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 21-23-099; 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) 182-501-0215 Wraparound with intensive services (WISe)

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>March 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_gEBGwLk6Qxqjm9TlhCYM8A">https://zoom.us/webinar/register/WN_gEBGwLk6Qxqjm9TlhCYM8A</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 March 23, 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) March 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) March 11, 2022
Purpose of the proposal and its anticipated effects, including any changes in existing rules: The agency is revising this rule to remove the restriction that the WISe program only applies to Medicaid clients and add language to clarify the program is for those clients eligible for coverage under WAC 182-505-0210.

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: Thurston County Superior Court in A.G.C. v. Washington State Health Care Authority, no. 21-2-00479-34

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: Valerie Freudenstein</td>
<td>PO Box 42716, Olympia WA 98504-2716</td>
<td>360-725-1344</td>
</tr>
<tr>
<td>Implementation: Annette Schuffenhauer</td>
<td>PO Box 45502, Olympia, WA 98504-5502</td>
<td>360-725-1254</td>
</tr>
<tr>
<td>Enforcement: Annette Schuffenhauer</td>
<td>PO Box 45502, Olympia, WA 98504-5502</td>
<td>360-725-1254</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 ☒ No

If 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)(e) (Dictated by statute)
  - ☐ RCW 34.05.310 (4)(c) (Incorporation by reference)
  - ☐ RCW 34.05.310 (4)(f) (Set or adjust fees)
  - ☐ RCW 34.05.310 (4)(d) (Correct or clarity language)
  - ☐ 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 filing does not impose a disproportionate cost impact on small 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: 
  Address: 
  Phone: 
  Fax: 
  TTY: 
  Email: 
  Other: 

**Date:** February 15, 2022

**Name:** Wendy Barcus

**Title:** HCA Rules Coordinator

**Signature:**
WAC 182-501-0215 Wraparound with intensive services (WISe). (1) Wraparound with intensive services (WISe) is a service delivery model that provides comprehensive behavioral health covered services and support to:
   (a) (Medicaid-eligible) Clients age (twenty) 20 or younger with complex behavioral health needs who are eligible for coverage under WAC 182-505-0210; and
   (b) Their families.
(2) The authority, the managed care organizations, and the WISe provider agencies must use, continue to use, and substantially comply with the WISe quality plan (WISe QP) for the delivery of WISe. The purpose of the WISe QP is to:
   (a) Provide a framework for quality management goals, objectives, processes, tools, and resources to measure the implementation and success of the WISe service delivery model; and
   (b) Guide production, dissemination, and use of measures used to inform and improve WISe service delivery.
(3) The WISe QP, as may be amended from time to time, is incorporated by reference and is available online at https://www.hca.wa.gov/billers-providers-partners/behavioral-health-recovery/wraparound-intensive-services-wise.