## PROPOSED RULE MAKING



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

## **CODE REVISER USE ONLY**

OFFICE OF THE CODE REVISER STATE OF WASHINGTON **FILED** 

DATE: September 17, 2024

TIME: 12:17 PM

WSR 24-19-090

Agency: Health Care Authority							
□ Supplemental Notice to WSR							
□ Continuance of WSR							
☑ Preproposal Statement of Inquiry was filed as WSR 24-15-117; or							
☐ Expedited Rule MakingProposed notice was filed as WSR; or							
□ Proposal is exemp	t under RC\	N 34.05.310(4) or 34.05.33	0(1); oı	•			
□ Proposal is exemp	t under RC\	N					
<b>Title of rule and other identifying information:</b> (describe subject)  182-550-5130 Payment method – Institution for mental diseases disproportionate share hospital (IMDDSH) and institution for mental diseases (IMD) state grants  182-550-5210 Payment method – Small rural indigent assistance disproportionate share hospital (SRIADSH)  182-550-5220 Payment method – Nonrural indigent assistance disproportionate share hospital (NRIADSH)  182-550-5380 Payment method – Sole community disproportionate share hospital (SCDSH)							
Hearing location(s):							
Date:	Time:	Location: (be specific)		Comment:			
October 22, 2024	10:00 AM	The Health Care Authority public hearings virtually wit		To attend the virtual public hearing, you must register in advance:			
		physical meeting place	noul a	you must register in advance.			
		priyeresi ilicomi g pisce		https://us02web.zoom.us/webinar/register/ WN_icWpKqAQTxyCXgTcltuVgA			
				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 so	ooner than October 23, 2024	<u>4</u> (	Note: This is <b>NOT</b> the <b>effective</b> date)			
Submit written comm	ents to:		Assistance for persons with disabilities:				
Name HCA Rules Cod	ordinator		Contact Johanna Larson				
Address PO Box 4271	6, Olympia \	NA 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) September 18, 2024, 8:00 AM				Other			
By (date and time) October 22, 2024, by 11:59 PM				By (date) October 4, 2024			
Purpose of the proposal and its anticipated effects, including any changes in existing rules: The agency is amending 182-550-5130 to remove subsections (5) and (6). The agency does not distribute any state funded grants for IMD DSH; there is no state money allocated to IMD. The agency is repealing 182-550-5210, 182-550-5220, and 182-550-5380; old information – the programs have not been funded by the legislature for over ten years.							
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 necessar	y because of a:					
Federal Law?						
Federal Co	☐ Yes ⊠ No					
State Cour	t Decision?		☐ Yes  ☒ No			
If yes, CITATION	:					
Agency commer matters: None	nts or recommendations, if	any, as to statutory language, implementation, e	enforcement, and fiscal			
Name of proponent: (person or organization) Health Care Authority  Type of proponent: □ Private. □ Public. ☒ Governmental.						
Name of agency	personnel responsible for	:				
	Name	Office Location	Phone			
Drafting	Valerie Freudenstein	PO Box 42716, Olympia, WA 98504-2716	360-725-1344			
Implementation	Mary O'Hare	PO Box 42716, Olympia, WA 98504	360-725-9820			
Enforcement	Mary O'Hare	PO Box 42716, Olympia, WA 98504	360-725-9820			
	-	required under RCW 28A.305.135?	☐ Yes ☒ No			
If yes, insert state	ement 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 TTY Email Other  No: Please explain: RCW 34.05.328 does not apply to Health Care Authority rules unless requested by the Joint Administrative Rules Review Committee or applied voluntarily.						
Note: The Govern	nor's Office for Regulatory Inr	ss Economic Impact Statement  novation and Assistance (ORIA) provides support in	completing this part.			
(1) Identification of exemptions:  This rule proposal, or portions of the proposal, may be exempt from requirements of the Regulatory Fairness Act (see <a href="https://chapter.19.85.RCW">chapter 19.85.RCW</a> ). For additional information on exemptions, consult the <a href="https://exemption.guide.published.by.ORIA">exemption.guide.published.by.ORIA</a> . Please check the box for any applicable exemption(s):  □ This rule proposal, or portions of the proposal, is exempt under <a 34.05.313"="" href="https://exemption.geographics.new.geo&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td colspan=5&gt;&lt;ul&gt;     &lt;li&gt;☐ This rule proposal, or portions of the proposal, is exempt because the agency has completed the pilot rule process defined by &lt;a href=" rcw="">RCW 34.05.313</a> before filing the notice of this proposed rule. <li>☐ This rule proposal, or portions of the proposal, is exempt under the provisions of <a href="RCW 15.65.570">RCW 15.65.570</a>(2) because it was adopted by a referendum.</li>						

	This rule	proposal, or portions of the proposal, is ex-	empt under <u>R</u>	CW 19.85.025(3). Check all that apply:	
		RCW 34.05.310 (4)(b)		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)	
$\boxtimes$	This rule	proposal, or portions of the proposal, is exe	empt under <u>R</u>	CW 19.85.025(4). (Does not affect small businesses).	
	This rule	proposal, or portions of the proposal, is exc	empt under R	CW	
Exp	olanation	of how the above exemption(s) applies to the	ne proposed r	ule:	
(2)	Scone o	f exemptions: Check one.			
<ul> <li>☐ The rule proposal: Is fully exempt. (Skip section 3.) Exemptions identified above apply to all portions of the rule proposal.</li> <li>☐ The rule proposal: Is partially exempt. (Complete section 3.) The exemptions identified above apply to portions of the rule proposal, but less than the entire rule proposal. Provide details here (consider using this template from ORIA):</li> <li>☐ The rule proposal: Is not exempt. (Complete section 3.) No exemptions were identified above.</li> </ul>					
(3)	Small bu	usiness economic impact statement: Cor	mplete this se	ction if any portion is not exempt.	
lf a		n of the proposed rule is <b>not exempt</b> , does	•	re-than-minor costs (as defined by RCW 19.85.020(2))	
	☐ Yes	nore-than-minor costs. These are change	s to hospital r imposes more	e-than-minor cost to businesses and a small business	
	The p		ss economic	impact statement or the detailed cost calculations by	
	Na	ame			
Address					
Phone					
Fax TTY					
		r nail			
		her			
Dat		mber 17, 2024	Signati	ıre:	
Name: Wendy Barcus			Wendy Barous		
Title: HCA Rules Coordinator				1 minus 1 minus	

- WAC 182-550-5130 Payment method—Institution for mental diseases disproportionate share hospital (IMDDSH) and institution for mental diseases (IMD) state grants. (1) A psychiatric hospital owned and operated by the state of Washington is eligible to receive payments under the institution for mental diseases disproportionate share hospital (IMDDSH) program.
- (2) For the purposes of the IMDDSH program, the following definitions apply:
- (a) "Institution for mental diseases (IMD)" means a hospital, nursing facility, or other institution of more than ((sixteen)) 16 beds, that is primarily engaged in providing diagnosis, treatment, or care of people with mental diseases, including medical attention, nursing care, and related services.
- (b) "Psychiatric community hospital" means a psychiatric hospital other than a state-owned and operated hospital.
- (c) "Psychiatric hospital" means an institution which is primarily engaged in providing psychiatric services for the diagnosis and treatment of mentally ill people. The term applies to a medicare-certified distinct psychiatric care unit, a medicare-certified psychiatric hospital, or a state-designated pediatric distinct psychiatric unit in a medicare-certified acute care hospital.
- (d) "State-owned and operated psychiatric hospital" means eastern state hospital and western state hospital.
- (3) Except as provided in subsection (4) of this section, a psychiatric community hospital, regardless of location, is not eligible to receive:
  - (a) IMDDSH payments; or
- (b) Any other disproportionate share hospital (DSH) payment from the medicaid agency. See WAC 182-550-4800 regarding payment for psychiatric claims for clients eligible under the medical care services programs.
- (4) A psychiatric community hospital within the state of Washington that is designated by the agency as an IMD is eligible to receive IMDDSH payment if:
- (a) IMDDSH funds remain available after the amounts appropriated for state-owned and operated psychiatric hospitals are exhausted; and
  - (b) The legislature provides funds specifically for this purpose.
- (5) ((A psychiatric community hospital within the state of Washington that is designated by the agency as an IMD is eligible to receive a state grant amount from the agency if the legislature appropriates funds specifically for this purpose.
- (6) An institution for mental diseases located out-of-state, including an IMD located in a designated bordering city, is not eligible to receive a Washington state grant amount.
- (7)) Under federal law, 42 U.S.C. 1396r-4 (h)(2), the state's annual IMDDSH expenditures are capped at ((thirty-three)) 33 percent of the state's annual statewide DSH cap. This amount represents the maximum that the state can spend in any given fiscal year on IMDDSH, but the state is under no obligation to actually spend that amount.

[ 1 ] OTS-5665.1

## REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 182-550-5210	Payment method—Small rural indigent assistance disproportionate share hospital (SRIADSH).
WAC 182-550-5220	Payment method—Nonrural indigent assistance disproportionate share hospital (NRIADSH).
WAC 182-550-5380	Payment method—Sole community disproportionate share hospital (SCDSH).