PROPOSED RULE MAKING



CR-102 (June 2024) (Implements RCW 34.05.320)
Do NOT use for expedited rule making

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DATE: August 05, 2024

TIME: 10:58 AM

WSR 24-16-113

Agency: Health Care A	Authority								
□ Original Notice									
☐ Supplemental Noti	ce to WSR								
☐ Continuance of WS	SR								
□ Preproposal Stater	ment of Inq	uiry was filed as WSR 24-1	13-063	; or					
☐ Expedited Rule Ma	kingProp	osed notice was filed as W	/SR	; or					
☐ Proposal is exemp	t under RC	W 34.05.310(4) or 34.05.33	0(1); o	r					
☐ Proposal is exemp	t under RC	W							
				82-505-0100, Monthly income standards for MAGI- he modified adjusted gross income (MAGI) methodology					
Hearing location(s):									
Date:	Time:	Location: (be specific)		Comment:					
September 10, 2024 10:00 AM The Health Care Authority I									
		public hearings virtually without a		you must register in advance:					
		physical meeting place		https://us02web.zoom.us/webinar/register/WN_ J5FUI0dEQXyGt7tux4U4Rw					
				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.					
Date of intended adop	otion: Not s	ooner than September 11, 2	2024	(Note: This is NOT the effective date)					
Submit written comm	ents to:		Assist	tance for persons with disabilities:					
Name HCA Rules Coo	ordinator		Contac	ct Johanna Larson					
Address PO Box 42716, Olympia WA 98504-2716				Phone 360-725-1349					
Email arc@hca.wa.gov				Fax 360-586-9727					
Fax 360-586-9727				TTY Telecommunication Relay Service (TRS): 711					
Other				Email Johanna.Larson@hca.wa.gov					
Beginning (date and	time) <u>Aug</u>	ust 6, 2024, 8:00 AM	Other						
By (date and time)			By (date) August 30, 2024						
its rules to increase the level. This increase is o	e income sta consistent w	indards for pregnancy and pith RCW 74.09.830 and 74.0	ostpart	y changes in existing rules: The agency is amending um groups from 193% to 210% of the federal poverty					
Reasons supporting	-	•							
,	•	RCW 41.05.021, 41.05.160							
		W 41.05.021, 41.05.160, 74.	.09.830	, 74.09.839					
Is rule necessary bec	ause of a:								
Federal Law?				☐ Yes ☒ No					
Federal Court Decision?				☐ Yes ☒ No					
State Court Decision? If yes, CITATION:				□ Yes ⊠ No					

Agency commen matters: None	ts or recommendatio	ns, if any, as to statutory language, implementation, er	nforcement, and fiscal
	ent: (person or organiz nt: □ Private. □ Publ	ation) Health Care Authority lic. ⊠ Governmental.	
Name of agency	personnel responsibl	le for:	
	Name	Office Location	Phone
Drafting	Brian Jensen	PO Box 42716, Olympia, WA 98504-2716	360-725-0815
Implementation	Kristina Bair	PO Box 42722, Olympia, WA 98504-2722	360-725-9964
Enforcement	Kristina Bair	PO Box 42722, Olympia, WA 98504-2722	360-725-9964
Is a school distri If yes, insert state	-	ment required under RCW 28A.305.135?	□ Yes ⊠ No
The public may Name Address Phone Fax TTY Email Other		chool district fiscal impact statement by contacting:	
☐ Yes: A pre Name Address Phone Fax TTY Email Other ☑ No: Pleat Administrative	se explain: RCW 34.05 Rules Review Commit	nalysis may be obtained by contacting: 328 does not apply to Health Care Authority rules unless tee or applied voluntarily.	requested by the Joint
		siness Economic Impact Statement ory Innovation and Assistance (ORIA) provides support in c	completing this part.
chapter 19.85 RC	l, or portions of the prop	posal, may be exempt from requirements of the Regulator mation on exemptions, consult the exemption guide publision(s):	
adopted solely to	conform and/or comply e is being adopted to co	proposal, is exempt under <u>RCW 19.85.061</u> because this rule with federal statute or regulations. Please cite the specific onform or comply with, and describe the consequences to the consequences the consequences the consequences to the consequences the conseque	federal statute or
defined by RCW 3	34.05.313 before filing to be sal, or portions of the	proposal, is exempt because the agency has completed the notice of this proposed rule. proposal, is exempt under the provisions of RCW 15.65.57	

☐ This rule	proposal, or portions of the proposal, is exempt	under <u>R</u> (CW 19.85.025(3). Check all that apply:
	RCW 34.05.310 (4)(b)	\boxtimes	RCW 34.05.310 (4)(e)
	(Internal government operations)		(Dictated by statute)
	RCW 34.05.310 (4)(c)		RCW 34.05.310 (4)(f)
	(Incorporation by reference)		(Set or adjust fees)
	RCW 34.05.310 (4)(d)		RCW 34.05.310 (4)(g)
	(Correct or clarify language)		((i) Relating to agency hearings; or (ii) process
			requirements for applying to an agency for a license or permit)
	proposal, or portions of the proposal, is exempt	under <u>R</u> (CW 19.85.025(4). (Does not affect small businesses).
☐ This rule	proposal, or portions of the proposal, is exempt	under R0	CW
arising from rule pertains	chapter 213, Laws of 2024 (2E2SSB 5580) that a to client program eligibility and does not impose	are codif	ule: The proposed rule implements legislative directives led at RCW 74.09.830 and 74.09.839. The proposed businesses.
	f exemptions: Check one.		and the state of t
			entified above apply to all portions of the rule proposal. exemptions identified above apply to portions of the rule
	it less than the entire rule proposal. Provide detai	,	
	proposal: Is not exempt. (Complete section 3.) N	,	· · · · · · · · · · · · · · · · · · ·
(3) Small bu	usiness economic impact statement: Complete	e this sed	ction if any portion is not exempt.
• •	n of the proposed rule is not exempt , does it imp		e-than-minor costs (as defined by RCW 19.85.020(2))
☐ No impose n	Briefly summarize the agency's minor cost analy	ysis and	how the agency determined the proposed rule did not
☐ Yes			-than-minor cost to businesses and a small business usiness economic impact statement here:
The p		onomic i	mpact statement or the detailed cost calculations by
	ame		
	ldress		
	one		
Fa TT			
	nail		
	her		
Date: Augus	et 5, 2024	Signatu	re: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Name: Wen	dy Barcus	_	Wendy Dorous
Title: HCA F	Rules Coordinator		

- WAC 182-505-0100 Monthly income standards for MAGI-based programs. (1) Each year, the federal government publishes new federal poverty level (FPL) income standards in the Federal Register found at https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines/prior-hhs-poverty-guidelines-federal-register-references.
- (a) The income standards for the following Washington apple health programs change on the first day of April every year based on the new FPL, except for subsections (2) and (3) of this section.
- (b) The agency determines income eligibility by comparing countable income ((as determined)) of the person's medical assistance unit (MAU), as determined under WAC 182-506-0010 and 182-506-0012, to the applicable income standard. Rules for determining countable income are in chapter 182-509 WAC.
- (2) Parents and caretaker relatives under WAC 182-505-0240 must have countable income equal to or below the following standards:

Medical Assistance Unit Size	1	2	3	4	5	6	7	8	9	10	11+
Income Standard	\$511	\$658	\$820	\$972	\$1,127	\$1,284	\$1,471	\$1,631	\$1,792	\$1,951	\$1,951

- (3) Parents and caretaker relatives with earned income above the limits in subsection (2) of this section are the only people who may be eligible for the transitional medical program described in WAC 182-523-0100.
- (4) Adults described in WAC 182-505-0250 who are not eligible under subsection (2) or (3) of this section must have countable income equal to or below ((one hundred thirty-three)) $\underline{133}$ percent of the FPL.
- (5) Pregnant people described in WAC 182-505-0115 must have countable income equal to or below (($\frac{182-505-0115}{1000}$) must have percent of the FPL.
 - (6) Children with countable income:
- (a) Equal to or below (($\frac{1}{2}$ two hundred ten)) $\frac{210}{210}$ percent of the FPL as described in WAC 182-505-0210 (($\frac{3}{3}$)) receive coverage at no cost.
- (b) Greater than ((two hundred ten)) 210 percent but equal to or less than ((three hundred twelve)) 312 percent as described in WAC 182-505-0210 (((3)(a)(ii))) receive premium-based coverage. Premium amounts are described in WAC 182-505-0225.

- WAC 182-509-0305 MAGI income—Persons subject to the modified adjusted gross income (MAGI) methodology. (1) Eligibility for Washington apple health for the following people is determined using the modified adjusted gross income (MAGI) methodology described in WAC 182-509-0300:
- (a) Parents or caretaker relatives with an eligible dependent child (described in WAC 182-503-0565) whose net countable income is below 54 percent of the federal poverty level (FPL) as described in WAC 182-505-0240.
- (b) Parents or caretaker relatives with an eligible dependent child whose net countable income exceeds the standard described in (a) of this subsection but is at or below 133 percent FPL as described in WAC 182-505-0250 and 182-507-0110.
- (c) Adults with no eligible dependent child with net countable income at or below 133 percent FPL as described in WAC 182-505-0250 and 182-507-0110.
- (d) Pregnant people whose net countable income, based on a household size that includes any unborn children, is <u>equal to or</u> below $((\frac{193}{2}))$ <u>210</u> percent FPL at the time of application, as described in WAC 182-505-0115.
- (e) People within the 12-month postpartum period beginning the month after the pregnancy ends whose net countable income is $\underline{\text{equal to}}$ $\underline{\text{or}}$ below ((193)) $\underline{210}$ percent FPL at the time of application, as described in WAC 182-505-0115.
- (f) Children age 18 or younger in households with net countable income which is <u>equal to or</u> below 210 percent FPL, as described in WAC 182-505-0210 (((3)(a))).
- (g) Children age 18 or younger in households with net countable income that is ((between)) greater than 210 percent ((and)) but equal to or below 312 percent FPL, as described in WAC 182-505-0215. Children who are eligible under this section are subject to premiums as described in WAC 182-505-0225.
- (h) People age 18 and older who have income over 150 percent FPL who are financially and functionally eligible to receive the community behavioral health support services (CBHS) benefit, as described in chapter 182-561 WAC.
- (2) Household size for a person who is subject to MAGI income methodologies is determined according to WAC 182-506-0010.

[1] OTS-5592.1