-10 years that, by design, have both flexibility and a focus on real measurable outcomes, not simply proxy measures.<sup>73</sup>

### **Proposed Strategies**

- HCA to procure a new data system that offers:
  - » Flexibility to adapt to changing needs (e.g. ability to track telehealth during pandemic);
  - » Easy and accessible reporting on progress and outcome measures, such as quality-of-life for program evaluation and monitoring; and
  - » Migration of data from existing TARGET2000 to new system.
- HCA to seek input from staff, clinicians, and other end-users when exploring options for a new data system, and will include the State Program in the specification, design, and implementation processes.

### **III. COLLABORATION AND PARTNERSHIPS**

The Governor, the Washington State Gambling Commission, and the Washington State Health Care Authority should work collaboratively with the state legislature, Tribal governments, relevant state agencies, and key stakeholders to determine funding and service strategies to best meet the needs of Washington State residents.

The 2021 statewide prevalence study on problem gambling, commissioned by the Washington State Health Care Authority, has shed empirical light on the overall need for Washington State residents to have access to comprehensive problem gambling services. Chapter 2: Problem Gambling Services: Gap Analysis delves into this issue in greater detail.

#### **Proposed Strategy**

With the sunset of this legislative task force there will no longer be an organized space for conversations in the problem gambling space. This recommendation calls on the key parts of state and Tribal governments to continue dialogue and proposing recommendations to support comprehensive problem gambling services for all our residents. This would likely be initiated by the WSGC and HCA/DBHR, in collaboration with ECPG, Tribal governments, state legislature, and state agency partners.

## 4 | Early Success: Problem Gambling Initiatives Completed or In Progress

### INITIATIVES COMPLETED

In the two years since the Problem Gambling Task Force launched, various agencies, Tribes, and other organizations within Washington State have made important strides toward improving awareness and access to problem gambling prevention, treatment, and recovery services. The following initiatives compliment many of the Task Force recommendations and underscore the breadth of unmet need in Washington State.

#### **Completed: Require Responsible Gaming training for all commercial venue staff.**

Most people can enjoy gambling for recreation and entertainment. For some, however, gambling can become a problem. With more and more individuals enjoying gambling as entertainment in casinos and other gaming venues, it's crucial that commercial gambling operators be required to provide information and education about gambling addiction, prevention, and treatment services. This need highlights the importance of robust responsible gaming programs and policies.<sup>74,75</sup>

A Responsible Gaming program that includes annual employee Responsible Gaming training is good customer service. The intent of an employee Responsible Gaming training program is to provide staff with a higher level of understanding and flexibility to assess if a customer is struggling to gamble responsibly and determine a course of action.

Based on evaluation of existing responsible gaming programs, these programs have been shown to be beneficial, but success rests on operators continuing to provide on-going education and refresher trainings.

Along with gambling venue customers, people who work at gambling venues (employees) are an important and under-researched group. According to the International Center for Responsible Gaming, many states and casino operators in the U.S. require gaming employees to go through training on the specifics of disordered gambling and responsible gaming.<sup>76</sup>

Research also supports the reasons to require Responsible Gaming training for gambling venue employees.<sup>77</sup> Employees are slightly more vulnerable to gambling disorders than the general public. Gambling industry employees can experience personal health risks, due to working in venues where gambling is part of their daily job. They also have direct contact with customers who might engage in multiple risky activities (e.g., drinking, smoking, and gambling) and might need assistance to facilitate help-seeking by patrons or co-workers who experience problems. Knowing the signs of problem gambling and where to turn for help for themselves, as well as others, is a crucial part of Responsible Gaming training.

#### **Actions Taken**

In 2022, the Washington State Gambling Commission approved new rules related to the initiation and operation of the Statewide Self-Exclusion Program.

Under the new rule, all operators of commercial card rooms must provide annual Responsible Gaming training for staff. This requirement is now in force.

In 2021, Washington's Lottery received verification as a responsible gambling organization at the Implementation Level from the North American Association of State and Provincial Lotteries and National Council on Problem Gambling.<sup>78</sup> The evaluation standards for this verification process require a robust employee and retailer education program, which has been implemented.

**Completed: PGTF to gain clarity and learn from the treatment and recovery support services offered by Tribal behavioral health agencies in Washington State.**

*Tribes in Washington State Support Responsible Gambling*

Tribes in Washington are working on multiple fronts to proactively address problem gambling. Tribes contribute more than \$3 million annually to support responsible gambling education, problem gambling prevention and treatment, and wellness. Addressing addiction is an evolving effort, and Tribes are committed to continual learning and refining their efforts to prevent and treat problem gambling. The work of the Tribes includes:

- Designing and implementing treatment programs for tribal and non-tribal members, including inpatient, intensive outpatient, outpatient, aftercare, group, and family care and intervention support.
- Funding problem gambling programs, including a significant portion of ECPG's budget.

- Supporting prevention and education through youth and elder programs, community talking circles, helpline signage, websites, posters, billboards, videos, advertising, financial education classes, community events, and partnerships.
- Training staff to build their capacity to recognize and address problem gambling.
- Designing culturally appropriate and community-based approaches to treatment.
- Providing counseling to address related topics such as money management, emotion regulation, cross addiction, and the impact of gambling on relationships.
- Forming the Intertribal Providers Coalition, where tribal problem gambling counselors meet monthly.
- Offering self-exclusion programs so guests with problem gambling behaviors can exclude themselves from a tribal gambling property.

**Actions Taken**

*WIGA Awareness-Building Campaign*

The Washington Indian Gaming Association (WIGA) recently launched a paid media campaign to raise awareness and help those struggling with problem gambling. WIGA's annual paid digital and print media campaign is in its second year. Using audience and behavioral targeting, the campaign targets those who may have a gambling problem and those seeking help. Visually compelling ads and online resources at WATribesCare.org let people know that they are not alone, and help is available. The campaign directs people to treatment, support and recovery resources offered locally and statewide. The 2022 campaign ran from March through April and garnered more than 3.7 million digital impressions and reached 600,000 via print.



**Completed: Establish statewide voluntary self-exclusion programs for commercial venues and lottery.**

Voluntary self-exclusion allows individuals to ban themselves from specific gambling activities and is a powerful evidence-based responsible gambling strategy. Individuals who enroll in voluntary self-exclusion are generally prohibited from collecting any winnings or promotional prizes, recovering any losses, or accepting complimentary gifts, services, or other things of value from a licensee or operator.

In Washington State, there several options for self-exclusion from gambling. Many Tribes offer voluntary self-exclusion at their casinos. In addition, there two state-sponsored voluntary self-exclusion programs available, one through Washington’s Lottery (Lottery) and the other through the Washington State Gambling Commission (WSGC).

**Actions Taken**

Since May 1, 2022, the new Statewide Voluntary Self-Exclusion Program established by the WSGC is in effect at all licensed house-banked card rooms. Tribal casinos are invited to join but are not subject to all the requirements that commercial card rooms must comply with.

As of this report, over 200 individuals have enrolled. Individuals can enroll via mail (with notary confirmation of identity), at the WSGC Lacey office, or at several house-banked card rooms located around the state. Individuals may ban themselves for a period of one, three, five, or ten years, at the end of which WSGC will contact the individual to let them know that the period is ending and that if they would like to be removed from the self-exclusion list, they must complete a form to be removed (opt-out).

If individuals who have signed up on the statewide Voluntary Self-Exclusion Program later attempt to collect winnings at a commercial house-banked card rooms, these funds will be forfeited, and a check for a minimum of 70 percent of the amount of the winnings is sent to the state problem gambling account, with any remaining funds distributed to a charitable or nonprofit organization that provides problem gambling services or increases awareness about problem gambling.<sup>79</sup>

The Lottery offers a voluntary self-exclusion program for people who play lottery games. WSGC offers a voluntary self-exclusion program for people who play in commercial house-banked card rooms. Tribal casinos may elect to be included by the WSGC program or may offer their own program (and many do).

The Lottery began offering a voluntary self-exclusion program on June 14, 2021. The program was announced broadly through the Lottery’s website, as well as social and traditional media. This program allows players to request to be excluded from lottery activities within the state of Washington for a predetermined length of time, and to be prohibited from collecting winnings over \$600 or any second chance drawing prize. Each person who enrolls in the program acknowledges that it is their responsibility to refrain from engaging in lottery play and other activities offered by Washington’s Lottery.

**Completed: Ensure that the Healthy Youth Survey permanently includes a two-part question about gambling and problem gambling.**

The Healthy Youth Survey (HYS) is conducted every other year by DOH, in collaboration with HCA.<sup>80</sup> Eighth, tenth, and twelfth graders are surveyed about many aspects of behavior, including substance use, mental health issues, and other related topics. Since 2006, the survey included one question about either gambling or problem gambling, except for 2018 (no question was included in that year's survey).

**Actions Taken**

The 2021 HYS included a two-part question at the request of HCA, for both gambling and problem gambling. As with adults, both prevalence rates are important to understand the full picture of the percentage of youth who gamble and the percentage that have self-identified with having issues with friends, family, or school, especially given that gambling is illegal for anyone under 18, except as defined under RCW.<sup>81</sup>

The data analysis of the 2021 HYS supports the importance of problem gambling prevention activities focused on youth, as well as parents, teachers, and other responsible adults. HCA determined that this two-part question is now categorized as a required question in all future surveys, with the next being in 2023.

*INITIATIVES IN PROGRESS*

**In Progress: Increase number of Certified Gambling Counselors in unserved and under-served regions.**

Prior to the convening of the PGTF in January 2020, the State Program and the WA State Gambling Counselor Certification Committee (WSGCCC) were already aware of several issues affecting the availability of Certified Gambling Counselors:<sup>82</sup>

- The likelihood that more Certified Gambling Counselors were needed, and mainly in the eastern and rural areas of the state (over 90 percent were along the I-5 corridor).
- The barriers to becoming a Certified Gambling Counselor needed to be reduced to encourage more licensed mental health providers and substance use disorder professionals to become certified.
- A problem gambling prevalence study had not been completed since 1998, so the estimate of the number of individuals at moderate-to-high risk for problem gambling was measured last in a different gambling environment over two decades before.

As of October 2022, DOH's clinician database indicates over 31,000 active behavioral health licenses (credentials).<sup>83, 84</sup> Despite the large number of behavioral health clinicians and substance use disorder professionals practicing within the state, there are only about 40 that are active Certified Gambling Counselors, with several more in training/provisional status.

Despite the increase in telehealth clinical appointments due to the pandemic, greater access to in-person treatment is still needed. Most Certified Gambling Counselors and

DOH-certified problem gambling agencies are located along the I-5 corridor, leaving large areas of the state without access to in-person state-certified problem gambling treatment in the area. The PGTF identified eleven geographic areas of the state that have no active Certified Gambling Counselors or DOH-certified problem gambling agencies within a one-hour drive time.

### Barriers Surfaced

- Lack of employer support for individual counselors to take time away from work to complete the required certification training.
- Staffing shortages that prevent the ability to provide caseload and group coverage for staff to take time away from work to complete the required training and supervision. Although an issue for all provider agencies, smaller agencies are particularly impacted by staffing shortages.
- Financial barriers such as application fee, exam fee, training expense which may require travel, hotel, meals, etc., clinical supervision, and a bi-annual renewal fee.
- Lack of diversity among the Certified Gambling Counselor workforce; only a handful are bilingual or multilingual and/or who provide culturally specific treatment services.
- Lack of Medicaid coverage for problem gambling treatment.

After extensive review of the data and consultation with the Washington State Gambling Counselor Certification Committee, the State Program, and ECPG, the PGTF recognized the need to increase both the number and the regional availability of Certified Gambling Counselors across our state.

### Initial Work to Date

- **Over the past several years, the WSGCCC has been focused on reducing barriers to certification**, with the overarching goal to lower barriers while keeping high standards.<sup>85</sup> This work is on-going, but here are a few examples of changes made already to the requirements for certification:
  - » Requirement that the candidate have at least three in-person sessions with a gambling counselor supervisor has been changed to allow for clinical supervision in person, by phone, or by HIPPA-compliant video/audio communications.<sup>86</sup> This also eliminates the need to travel across the state or to another state to receive in-person supervision.
  - » Simplification and clarification of licensures and educational combinations that can apply for provisional or final certification.
  - » Creation of a written case conceptualization exam as an alternative option that is more culturally relevant and Washington State-focused, as requested by some candidates.<sup>87</sup>
- **Through their contract, ECPG and the State Program have increased the daily lodging scholarship** amount and the overall number of scholarships, including awarding scholarships for online trainings that include a fee.
- **When the pandemic started, ECPG moved all trainings online**, including the Problem Gambling Core Training (30 hours) that is a requirement for certification. This has allowed many clinicians to attend who would otherwise not be able to due to a lack of travel funding and pandemic restrictions.



The 30-hour course is offered at least twice per year and is a hybrid of 10 hours of self-directed online learning and 20 hours of live learning. Since January 2021 and for the foreseeable future, in winter the 20-hour live-learning portion is offered virtually and in summer the 20-hour live-learning portion is offered in-person. ECPG continues to also offer many online trainings, including training the treatment of Gaming Disorder.

- **The State Program and ECPG are continuing to support and expand opportunities for online training** for clinicians, prevention specialists, peer counselors, behavioral health agency staff and leadership, and others with an interest in problem gambling services.
- **The State Program, ECPG, and WSGCCC are addressing unserved/under-served regions** in Washington State by identifying where Certified Gambling Counselors and DOH-certified problem gambling agencies need to be recruited.
- **The State Program, ECPG, and WSGCCC are focusing on expanding problem gambling treatment services to higher risk populations**, including populations with primary language other than English.
- **The State Program is pursuing approval for coverage of problem gambling/gambling disorder treatment under Medicaid.** CMS will determine HCA's role in this effort.<sup>88</sup>

### Activities contingent on additional funding for the State Program

- Offer 100 percent scholarships to provider agencies and clinicians in unserved/under-served regions and/or populations.
- Offer a maximum per diem funding option for agencies that are unable to cover daily cost of having clinician unavailable during training and related activities.
- Provide on-site mini-trainings at provider agencies to encourage participation in certification process (e.g., Community Based Health Clinics and Federally Qualified Health Centers).
- Offer problem gambling readiness grants that include certification of one or more employed clinicians with additional technical assistance to prepare the agency.

### In Progress: Increase reimbursement rates for state-contracted certified problem gambling agencies.

The State Program's rates for treatment, case management, and clinical supervision have been the same since before 2011. When treatment reimbursement rates fail to rise at the same pace as increases in market rates, behavioral health agencies and sole providers' interest in providing problem gambling treatment services declines. To keep problem gambling treatment as a viable option that agencies and individual providers will be able to continue to provide in our state, the State Program's problem gambling treatment reimbursement rates need to be increased.

Funding for the State Program is based on the appropriation from the dedicated state problem gambling account (RCW 41.05.751). Raising the appropriation from the state problem gambling account for problem gambling treatment is not a long-term solution.

From State Fiscal Year (SFY) 2020 to now, legislators have appropriated an additional \$650,000 for specific uses.<sup>89</sup> The appropriation amount has remained steady (within several thousands of dollars) over the past decade. Without an increase in funding coming into the state problem gambling account, the amount of unappropriated funds (rainy day funds) that remains after these large amounts were withdrawn is not adequate to sustain an increase in reimbursement rates into the future. Without additional funding for the State Program, the only option to meet the need for increased treatment reimbursement rates is to reduce the overall number of clients served.

As of this writing, HCA/DBHR is determining recommendations for increasing rates for other behavioral health providers. However, because there is no federal funding for problem gambling, additional treatment funding would need to come from the state, either as an increase in the percentage of business and occupation tax collected on gambling revenue, general state funds (GF-S), and/or another source. Until funding is increased to the state problem gambling account, HCA is unlikely to raise reimbursement rates because doing so will decrease the overall amount of treatment that can be provided.<sup>90</sup>

### **In Progress: Cover problem gambling treatment under Medicaid for individuals enrolled in Apple Health.**

Unlike other behavioral health and substance use disorders, the federal government does not provide funding for problem gambling treatment, despite that a high percentage of individuals struggling with a gambling addiction also have one or more co-occurring disorders (mental health/substance use).<sup>91</sup>

Additionally, for every individual struggling with a gambling addiction, it is estimated 10 to 12 people around them are also burdened (family, friends, work, school, etc.) due to the individual's gambling addiction. Untreated gambling addiction can lead not only to work, school, and family disruptions but also, in some cases, law enforcement intervention and incarceration, suicide attempt, and hospitalization.

Currently, HCA provides limited treatment services for problem gambling through the State Program, but these services fall outside of the Washington Apple Health (Medicaid) program. Funding for the State Program comes solely from the state problem gambling account,<sup>92</sup> and it is insufficient to meet the anticipated need for the current and future biennia. Allowing Medicaid-enrolled individuals to access care through Apple Health will enable the State Program to focus funding on treatment for non-Medicaid enrolled individuals.

In Washington State, approximately two million people are enrolled in Apple Health (Medicaid).<sup>93</sup> Adding problem gambling treatment as a covered service would expand this evidence-based treatment to all eligible adult clients.

- In Spring 2021, the Washington State Legislature approved a state match for covering problem gambling treatment under Medicaid (estimated at 31 percent state funds and 69 percent federal funds), to begin in SFY2023, contingent upon an approved addition to the State Medicaid Plan.
- The State Plan Amendment will likely be submitted to CMS in the later part of 2022 or early 2023. If inclusion of problem gambling treatment is approved by CMS, the earliest estimated start date would be in calendar year 2024.

## **In Progress: Evaluate problem gambling helpline practices and recommend improvements.**

Currently in Washington State, ECPG has hosted and maintained the Problem Gambling Helpline (1-800-547-6133) for over 25 years.<sup>94,95</sup>

Phone helplines continue to be among the most accessible ways for people to connect with a counselor and get the assistance they need. Many states have their own helplines. The National Council on Problem Gambling (NCPG) offers a national helpline number. NCPG is in the process of determining and implementing improvements that further the ‘no wrong door’ national strategy for those seeking help for problem gambling.

### **Ongoing Efforts**

#### *Nationally – NCPG and State Affiliates*

NCPG’s Helpline modernization project goals include:

- Improving access to high-quality services for individuals and their families
- Ensuring that the national Helpline network provides an excellent standard of care

#### *Statewide – ECPG*

As part of ECPG’s Problem Gambling Helpline Enhancement Plan for 2022-2024, the Council is conducting the following work:

- Developing a feasibility study to implement a warm transfer process for calls to the Washington Problem Gambling Helpline (1-800-547-6133).

- Designing a new interactive directory that will allow website visitors to find certified gambling counselors and agencies more easily, including info on screening and referral locations, telehealth, languages spoken, insurance accepted, and other info. ECPG anticipates the new directory will be online by mid-2023.
- Coordinating with NCPG and monitoring changes and enhancements that may benefit or otherwise impact Helpline Services in Washington State, as part of NCPG’s National Problem Gambling Helpline Modernization Project (2022-2024)

#### *State Program*

The Washington State Recovery Helpline (1-866-789-1511) is funded by HCA and includes problem gambling as a topic about which individuals can seek resources through the Helpline. As part of future work, the State Program plans to engage more actively with the Recovery Helpline staff, to ensure that information that is being relayed to callers is accurate and up to date.

# 5 | Key Insights: 2021 Washington State Adult Problem Gambling Prevalence Study

## Prevalence Study Reveals Insights and Informs Report

### Project Background

In 2019, WSGC commissioned a report about gaps and possible needs in problem gambling services. A key finding of the report was that the lack of recent prevalence data for Washington State prevented the researchers from accurately predicting how many adults might need problem gambling treatment services. In response to this concern, the 2020 Legislature passed a budget proviso to appropriate additional funding from the state problem gambling account to conduct a new prevalence study. In response to the impact of the COVID-19 pandemic on human subject research, the 2021 Legislature approved a request from HCA to move the due date and funding authorization forward by one year to June 2022. In June 2022, the report deadline date was formally extended to October 2022, due to the complexity of verifying earlier data analysis. The final report was delivered to the Legislature and the PGTF on October 7, 2022.<sup>96</sup>

### Methods

The 2021 Washington State Adult Problem Gambling Prevalence Study was completed in several stages. In the first stage, an ad hoc Consultation Group was formed to design and finalize the questionnaire.<sup>97</sup> In the second stage of the project, Washington State University's

Social and Economic Sciences Research Center (SESRC) programmed the questionnaire for computer-assisted web interviewing (CAWI) and a self-administered paper-and-pencil questionnaire (SAQ) was created.

All materials were translated into Spanish by the Academy of Languages Institute. In the third stage of the project, the surveys were administered to approximately 49,000 households and completed by 9,413 respondents between July 2021 and early September 2021, resulting in a 19 percent response rate.<sup>98</sup>

### Key Findings

The legislative proviso initiating the 2021 Prevalence Study required HCA to determine the rates of gambling and problem gambling in Washington State, in addition to other topic areas. The survey data was collected from July-September 2021, and respondents were asked to consider the previous 12 months when responding (i.e., during the COVID-19 pandemic). The survey revealed lower-than-expected rates of gambling overall, compared to a non-pandemic year, possibly due to a combination of the closure of land-based gambling and concerns over contracting the virus in public locations. However, the prevalence rate (3.5 percent) of moderate-to-severe problem gambling among adults who gamble was on the higher end of the 'normal' expected range (2-4 percent of all adults who gamble, based on many studies).<sup>99</sup>

**Prevalence rates are reported in this order:**

**1. Gambling—Prevalence among All Adults**

- » Percent of entire population that gambled as compared to All Adults

**2. Problem Gambling—Prevalence of Problem Gambling**

- » Among All Adults (percent of entire population at risk)
- » Among Adults who gamble only (percent of those at risk for problem gambling)

- Past-year gambling participation rates differed significantly by gender, age, ethnicity, marital status, education, employment, and military service.<sup>102</sup>

*More or most likely to have gambled in the past year:*

- » Men were significantly more likely than women
- » Ages 35 to 64
- » Employed (compared to both retired and unemployed/other)
- » Education: Individuals with ‘some college’ (as compared to ‘no college’ or holding a ‘bachelor’s’ or ‘advanced degree’)

## 2021 Prevalence Study Results

**1. Gambling—Prevalence among All Adults<sup>100</sup>**

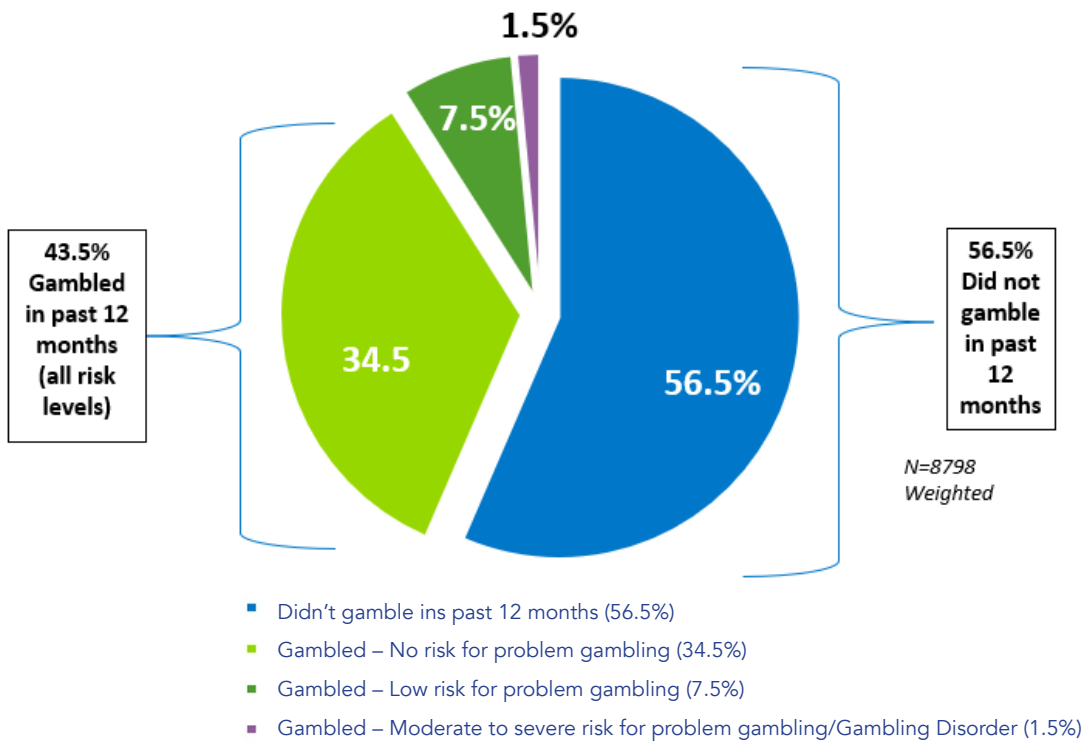
Figure F on the following page shows the breakout of the number of adults who gambled (light green and purple slices) and adults who didn’t gamble (dark blue).

- 43.5 percent of adults acknowledged participating in one or more gambling activities in the past year. 56.5 percent of adults did not report gambling.
- Within the 43.5 percent who gambled, the light green represents those at no or low risk for problem gambling. The purple slice represents those at moderate-to-severe risk for problem gambling.
- Past-year gambling participation was highest for lottery games, Tribal casinos, pull-tabs, bingo, and raffles. Participation in all other types of gambling was 5 percent or less.<sup>101</sup>

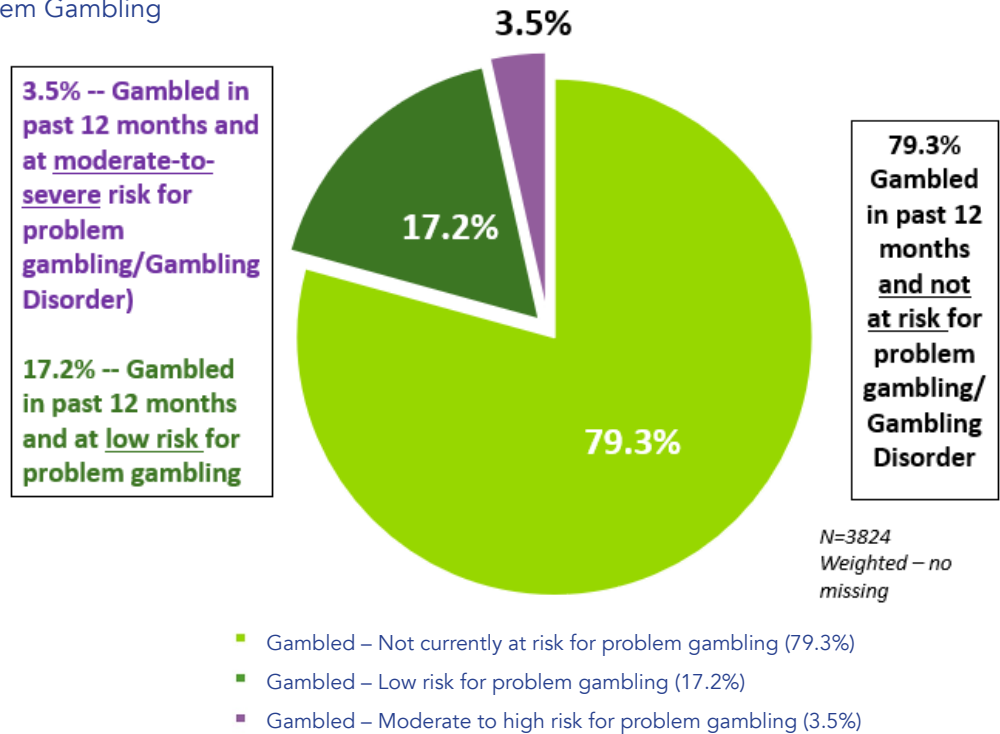
*Less or least likely to have gambled in the past year:*

- » Education: Individuals with advanced degrees
- » Never-married people
- » Non-Hispanic
- » No military service

**Figure F:** All Adults, Gambling & Problem Gambling



**Figure G:** Gambling & Problem Gambling





## 2021 Prevalence Study Results

### 2. Problem Gambling—Prevalence of Problem Gambling

**Figure G** includes only Adults who gambled (43.5 percent of all adults in previous chart).

- Light green represents the almost 80 percent who are not at risk for problem gambling.
- Dark green represents the 17.2 percent who are at low risk for problem gambling.
- Purple represents the 3.5 percent who are moderate-to-high risk for problem gambling. This is on the higher end of the range that is normally cited (2-4 percent) for adults who gamble.
- People who gambled online (illegal in Washington State) had an overall risk of almost three times (3x) the risk for problem gambling as compared to the group of individuals who gambled overall (10.3 percent versus 3.5 percent).<sup>103</sup>

#### **Estimating the Need for Problem Gambling Services Based on the Prevalence Study**

The 2021 Prevalence study found that 1.5 percent of all Washington State adult residents are at a moderate-to-severe risk for problem gambling, which represents an estimated 90,000 individuals (within the range of 66,000 to 108,000 adults).<sup>104</sup>

Based on research on help-seeking behavior, we estimate that approximately 9,000 Washington State adults experiencing moderate-to-severe gambling problems might seek help, if they knew services were available, affordable, and knew how to locate the services.

Unlike the data above about who is more or less likely to gamble, in the 2021 Prevalence Study demographics were not correlated or not strongly correlated with problem gambling. This should not be interpreted to mean that there are no demographic differences among those at risk for moderate-to-severe problem gambling. Some demographic subgroups for problem gambling were too small to be able to accurately determine statistical significance.

#### **Other Findings**

##### *Attitudes about gambling availability and benefits vs. harms*

- Nearly one-third of Washington State adults (31 percent) reported that gambling was too widely available while only a small percentage (4.6 percent) reported that gambling was not available enough.
- Most Washington State residents (68 percent) stated that the harms of gambling outweighed the benefits, while 25 percent believed that the benefits and harms of gambling were about equal, and 7.5 percent believed that the benefits of gambling outweighed the harms.
- People who gambled were more likely than those who did not gamble to believe that the benefits of gambling outweigh the harms, while people experiencing gambling problems were more likely to believe the harms of gambling outweigh the benefits.

##### *Awareness of problem gambling services*

- Awareness of problem gambling was highest from television and radio sources while awareness from other sources was much lower.

- Awareness of services for those experiencing gambling problems was highest for Gamblers Anonymous and the Washington State’s Problem Gambling Helpline (hosted by ECPG).
- Awareness level was low for of clinical services and treatment provided by community behavioral health, Tribal behavioral health, and/or funded by the State Program.

### *Intersection of gambling and problem gambling with mental health or substance use*

Problem gambling has been shown in many studies and research to be associated with other mental health issues including mood disorders and substance use disorders. The 2021 Prevalence Study found the following correlations (based on past 12 months before the survey):<sup>105</sup>

- Individuals who reported gambling and tobacco use were more like to be at a moderate-to-severe risk for problem gambling than those who reported gambling but had not used tobacco
  - Individuals who reported gambling and cannabis use were more likely to be at a low risk (compared to no risk) for problem gambling than those who reported gambling but had not used cannabis.
  - Individuals who reported gambling and hallucinogen use were more likely to be at a moderate-to-severe risk for problem gambling than those who reported gambling but had not used hallucinogens.
- Individuals who reported gambling and reported difficulties with depression, anxiety, or other mental or behavioral health issues were more likely to be at a moderate-to-severe risk for problem gambling than those who gambled but did not report any of these issues.

### **Future Directions**

There is the potential for deeper analysis of the 2021 Prevalence Study data, additional research activities to supplement these findings, and subsequent iterations of this survey. Areas of future research include deeper analysis of the data to understand the correlations between types of online activities and problem gambling, coding, and evaluating write-in responses, and assessing if there’s a correlation between types of gambling activities and risk levels for problem gambling. Additionally, partners may also submit additional data analysis that they would like to have completed. The ability to do more analysis on this dataset will be determined by possible future funding and interest levels.



To understand how gambling and problem gambling impacts specific populations in greater depth, possible research projects include:

- Conducting online ‘panel’ surveys using a low-cost, opt-in methodology that recruits individuals who are members of specific populations, with the goal of better understanding impacts, help-seeking behaviors, and barriers to accessing services:
  - » Individuals who gamble and are experiencing problems, Youth and Young Adults, Older Adults, individuals from potentially higher risk communities including racial, ethnic, and/or cultural groups, etc.
- Conducting an Impact Study of gambling and problem gambling that includes a cost-benefit analysis for Prevention and early intervention.
- Conducting a follow-up survey of the Washington State Adult Problem Gambling Survey in the next 3 to 5 years, using the same methodology (‘replication survey’). Measuring the same behaviors and using the same methods employed in the Washington State Adult Problem Gambling Survey at subsequent points in time will be useful in monitoring changes over time in gambling attitudes, awareness of problem gambling services, gambling participation, and problem gambling prevalence in the state.

Ultimately, for the State Program to conduct research projects in the future will depend on the funding available.

# 6 | Looking Ahead: Areas of Interest and Concern

The PGTF was also tasked by our state legislature to highlight impending issues. The following four topic areas have been highlighted by PGTF members for future consideration.

## 1. Impact of Online Gambling

This topic relates to projected future conditions. There are advocates interested in opening and legalizing more forms of gambling including internet/online in Washington State. Decisionmakers and stakeholders should anticipate this reality and be prepared to address the impacts associated with the likely increase in gambling availability.

Over 5 percent of Washington State's adult population engages in online gambling, despite that it is illegal, not regulated, enforced, taxed, and unlike legal gambling, has no consumer protections required by Washington State.

PGTF members expressed concerns regarding the impacts of online activities that can be addictive but were not included in the original scope of work in the proviso that established the Task Force. The Task Force requested that the Prevalence Study include questions about these online activities and determine the percentage of respondents that engage in these activities. To meet that request, HCA worked with the survey researchers and consultant group creating the survey to generate a series of questions to collect this data.

### Consideration

Establish a work group to understand and make recommendations regarding mitigating the impacts from illegal online gambling to Washington State residents (especially youth), their loved ones, work and school, and the overall impact to society and costs to the state of this illegal activity.

### Significant findings about the prevalence of illegal online gambling in Washington State

- Even though online gambling is illegal in WA State, 5.1 percent of all adults report having gambled online in the past 12 months of the survey period.
- Among adults who gambled, 11.3 percent reported gambling online.
- Adults who gambled online are at almost three times (3x) the risk for moderate-to-severe problem gambling as compared to all those who gambled using any method (10.3 percent vs. 3.5 percent).<sup>106, 107</sup>

## 2. Address Impact of Problem Gambling on Youth

With sports betting now legal in more than 30 states, including online legal sports betting, the exposure and access to gambling has increased, for Youth as well as for Adults. The 2021 Healthy Youth Survey (HYS) found that 9.4% reported having gambled in the past year. Since no one under 18 is allowed to gamble at land-based gambling facilities,<sup>108</sup> it's highly likely that Youth are gambling online. Despite that online gambling in WA State is currently illegal, Youth can easily participate in online activities using their personal mobile devices, including mobile phones, tablets, and laptops. In addition to accessing online gambling sites, Youth often play games that have elements of gambling, of which they may not be aware. This can also lead to concerns about problem gambling. In the 2021 HYS, of Youth who said they'd gambled in the past 12 months, 6.3% reported that their gambling had negatively impacted one or more aspects of their life, including school, family, and relationships.

Research suggests that individuals who begin gambling by age 12 are at a considerably higher risk to develop a gambling disorder later. And the prevalence of problem gambling is higher among Youth and Young Adults than among Adults (6-8% of those who gamble, compared to 2-4% for adults). WA State policy makers and agency staff should prioritize Youth Prevention for problem gambling/Gambling Disorder:

*“Youth problem gambling has become an emergent public health issue, and adolescents constitute a vulnerable age group for the development of gambling-related problems...The present study evaluated the efficacy of an integrative intervention to prevent youth problem gambling...The findings demonstrated that the intervention was effective*

*in improving correct knowledge about gambling, reducing misconceptions and attitudes, and decreasing the total hours spent gambling per week...(and) was also effective in reducing the number of at-risk/problem gamblers during the study period.’ (Calado, F. et.al., Journal of Gambling Studies, 2020).”*

No federal funding is available for prevention and treatment of problem gambling, including for Youth Prevention. Legislators and health departments are starting to recognize the need for awareness and prevention programs that reach young people. For example, in Virginia, Delegate Sam Rasoul sponsored the first state law in the country requiring all public schools to teach students about the risks of gambling, which became law in April 2022.

*“Rasoul’s law, which had nearly unanimous support in the legislature, requires the state Board of Education to develop and distribute to all school divisions educational materials on gambling as part of the existing curriculum on substance misuse. Gov. Glenn Youngkin signed the measure in April.” (Stateline Article, July 12, 2022, Marsha Mercer)*

### Consideration

Establish a work group on Youth Problem Gambling either formally through state law or informally consisting of subject matter experts, key partners from state agencies, non-profit problem gambling services organizations, Tribes, and others who work in problem gambling, youth prevention, and education. Consider enacting legislation to require that Youth Prevention for problem gambling be included in public schools along with existing curricula on tobacco use and substance abuse.

### 3. Consumer Protections

PGTF members felt it was important to work towards additional consumer protections and responsible gaming for any future expansion of gambling.

#### Considerations

- For online gambling developers and vendors: If online gambling is legalized, require that third-party vendors include strong consumer protections such as:
  - » the ability to track time and money played;
  - » blocking oneself from playing for a period;
  - » not receiving promotional emails or texts; and
  - » not marketing to youth under 18 years.
- Ensure that commercial online vendors contribute equitable, proportionate funding for problem gambling and consumer protections, to be designated to the state problem gambling account.

### 4. Sustaining Attention on Problem Gambling

Following the submission of this 2022 PGTF Final Report, there will be no formal venue for governmental, non-governmental and Tribal stakeholders to discuss critical and emergent issues, most notably to assess gaps and needs for achieving comprehensive treatment, prevention, awareness, and outreach services. An ongoing group is needed to meet the challenges in this dynamic issue area. Such a statewide committee could host a roundtable or conference periodically on critical problem gambling policy and program issues.

#### Consideration

Establish a new statewide committee on problem gambling either formally through state law or informally to tackle critical and emergent issues in the sphere of problem gambling.

# 7 | Problem Gambling Task Force Structure and Process

## Task Force Offers Deep Experience and Perspective

In 2019, the Washington State Legislature awarded proviso funding of \$100,000 to WSGC to initiate and hire a facilitator for a joint legislative task force. The goal of the task force was to assess existing outreach, prevention, and treatment resources for problem gambling and gambling disorder to determine if these services are adequate to meet existing need or should be expanded to reduce the number of people impacted. Due to the behavioral health impacts of problem gambling and gambling disorder, WSGC, in agreement with HCA, determined that HCA/DBHR would be more appropriate as the lead agency role with the PGTF. Through an interagency agreement in Winter 2019, WSGC transferred funding to the State Program with HCA/DBHR, which then contracted with a facilitator, Uncommon Solutions, Inc. (Appendix D: PGTF Proviso – HB 1109 Section 729)

PGTF membership was based on the proviso requirements and included legislators, state agencies, non-profit organizations, Tribal representatives, community members, representatives from commercial and Tribal gaming, and clinical professionals. In partnership with the Gambling Commission, HCA/DBHR recruited members to fill the task force positions.<sup>109</sup>

*Per the proviso, the PGTF was responsible for reviewing:*

- Findings of WSGC’s 2019 Problem Gambling Study and Report submitted to the Legislature in spring 2019.
- Existing prevention, treatment, and recovery services offered by Washington State public, private, and nonprofit entities.
- Existing programs, services, and treatment offered in other states and by the Federal government.

*PGTF members were charged with making recommendations to the Washington State Legislature addressing:*

- How to proceed with a study measuring adult participation in gambling and the prevalence of problem gambling and gambling disorder in Washington State.
- If Washington State should expand state funding for prevention, treatment, and recovery.
- What steps the state should take to improve current licensing and certification of problem gambling health care providers to meet the current and projected demand for services.
- Identifying additional problem gambling areas for consideration and associated actions needed.

The PGTF launched in January 2020 and completed their work in October 2022. Beginning in March 2020, with the onset of the COVID-19 pandemic, all meetings were held online. Members attended quarterly task force meetings from 2020 through October 2022. Topic-specific workgroups met monthly from 2020 through 2021 to surface and hone priorities related to problem gambling prevention, outreach, treatment, recovery, and research. With approval of task force members, staff convened a new Final Legislative Report Workgroup in 2022 to build on the priorities, help craft clear recommendations, and review report drafts. (Appendix E: PGTF Roster and Appendix F: PGTF Charter)

## **PGTF Roles**

### *Chair and Vice Chair*

WSGC Commissioner Julia Patterson, presided at all PGTF meetings. Vice Chair, Brad Galvin, assumed duties of the Chair in Julia's absence. They direct PGTF business, including agenda setting and review of the required legislative reports.

### *Tribal Nations*

PGTF members acknowledged that PGTF Tribal representatives attended on behalf of Federally Recognized Indian Tribes in Washington State, which are sovereign nations, each in a government-to-government relationship with Washington State.

### *Core Group*

The Core Group acted as the PGTF steering committee. The Core Group was responsible for setting the quarterly meeting agendas and guiding overall Task Force direction. The eight-member group consisted of PGTF Chair and WSGC Commissioner Julia Patterson,

Vice Chair Brad Galvin, Senator Steve Conway, State Representative Shelley Kloba, WSGC Executive Director Tina Griffin, Problem Gambling Program Manager Roxane Waldron, and Uncommon Solutions, Inc. facilitators Vic Colman and Meg O'Leary. The group continued to meet regularly through 2022.

## **Workgroups**

Three workgroups convened in April 2020 to delve deeper into three key themes identified at the January 2020 PGTF launch:

- Access to Care, Treatment, and Recovery (CTR)
- Prevention and Outreach (PO)
- Research and Data (RD)

### *CTR, PO, and RD Workgroups*

The CTR, PO, and RD workgroups met online monthly from April 2020 through October 2021. Each workgroup developed priorities related to their focus areas. In June 2020 and September 2020, the workgroups presented recommendations to the full PGTF for further consideration, refinement, and initial prioritization. The workgroup priorities developed in 2020 were included in the Interim PGTF Report and became the focus for the workgroup meetings in 2021. The CTR, PO, and RD workgroups reconvened in February 2021 to continue discussions and refine their priorities by exploring timelines and phasing, anticipated fiscal impacts, and preliminary Prevalence Study results. These priorities were the foundation from which the final legislative recommendations took shape.



### *AP Workgroup*

In October 2020, a new Advocacy and Policy (AP) workgroup was convened to establish a liaison between the PGTF and partners who can help champion and amplify PGTF recommendations. They did not develop recommendations. The AP workgroup met as needed from 2020 through 2022 to support the PGTF and keep an eye on policy related opportunities to guide, leverage, and illuminate the PGTF's recommendations.

### *FLR Workgroup*

In March 2022, a new Final Legislative Report (FLR) workgroup was launched to streamline the workgroup process, winnowing the multi-workgroup process down to a single workgroup focused on clarifying the recommendations for a final task force vote, and commenting on the draft report before submittal to the legislature in December 2022. The FLR workgroup was comprised of at least one member from each existing CTR, PO, and RD workgroup. In addition, select members of the CTR, PO, and RD workgroups agreed to be on-call Subject Matter Experts, helping draft and review sections of the report.

### **Workgroup Priority Setting**

The PGTF developed a very specific approach for its CTR, PO, and RD workgroup processes from 2020 through 2021. Led by the two facilitators from Uncommon Solutions, Inc. and the HCA Problem Gambling Program Manager, the workgroups were charged with developing a full slate of actionable strategies. The actionable strategies developed by the three workgroups were the basis of the 2021 Interim Report to the Legislature and the foundation for the recommendations highlighted in this 2022 Final Report to the Legislature.

### **Final Vote and Unanimous Approval of Recommendations**

Throughout the two-year PGTF process, the full task force was kept apprised of the timeline and milestones and were invited to review and comment on the priorities and recommendations surfaced by the workgroups. In 2022, working closely with project staff and the Core Group, FLR workgroup members help craft a list of proposed recommendations for final PGTF approval. PGTF voting members voted on the proposed recommendations at the final quarterly meeting on October 19, 2022. Voting members who were not present at the meeting were invited to vote via an online poll. The vote in favor of the PGTF recommendations reflected in this report was unanimous among the 17 voting members who voted. Three voting members did not vote, and HCA abstained from voting entirely because HCA managed the Problem Gambling Task Force contract.

# END NOTES

- 1 Massachusetts, Oregon, Iowa, Ohio, Nevada, New York are among states with more comprehensive problem gambling programs.
- 2 Current funding allows an average of 350 clients to be treated each year (with an average of 1 assessment and 16-17 clinical treatment sessions).
- 3 WA State Certified Gambling Counselors are certified either by the WA State Gambling Counselor Certification Committee (WSGCCC) or by the International Gambling Counselor Certification Board and must meet requirements of WAC 246-341-0754.
- 4 From Dr. Rachel Volberg, Gemini Research: "It would be advisable to conduct a replication of the Washington State Adult Problem Gambling Survey in 3 to 5 years. Measuring the same behaviors and using the same methods employed in the Washington State Adult Problem Gambling Survey at subsequent points in time will be useful in monitoring changes over time in gambling attitudes, awareness of problem gambling services, gambling participation, and problem gambling prevalence in the state."
- 5 Other ECPG Prevention initiatives include offering evidenced-based curriculum training such as Stacked Deck facilitator-training and working with a Native American Advisory Committee to create a gambling/gaming prevention story and program for Native American youth. ECPG is also the largest provider in WA state for Responsible Gaming training for gaming operators.
- 6 There may be additional private problem gambling treatment that requires private insurance or self-pay (for those who can afford it). However, the PGTF focused on resources that have fewer barriers to accessing services.
- 7 [ECPG List of Certified Gambling Counselors](#). As of December 2022, there are 32 CGCs, serving in 39 locations; at least 3/4ths provide telehealth services. Nine CGC's are employed by Tribes. Services may be provided in English and additional languages.
- 8 [Dept of Health Facility Search Engine](#) (excluding those who are not actively certified and serving clients)
- 9 [Supporting Responsible Gaming](#) - Washington Indian Gaming Association
- 10 Not including the ~3600 Lottery point-of-sale locations, nor licensed pull-tabs, raffles, etc. operators.
- 11 One-hour drive time is a common unit of measurement for accessibility to treatment services and gambling venues
- 12 Certified Gambling Counselors may work at behavioral health agencies and/or be sole providers
- 13 Muckleshoot, Tulalip, Spokane, Stillaguamish, Suquamish, Swinomish, and Yakama Tribal behavioral health agencies employ one or more Certified Gambling Counselors (as of October 2022).



# END NOTES

14 A licensed mental health and/or substance use disorder facility may be licensed as a certified-problem gambling agency if it meets requirements in WAC 246-341-0754.

15 The [HCA Ten Regional Service Areas](#) was re-created to match the GIS-generated versions for this analysis (no change to region boundaries).

16 For readability, this map does not include the ~3,600 locations [WA Lottery](#) points-of-sale locations or locations for other forms of licensed commercial gambling (pull-tabs, bingo, raffles). See also [Organizational Licensees Washington State Gambling Commission](#)

17 [WAC 246-341-0754](#) governs ‘problem gambling agencies,’ defines basic requirements for Certified Gambling Counselors, and defines the scope of the Washington State Gambling Counselor Certification Committee. Revised July 1, 2021.

18 To become a DOH-certified problem gambling behavioral health agency, an agency must be licensed by DOH as a mental health and/or substance use disorder facility and employ a Certified Gambling Counselor in good standing. If a DOH-licensed agency meets both those requirements, then that agency is eligible to apply to be a ‘DOH-certified problem gambling agency.’ This pertains to Tribal and non-Tribal behavioral health agencies.

19 [ESHB 1109 Section 729](#), item (ii) (approved in biennial state operating budget 2019-2021 (orig.))

20 In accordance with RCW 71.24.025(26)(c); Section 408(a) of the Indian Health Care Improvement Act, 25 U.S.C. § 1647a(a); and 42 C.F.R. § 431.110 (per Tribal Attestation form) and in concordance with the Government-to-Government relationship between Tribes and the State of Washington, a Tribe may elect to submit a Tribal Attestation for behavioral health services. The attestation confirms that a Tribe’s behavioral health agency meets the state’s minimum standards and for specific services, as identified by the Tribe on the form (including problem gambling treatment, if selected). Once in force, DOH issues the Tribe a behavioral health license, and include the Tribe on the current list of licensed behavioral health agencies. In these cases, DOH does not conduct regulation or enforcement activities. See <https://doh.wa.gov/sites/default/files/legacy/Documents/Pubs//346114.pdf> (Tribal Attestation form/DOH

21 [WA Tribes Care](#) - Washington Indian Gaming Association

22 Additionally, having or not having a Certified Gambling Counselor on staff is not necessarily a quality indicator of problem gambling treatment services provided by Tribal behavioral health agencies.

23 Certified Gambling Counselor: A licensed mental health and/or substance use disorder professional who has been certified either by the WA State Gambling Counselor Certification Committee or by the International Gambling Counselor Certification Board to be a Certified Gambling Counselor. On-going CE hours are required to maintain this certification. (WAC 246-341-0754). DOH-certified problem gambling agency: An existing licensed mental health and/or substance use disorder agency that has fulfilled the requirements, applied, and been granted a problem gambling agency certification. Requirements include 1) employing a Certified Gambling Counselor, maintain a list of resources for referral, and maintain a written procedure for the response to medical and psychi-atric emergencies. (WAC 246-341-0754). State-certified problem gambling treatment: Problem gambling treatment services offered by a Certi-fied Gambling Counselor or DOH-certified problem gambling agency.

# END NOTES

24 Based on analysis of publicly accessible population data from the American Community Survey (using ArcGIS).

25 For more on the helpline, see [ECPG](#).

26 As mentioned earlier, many Tribal behavioral health programs also offer problem gambling treatment and accept non-Tribal clients in the community.

27 In 2019-2021, the State Program received a one-time generous contribution of \$100,000 from the Recovery Cafe Network and Snoqualmie Tribe. In 2021-2023, HCA was granted an additional appropriation of \$150,000 from the state problem gambling account—if requesting increase appropriation continues in future budget cycles, the State Program Manager estimates that the ‘cushion’ in the state problem gambling account is likely to be depleted within one-to-two budget cycles. A longer-term solution is needed.

28 Another factor is that potential new agencies can be overwhelmed with the contract-ing process. The State Program coordinates with HCA’s Contracting Unit to streamline this process.

29 Per WAC, the State PG Program can only contract with providers meeting requirements in [WAC 182-100-0100](#) – State Problem Gambling Program.

30 As of this writing, the State Program has eleven (11) contracts in force (seven are DOH-certified problem and four are Certified Gambling Counselors who are sole providers).

31 This approach has been adopted by at least one other state program, and Nevada’s state program funding appears to be moving that direction (based on discussion with Nevada staff in Spring 2022).

32 Substance Abuse and Mental Health Services Administration (SAMHSA) Brochure (PEP12-RECDEF) NWITC – Squaxin Island Tribe

33 [NWITC-Squaxin Island Tribe](https://squaxinland.org/northwest-indian-treatment-center/): <https://squaxinland.org/northwest-indian-treatment-center/>

34 [Washington Recovery Alliance](https://washingtonrecoveryalliance.org/about-us/): <https://washingtonrecoveryalliance.org/about-us/>

35 [HCA Recovery Support](http://www.hca.wa.gov/free-or-low-cost-health-care/i-need-behavioral-health-support/what-recovery-support): [www.hca.wa.gov/free-or-low-cost-health-care/i-need-behavioral-health-support/what-recovery-support](http://www.hca.wa.gov/free-or-low-cost-health-care/i-need-behavioral-health-support/what-recovery-support)

36 (1) Evergreen Council on Problem Gambling recovery support resources include a Recovery Community Advisory Committee, podcast episodes, live-stream and on-demand free videos on YouTube, social media content and Twitter Chat Tuesdays during PGAM, awareness campaigns, promotion of healthy activity alternatives to gambling, and a host of training opportunities. Common recovery services topic areas and frequent requests include working with individuals in recovery from gambling, recovery resources, and family recovery needs. (2) Other recovery support resources include social media gambling recovery groups and chat forums, gambling recovery podcasts, self-help website and workbooks, and other gambling support groups not associated with GA/Gam-Anon. (3) ECPG hosts a Recovery Community Advisory Committee as well as podcasts, on-demand content on YouTube, and other recovery-related resources.

# END NOTES

37 In Washington State in 2021, about 80 percent of gambling receipts came from Tribal Gaming. Tribes also provide funding both internally and externally for problem gambling treatment and other related problem gambling services. As the total amount spent by Tribes and the total number of clients served is not available, this section is focused on the State Program funding only, as this information is publicly available. Unfortunately, this does create a gap in knowledge that doesn't fully acknowledge the contributions that Tribes make towards problem gambling services, both in terms of treatment and other services provided and the total amounts donated.

38 [2021 Survey of Publicly Funded Problem Gambling Services in the United States](#) – National Association of Administrators for Disordered Gambling Services (NAADGS).

39 The overall amount of funding makes a big difference. Pennsylvania's 2021 problem gambling budget was \$6.37 million, compared to Washington State's 2021 budget of \$730,500. So, despite that the percentage spent by Pennsylvania on treatment was much lower, the overall amount of funding was more than Washington State spent on treatment during the same period (PA=\$573,300 vs. WA=\$511,350).

40 [2021 Survey of Publicly Funded Problem Gambling Services in the United States](#) – National Association of Administrators for Disordered Gambling Services (NAADGS).

41 Public awareness and prevention = \$26,000 annually (contracted with ECPG for Problem Gambling Awareness Month)

42 Problem Gambling Severity Index score = 5 or above

43 Based on the data, we know that not everyone who needs problem gambling support in Washington State is able to access care, treatment, and recovery services.

44 Tribes are generally known to provide holistic whole-person wraparound behavioral health services, so segregating out specific treatment services for problem gambling would make this process very complex and likely underrepresent the impact of Tribal behavioral health in mitigating problem gambling through their services. Many Tribal casinos have also undertaken Responsible Gaming training with their staff and provide materials with problem gambling resources on site. Tribes, as sovereign nations, are not required to report information about the number and type of problem gambling services provided (including number of clients served, overall spending on treatment, or percentage of spending on treatment versus other services).

45 The completed [2021 Prevalence Study](#) report provided data that inform the recommendations by the PGTF and planning for the State Problem Gambling Program. 2021 Washington State Adult Problem Gambling Prevalence Study Results (June 30, 2022). See Chapter 5 for details.

46 [2021 Healthy Youth Survey](#)

47 [ECPG List of Certified Gambling Counselors](#)

48 Lottery point-of-sale locations are not included in gambling locations analysis as there are ~3600 statewide.

# END NOTES

- 49 National Association of Administrators for Disordered Gambling Services (formerly APGSA)
- 50 [American Community Survey \(ACS\)](#)
- 51 Washington State Agencies: HCA, DOH, WSGC, WHRC, WA Lottery, OFM, and others
- 52 [Evergreen Council on Problem Gambling](#)
- 53 Welte JW, Barnes GM, Tidwell MO, Hoffman JH, Wiczorek WF. The Relationship Between Distance from Gambling Venues and Gambling Participation and Problem Gambling Among U.S. Adults. *J Gambli Stud.* 2016 Dec;32(4):1055-1063. doi: 10.1007/s10899-015-9583-5. PMID: 26615561.
- 54 This may require a change in rules/WAC. Further study is needed to confirm.
- 55 Integrated treatment is the use of multiple treatments for two or more conditions, like pharmacotherapy and psychotherapy. Integrated treatment for co-occurring disorders has been shown to be more effective than treatment for individual disorders with separate treatment plans.
- 56 Problem gambling services include prevention, outreach, awareness, clinical training, education, workforce development, treatment, and recovery support services.
- 57 [2021 WA State Adult Problem Gambling Study report \(pg 34\)](#)
- 58 WAC 246-341-0610 Clinical – Assessment, filed 4/16/19, effective 5/17/19, prior to its revision on July 1, 2021, did require that all assessments include (2)(h) Problem and pathological gambling history. While this was removed in the July 2021 revision, it is not the same as what this report proposes, which is to include an evidenced-based and validated problem gambling screening tool, as opposed to a general and undefined analysis of gambling history.
- 59 2021 Healthy Youth Survey results (9.4 percent reported gambling in the past year, with 6.8 percent of those who gambled reporting negative impacts from their gambling). It is unlawful for any person under the age of eighteen to play in authorized gambling activities including, but not limited to, punchboards, pulltabs, or card games, or to participate in fundraising events. Persons under the age of eighteen may play bingo, raffles, and amusement game activities only as provided in commission rules. See RCW 9.46.228(1).
- 60 The Lottery is not required by law to take such measures but does so voluntarily in recognition of their unique role as a state agency and purveyor of a gambling product.
- 61 This strategy was proposed by PGTF Chair, Commissioner Julia Patterson, on November 30, 2022 and December 1, 2022 in WA State legislative committee work sessions.
- 62 [Problem Gambling Diversion Programs: A review of Implementations and Challenges](#), by Frank Song
- 63 [New Jersey Considers Specialized Court for Gambling Addicts](#) - The Crime Report
- 64 [Ohio Explores Diversion Court For Problem Gamblers Who Commit Crimes](#)

# END NOTES

- 65 As noted earlier in the PG Services Gap Analysis, 11 areas within the state have already been identified as needing access to problem gambling treatment by Certified Gambling Counselors.
- 66 [RCW 41.05.750](#) and [RCW 41.05.751](#)
- 67 [ESHB 1031](#) (Chapter 369, Laws of 2005)
- 68 [RCW 67.70.340\(3\) \(a\)\(b\)](#)
- 69 Does not include \$500,000 appropriated for 2021 Washington State Adult Problem Gambling Prevalence Study.
- 70 [WAC 230-23-030](#)
- 71 It's important to note that since there is no federal funding for problem gambling services, the shortage in funding is felt across stakeholders providing problem gambling services. These services are not yet integrated into behavioral health services provided by public funding, and many of the programs and organizations represented on the Task Force are impacted.
- 72 Original 2021-2023 appropriation is \$1.463 million; \$150,000 was added by additional appropriation to close the treatment funding gap in this biennium. That \$150,000 is not included here.
- 73 A 'real life' outcome would be if the client's quality of life had improved as measured before, during, and after treatment, as compared to a proxy measure such as 'number of months client has been in treatment.' An example of a quality of life clinically administered instrument is the [OO-45.2 tool](#).
- 74 "Responsible Gaming programs operate in compliance and in parallel with state laws and regulations on responsible gaming, including the funding and provision of problem gambling services. In addition, many gaming businesses voluntarily implement programs with a range of responsible gaming measures that go beyond what is required by law or regulation." ([American Gaming Association](#))
- 75 [WAC 230-23-030](#) governs licensee responsibilities under the statewide self-exclusion programs
- 76 [International Center for Responsible Gaming](#)
- 77 Gaming Industry Employees' Responses to Responsible Gambling Training: A Public Health Imperative, June 2011 Journal of Gambling Studies 28(2):171-91 (D. Laplante, H. Gray, et.al.)
- 78 [NASPL-NCPG](#) - Responsible Gambling Verification program for lottery organizations
- 79 [WAC 230-23-030](#) governs licensee responsibilities under the statewide self-exclusion programs.
- 80 The HYS is normally conducted in even years, but due to COVID, the 2020 survey was delayed until 2021.
- 81 [RCW 9.46.228](#)

# END NOTES

82 [WSGCCC](#)

83 Washington State Department of Health – Health Care Provider Credential Database (captured October 20, 2022: [data.wa.gov](https://data.wa.gov))

84 Ibid. Of these, 13.7 percent (4,252) are licensed Substance Use Disorder Professionals (SUDP) or SUDPs-in-training.

85 The State Program and ECPG are both active, non-voting, members of the WSGCCC.

86 [Certified Gambling Counselor Manual](#) pg. 8

87 [Certified Gambling Counselor Manual](#) pg. 31

88 [Center for Medicare and Medicaid Services](#)

89 The State Fiscal Year (SFY) runs from July 1 to June 30.

90 In 2020, DBHR considered raising treatment reimbursement rates by 10 percent, but leadership decided against it because of the impact to availability and access to treatment services.

91 <https://pubmed.ncbi.nlm.nih.gov/23297170/>

92 [RCW 41-05-751](#)

93 [Medicaid in Washington](#)

94 Historically, the State Program funded, in part, the Problem Gambling Helpline. However, after implementation of the Washington Recovery Help Line, funding for the Problem Gambling Helpline was discontinued.

95 [ECPG Problem Gambling Helpline](#)

96 [2021 WA State Adult Problem Gambling Prevalence Study](#) report

97 Consultation group included staff from the HCA/DBHR, the Evergreen Council on Problem Gambling, the University of WA, the WA State University Social & Economic Sciences Research Center, and Dr. Rachel Volberg, Gemini Research.

98 19.2% response rate is within the 18-20% anticipated response rate for this multi-modal survey.

99 In problem gambling prevalence surveys, individuals are classified based on their responses to a valid and reliable problem gambling assessment instrument. The Problem Gambling Severity Index (PGSI) has been the dominant instrument used to assess problem gambling prevalence rates world-wide since 2005 and was selected for use in the 2021 Prevalence Study.

# END NOTES

100 For the purposes of the 2021 Prevalence Study, a designation of 'having gambled' refers to participation in any form of gambling, not as a measure of frequency or intensity.

101 Individuals could select one or more gambling activities.

102 Only statistically significant findings are reported here. Based on comparisons of confidence intervals (chi-square methodology). Some subgroups were too small to determine if findings were significantly different within the demographic category.

103 Based on Question 21 only (2021 WA State Adult Problem Gambling Prevalence Study).

104 Using the point estimate of 1.5 percent, with a confidence interval of 1.1 percent to 1.8 percent.

105 This study is not constructed to determine causation, only correlation. Studies that seek causation are complex and generally conducted by highly resourced research institutes, universities, or organizations.

106 Based on response to Question 21 about participation in gambling online (cross-tabbed with 'all gamblers').

107 Additional data was collected to look at the prevalence among all respondents (both 'gamblers' and 'non gamblers') of gambling online, gaming online (only), and activities that are in the 'grey area' where online gambling and gaming overlap. This data has not yet been fully analyzed, but preliminary analysis indicates that many more respondents said they had participated in activities that are known to be online gambling than reported online gambling earlier in the survey. Although HCA does not currently have specific plans to analyze this data further, this section of the survey is an area ripe for further study and analysis.

108 The WA State Gambling Commission highly restricts gambling for people under 18.

109 In Fall 2019, the Health Care Authority's Office of Tribal Affairs sent Dear Tribal Leader (DTL) letters to all 29 federally recognized Tribes, inviting each Tribe to designate an individual to participate on the Tribe's behalf.

# APPENDICES

- A Current & Proposed Budget Models –  
WA State Problem Gambling Program
- B Availability of Gambling & Problem Gambling Treatment  
in WA State – GIS Maps
- C Recovery Support Services in WA State
- D PGTF Proviso - HB 1109 Section 729 (2019)
- E PGTF Roster
- F PGTF Charter
- G WA State and National Certified Gambling Counselors Location
- H Impact of COVID-19 on Prevalence Study
- I Problem Gambling Severity Index
- J Data Sources and Works Cited
- K ECPG Glossary for PGTF
- L ECPG Additional Resources
- M Timeline of Gambling and Problem Gambling Services in WA State



