PROPOSED RULE MAKING
CR-102 (December 2017)
(Implements RCW 34.05.320)
Do NOT use for expedited rule making

Agency: Health Care Authority

☑ Original Notice
☐ Supplemental Notice to WSR _____
☐ Continuance of WSR _____

☑ Preproposal Statement of Inquiry was filed as WSR 21-20-069; or
☐ Expedited Rule Making--Proposed notice was filed as WSR _____; or
☐ Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1); or
☐ Proposal is exempt under RCW ______.

Title of rule and other identifying information: (describe subject) 182-535-1270, Oral health connections pilot project

Hearing location(s):

<table>
<thead>
<tr>
<th>Date:</th>
<th>Time:</th>
<th>Location: (be specific)</th>
<th>Comment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 22, 2022</td>
<td>10:00 AM</td>
<td>The Health Care Authority (HCA) remains closed in response to the coronavirus disease 2019 (COVID-19) public health emergency. Until further notice, HCA continues to hold public hearings virtually without a physical meeting place. This promotes social distancing and the safety of the residents of Washington State</td>
<td>To attend the virtual public hearing, you must register in advance for this public hearing: <a href="https://zoom.us/webinar/register/WN_HfseMlFyQGq25WaexhZSg">https://zoom.us/webinar/register/WN_HfseMlFyQGq25WaexhZSg</a> If the link above opens with an error message, please try using a different browser. After registering, you will receive a confirmation email containing information about joining the public hearing</td>
</tr>
</tbody>
</table>

Date of intended adoption: Not sooner than February 22, 2022  (Note: This is NOT the effective date)

Submit written comments to:
Name: HCA Rules Coordinator
Address: PO Box 42716, Olympia WA 98504-2716
Email: arc@hca.wa.gov
Fax: (360) 586-9727
Other: By (date) February 22, 2022

Assistance for persons with disabilities:
Contact HCA Rules Coordinator
Phone: (360) 725-1306
Fax: (360) 586-9727
TTY: Telecommunication Relay Services (TRS): 711
Email: arc@hca.wa.gov
Other: By (date) February 4, 2022
Purpose of the proposal and its anticipated effects, including any changes in existing rules: The agency is amending these rules to extend the program through December 31, 2023. Additionally, the agency is removing age limits and dual eligibility exclusions. The enhanced rate will now include an additional adult prophylaxis, an additional fluoride varnish application, two periodic exams, and two silver diamine fluoride treatment. This proposal was initially filed under WSR 22-02-073 on January 5, 2022, and withdrawn under WSR 22-03-074 on January 18, 2022. The agency revised the proposed text and removed the language in subsection (1) “…..or until pilot funds are exhausted, whichever comes first.”

Reasons supporting proposal: See purpose.

Statutory authority for adoption: RCW 41.05.021, 41.05.160

Statute being implemented: RCW 41.05.021, 41.05.160

Is rule necessary because of a:
- Federal Law? ☐ Yes ☒ No
- Federal Court Decision? ☐ Yes ☒ No
- State Court Decision? ☐ Yes ☒ No

If yes, CITATION:

Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters: N/A

Name of proponent: (person or organization) Health Care Authority ☒ Governmental

Name of agency personnel responsible for:

<table>
<thead>
<tr>
<th>Name</th>
<th>Office Location</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drafting:</td>
<td>Valerie Freudenstein</td>
<td>PO Box 42716, Olympia WA 98504-2716</td>
</tr>
<tr>
<td>Implementation:</td>
<td>Pixie Needham</td>
<td>PO Box 45506, Olympia, WA 98504-5506</td>
</tr>
<tr>
<td>Enforcement:</td>
<td>Pixie Needham</td>
<td>PO Box 45506, Olympia, WA 98504-5506</td>
</tr>
</tbody>
</table>

Is a school district fiscal impact statement required under RCW 28A.305.135? ☐ Yes ☒ No

If yes, insert statement here:

The public may obtain a copy of the school district fiscal impact statement by contacting:
- Name:
- Address:
- Phone:
- Fax:
- TTY:
- Email:
- Other:

Is a cost-benefit analysis required under RCW 34.05.328?

☐ Yes: A preliminary cost-benefit analysis may be obtained by contacting:
- Name:
- Address:
- Phone:
- Fax:
RCW 34.05.328 does not apply to Health Care Authority rules unless requested by the Joint Administrative Rules Review Committee or applied voluntarily.

Regulatory Fairness Act Cost Considerations for a Small Business Economic Impact Statement:

This rule proposal, or portions of the proposal, may be exempt from requirements of the Regulatory Fairness Act (see chapter 19.85 RCW). Please check the box for any applicable exemption(s):

☐ This rule proposal, or portions of the proposal, is exempt under RCW 19.85.061 because this rule making is being adopted solely to conform and/or comply with federal statute or regulations. Please cite the specific federal statute or regulation this rule is being adopted to conform or comply with, and describe the consequences to the state if the rule is not adopted.

Citation and description:

☐ This rule proposal, or portions of the proposal, is exempt because the agency has completed the pilot rule process defined by RCW 34.05.313 before filing the notice of this proposed rule.

☐ This rule proposal, or portions of the proposal, is exempt under the provisions of RCW 15.65.570(2) because it was adopted by a referendum.

☐ This rule proposal, or portions of the proposal, is exempt under RCW 19.85.025(3). Check all that apply:

☐ RCW 34.05.310 (4)(b) (Internal government operations)

☐ RCW 34.05.310 (4)(c) (Incorporation by reference)

☐ RCW 34.05.310 (4)(d) (Correct or clarify language)

☐ RCW 34.05.310 (4)(e) (Dictated by statute)

☐ RCW 34.05.310 (4)(f) (Set or adjust fees)

☐ RCW 34.05.310 (4)(g) ((i) Relating to agency hearings; or (ii) process requirements for applying to an agency for a license or permit)

☐ This rule proposal, or portions of the proposal, is exempt under RCW ______.

Explanation of exemptions, if necessary:

COMPLETE THIS SECTION ONLY IF NO EXEMPTION APPLIES

If the proposed rule is not exempt, does it impose more-than-minor costs (as defined by RCW 19.85.020(2)) on businesses?

☒ No Briefly summarize the agency’s analysis showing how costs were calculated. The proposed rule does not impose any costs on businesses.

☐ Yes Calculations show the rule proposal likely imposes more-than-minor cost to businesses, and a small business economic impact statement is required. Insert statement here:

The public may obtain a copy of the small business economic impact statement or the detailed cost calculations by contacting:

Name: Wendy Barcus
Title: HCA Rules Coordinator

Date: January 18, 2022
Signature: Wendy Barcus
WAC 182-535-1270 Oral health connections pilot project. (1) The oral health connections pilot project is effective for dates of service from January 1, 2019, through December 31, 2023.

(2) The purpose of the oral health connections pilot project is to test the effect that enhanced oral health services have on the overall health of diabetic or pregnant medicaid clients receiving services in Cowlitz, Spokane, and Thurston counties.

(3) To be eligible for the oral health connections pilot project, a client must ((be)):

(a) ([Age twenty-one to sixty-four;]

(b) [Pregnant, diabetic, or both]) Be diabetic and age 21 or older; or

(b) Be pregnant and 16 years of age or older; and

(c) Be receiving services under subsection (6) of this section in Cowlitz, Spokane, or Thurston counties; and

(d) Be referred by a nondental primary health care provider, managed care organization, or a designated community organization to a qualified oral health connections pilot project dental provider. For the purposes of this section, a designated community organization is defined as an auxiliary group or groups that partner with the agency and Arcora foundation to implement the oral health connections pilot project or provide an attestation showing the client has been diagnosed with diabetes or pregnancy, or both.

(4) A client who qualifies for the oral health connections pilot project due to pregnancy may continue receiving services through the duration of the maternity cycle as defined in WAC 182-533-0315, but must ((actually)) be pregnant at the start of services.

(5) The following are excluded from the oral health connections pilot project:

(a) Family planning only (and TAKE CHARGE) programs under chapter 182-532 WAC; and

(b) Medical care services (MCS) program under WAC 182-508-0005 (and

(c) Clients who are enrolled in both medicaid and medicare).

(6) Under the oral health connections pilot project, the medicaid agency pays an enhanced rate for the following services:

(a) One comprehensive oral exam, per client, per provider in a five-year period;

(b) One periodic exam, per client, per provider, every six months;

(c) One complete series of intraoral radiographic images per client in a three-year period;

(d) Four bitewing X-rays (radiographs) once per client in a twelve-month period;

(e) One adult prophylaxis, per client, every six months;

(f) Periodontal scaling and root planing - Four or more teeth per quadrant, once per quadrant per client in a two-year period;

(g) Periodontal scaling and root planing - Three or more teeth per quadrant, once per quadrant per client in a two-year period;

(h) Up to three additional periodontal maintenance visits in a twelve-month period. At least ninety days must elapse following periodontal scaling and root planing or at least
((ninety)) 90 days must elapse following initial periodontal maintenance, and then every ((ninety)) 90 days afterwards for a total of three additional periodontal maintenance visits per eligible client in a ((twelve-month)) 12-month period;

(i) One fluoride varnish application, per client, every six months; and

(j) One silver diamine fluoride treatment, per tooth, per client, every six months.

(7) The services listed in subsection (6) of this section are the only services the agency pays at the enhanced rate. The agency pays for all other covered dental services at the standard rate.

(8) To receive the enhanced rate, dental providers must:

(a) Be enrolled to participate in the oral health connections pilot project;

(b) Meet the qualifications in WAC 182-535-1070;

(c) Provide the services in Cowlitz, Spokane, or Thurston counties; and

(d) Complete training designed specifically for the oral health connections pilot project.

(9) The agency assigns a special identifier to providers who complete the training in subsection (8)(d) of this section which allows them to receive the enhanced rate.