



# PROPOSED RULE MAKING

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

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STATE OF WASHINGTON  
FILED

DATE: March 11, 2025

TIME: 1:51 PM

WSR 25-07-037

**Agency:** Health Care Authority

**Original Notice**

**Supplemental Notice to WSR** \_\_\_\_\_

**Continuance of WSR** \_\_\_\_\_

**Preproposal Statement of Inquiry was filed as WSR 24-14-066 ; 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) WAC 182-561-0500 – Service tiers

**Hearing location(s):**

Date:	Time:	Location: (be specific)	Comment:
April 22, 2025	10:00 AM	The Health Care Authority holds public hearings virtually without a physical meeting place.	To attend the virtual public hearing, <a href="https://us02web.zoom.us/webinar/register/WN_1mfkt8yLSuaGbGRePeDM4w">you must register in advance:</a>  <a href="https://us02web.zoom.us/webinar/register/WN_1mfkt8yLSuaGbGRePeDM4w">https://us02web.zoom.us/webinar/register/WN_1mfkt8yLSuaGbGRePeDM4w</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.

**Date of intended adoption:** April 23, 2025 (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

Beginning (date and time) March 12, 2025, 8:00 AM

By (date and time) April 22, 2025, by 11:59 PM

**Assistance for persons with disabilities:**

Contact Johanna Larson  
Phone 360-725-1349  
Fax 360-586-9727  
TTY Telecommunication Relay Service (TRS): 711  
Email Johanna.Larson@hca.wa.gov  
Other

By (date) April 4, 2025

**Purpose of the proposal and its anticipated effects, including any changes in existing rules:** The agency is amending this rule to correct the number of service hours in the eligibility criteria for Tier 4 and Tier 5 community behavioral support services and to list the service hours on the table in a consistent format.

**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

**Type of proponent:**  Private.  Public.  Governmental.

**Name of agency personnel responsible for:**

	Name	Office Location	Phone
Drafting	Melinda Froud	PO Box 42716, Olympia, WA 98504-2716	360-725-1408
Implementation	Rebecca Carrell	PO Box 45534, Olympia, WA 98504-5534	360-725-5707
Enforcement	Rebecca Carrell	PO Box 45534, Olympia, WA 98504-5534	360-725-5707

**Is a school district fiscal impact statement required under [RCW 28A.305.135](#)?**

Yes  No

If yes, insert statement here:

N/A

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.

**Regulatory Fairness Act and Small Business Economic Impact Statement**

Note: The [Governor's Office for Regulatory Innovation 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 [chapter 19.85 RCW](#)). For additional information on exemptions, consult the [exemption guide published by ORIA](#). 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:
- |   |  |
|---|--|
| <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(b)<br>(Internal government operations) | <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(e)<br>(Dictated by statute)   |
| <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(c)<br>(Incorporation by reference)     | <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(f)<br>(Set or adjust fees)  |
| <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(d)<br>(Correct or clarify language)    | <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(g)<br>((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 19.85.025\(4\)](#). (Does not affect small businesses).
- This rule proposal, or portions of the proposal, is exempt under RCW \_\_\_\_\_.

Explanation of how the above exemption(s) applies to the proposed rule:

**(2) Scope of exemptions:** *Check one.*

- The rule proposal: Is fully exempt. (*Skip section 3.*) Exemptions identified above apply to all portions of the rule proposal.
- 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](#)):
- The rule proposal: Is not exempt. (*Complete section 3.*) No exemptions were identified above.

**(3) Small business economic impact statement:** *Complete this section if any portion is not exempt.*

If any portion of 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 minor cost analysis and how the agency determined the proposed rule did not impose more-than-minor costs. This rule corrects the number of service hours for two tiers and does not impose any costs 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 the required small business economic impact 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:** March 11, 2025

**Name:** Wendy Barcus

**Title:** HCA Rules Coordinator

**Signature:**



**WAC 182-561-0500 Service tiers.** (1) The agency has established tiers for community behavioral health support services using the needs-based criteria and risk criteria in WAC 182-561-0300.

(2) At a minimum, a person determined eligible for supportive supervision qualifies to receive Tier 1 services for an average of two hours per day.

(3) The agency determines tiers based on medical appropriateness and clinical acuity, using the following tier structure:

Tier Level	Eligibility Criteria	Renewal or Reassessment Criteria
<b>Tier 1 Services</b>	<p>A person is eligible for Tier 1 services (0.5 - 2.0 hours per day) if they:</p> <ul style="list-style-type: none"> <li>• Demonstrate a qualifying behavior that requires daily intermittent monitoring, redirection, and cueing to promote community stability and to ensure the safety of the person and other residents; or</li> <li>• Have a significant history of behaviors that are well-managed in a highly structured setting but are at risk of recurring in a community setting if not met with the appropriate level of supportive supervision.</li> </ul>	<p>For renewal or assessment, the person has a history of behaviors meeting the guidelines for Tier 1, which are currently prevented only by additional skilled staff intervention.</p>
<b>Tier 2 Services</b>	<p>A person is eligible for Tier 2 services if they:</p> <ul style="list-style-type: none"> <li>• Demonstrate current qualifying behaviors at a frequency that requires an average of 2.1 to ((6)) 6.0 hours per day of dedicated staff to redirect, deescalate, and cue to promote community stability and to ensure the safety of the person and the other residents; or</li> <li>• Have demonstrated multiple qualifying behaviors requiring an average of 2.1 to ((6)) 6.0 hours per day of one-on-one staffing within the past month. Behaviors may be well-managed in a highly structured setting but are at risk of recurring in a community setting if not met with the appropriate level of supportive supervision.</li> </ul>	<p>For renewal or reassessment, the person has a history of behavior or behaviors meeting the guidelines for Tier 2, which are currently prevented only by additional skilled staff intervention at this tier level.</p>

Tier Level	Eligibility Criteria	Renewal or Reassessment Criteria
<b>Tier 3 Services</b>	<p>A person is eligible for Tier 3 services if they:</p> <ul style="list-style-type: none"> <li>• Demonstrate multiple qualifying behaviors at a frequency and intensity that requires an average of 6.1 to <del>((10))</del> <u>10.0</u> hours per day of one-on-one staffing to redirect, engage, deescalate, and cue to promote community stability and to ensure the safety of the person and other residents; or</li> <li>• Have demonstrated multiple qualifying behaviors requiring an average of 6.1 to <del>((10))</del> <u>10.0</u> hours per day of one-on-one staffing within the past month. Behaviors may be well-managed in a highly structured setting but are at risk of recurring or increasing in frequency or severity in a community setting if not met with the appropriate level of supportive supervision.</li> </ul>	<p>For renewal or reassessment, the person has a history of behaviors meeting the guidelines for Tier 3, which are currently preventable only by additional skilled staff intervention at this tier level.</p>
<b>Tier 4 Services</b>	<p>A person is eligible for Tier 4 services if they:</p> <ul style="list-style-type: none"> <li>• Demonstrate multiple qualifying behaviors at a frequency and intensity that requires an average of 10.1 to <del>((16))</del> <u>15.0</u> hours per day of one-on-one staffing to redirect, engage, deescalate, and cue to promote community stability and to ensure the safety of the person and other residents; or</li> <li>• Have demonstrated multiple qualifying behaviors requiring an average of 10.1 to <del>((16))</del> <u>15.0</u> hours per day of one-on-one staffing within the past month. Behavior requires at least one-on-one intervention, even in a structured setting, but the behavior may be at risk of increasing in frequency, or severity, or both, in a community setting if not met with the appropriate level of supportive supervision.</li> </ul>	<p>For renewal or reassessment, the person has a history of behavior meeting the guidelines for Tier 4, which are currently prevented only by additional skilled staff interventions at this tier level.</p>
<b>Tier 5 Services</b>	<p>A person is eligible for Tier 5 services when:</p> <ul style="list-style-type: none"> <li>• The person demonstrates multiple behaviors at a frequency and intensity that requires an average of <del>((16.1 to 20))</del> <u>15.1 to 20.0</u> hours per day of one-on-one staffing to redirect, engage, deescalate, and cue to promote community stability and to ensure the safety of the person and other residents; or</li> <li>• The person's behavior requires daily one-on-one intervention even in the context of a structured setting, and there would be an imminent risk of harm if the person does not receive an average of <del>((16.1 to 20))</del> <u>15.1 to 20.0</u> hours per day of at least one-on-one staffing in a community setting.</li> </ul>	<p>For renewal or reassessment, the person has a history of behavior meeting the guidelines for Tier 5, which are currently prevented only by additional skilled staff intervention at this tier level.</p>

Tier Level	Eligibility Criteria	Renewal or Reassessment Criteria
<b>Tier 6 Services</b>	<p>A person is eligible for Tier 6 services when:</p> <ul style="list-style-type: none"> <li>• The person demonstrates multiple qualifying behaviors at a frequency and intensity that requires an average of 20.1 to 24 hours per day of one-on-one staffing or has regular episodes that require multiple staff to redirect, engage, deescalate, and cue to promote community stability and to ensure the safety of the person and other residents; or</li> <li>• The person's behavior requires constant one-on-one monitoring and intervention, even in the context of a structured setting, and there would be an imminent risk of harm if the person does not receive an average of 20.1 to 24 hours per day of at least one-on-one staffing in a community setting.</li> </ul>	<p>For renewals or reassessment, the person has a history of behavior meeting the guidelines for Tier 6, which are currently prevented only by additional skilled staff intervention at this tier level.</p>