



# RULE-MAKING ORDER PERMANENT RULE ONLY

## CR-103P (December 2017) (Implements RCW 34.05.360)

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER  
STATE OF WASHINGTON  
FILED

DATE: May 30, 2024

TIME: 8:09 AM

WSR 24-12-036

**Agency:** Health Care Authority (HCA)

**Effective date of rule:**

**Permanent Rules**

- 31 days after filing.
- Other (specify) July 1, 2024 (If less than 31 days after filing, a specific finding under RCW 34.05.380(3) is required and should be stated below)

**Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?**

- Yes  No If Yes, explain:

**Purpose:** HCA amended these rules to add advanced social worker associates, independent clinical social worker associates, marriage and family therapist associates, and mental health counselor associates as provider types eligible to provide covered health care services to eligible clients. In WAC 182-502-0002, HCA replaced social workers with advanced social workers and independent clinical social workers.

The agency also added community behavioral health support services provider facilities to the list of eligible provider types in WAC 182-502-0002. HCA filed a preproposal statement of inquiry (CR-101) under WSR 22-09-074 to develop new rules in Title 182 regarding the Community Behavioral Health Support Services (CBHS) program. This rulemaking was postponed after necessary funding for the program was not provided. On March 18, 2024, HCA filed the proposed rule (CR-102) for the new CBHS program under WSR 24-07-072 followed by the rule-making order (CR-103P) on April 30, 2024, under WSR 24-10-081.

**Citation of rules affected by this order:**

- New:
- Repealed:
- Amended: 182-502-0002; 182-531-1400
- Suspended:

**Statutory authority for adoption:** RCW 41.05.021, 41.05.160

**Other authority:** N/A

**PERMANENT RULE (Including Expedited Rule Making)**

Adopted under notice filed as WSR 24-05-063 on February 20, 2024 (date).  
Describe any changes other than editing from proposed to adopted version: None

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

- Name:
- Address:
- Phone:
- Fax:
- TTY:
- Email:
- Web site:
- Other:

**Note: If any category is left blank, it will be calculated as zero.  
No descriptive text.**

**Count by whole WAC sections only, from the WAC number through the history note.  
A section may be counted in more than one category.**

**The number of sections adopted in order to comply with:**

Federal statute:	New	___	Amended	___	Repealed	___
Federal rules or standards:	New	___	Amended	___	Repealed	___
Recently enacted state statutes:	New	___	Amended	___	Repealed	___

**The number of sections adopted at the request of a nongovernmental entity:**

New	___	Amended	___	Repealed	___
-----	-----	---------	-----	----------	-----

**The number of sections adopted on the agency's own initiative:**


New	___	Amended	___	Repealed	___
-----	-----	---------	-----	----------	-----

**The number of sections adopted in order to clarify, streamline, or reform agency procedures:**

New	___	Amended	<u>2</u>	Repealed	___
-----	-----	---------	----------	----------	-----

**The number of sections adopted using:**

Negotiated rule making:	New	___	Amended	___	Repealed	___
Pilot rule making:	New	___	Amended	___	Repealed	___
Other alternative rule making:	New	___	Amended	<u>2</u>	Repealed	___

<b>Date Adopted:</b> May 30, 2024	<b>Signature:</b> 
<b>Name:</b> Wendy Barcus	
<b>Title:</b> HCA Rules Coordinator	

**WAC 182-502-0002 Eligible provider types.** The following health care professionals, health care entities, suppliers or contractors of service may request enrollment with the Washington state health care authority (medicaid agency) to provide covered health care services to eligible clients. For the purposes of this chapter, health care services include treatment, equipment, related supplies, and drugs.

- (1) Professionals:
  - (a) Advanced registered nurse practitioners;
  - (b) Advanced social workers;
  - (c) Advanced social worker associates;
  - (d) Anesthesiologists;
  - ~~((e))~~ (e) Applied behavior analysis (ABA) professionals, as provided in WAC 182-531A-0800:
    - (i) Licensed behavior analyst;
    - (ii) Licensed assistant behavior analyst; and
    - (iii) Certified behavior technician~~((-))~~;
  - ~~((d))~~ (f) Audiologists;
  - ~~((e))~~ (g) Chiropractors;
  - ~~((f))~~ (h) Dentists;
  - ~~((g))~~ (i) Dental health aide therapists, as provided in chapter 70.350 RCW;
  - ~~((h))~~ (j) Dental hygienists;
  - ~~((i))~~ (k) Denturists;
  - ~~((j))~~ (l) Dietitians or nutritionists;
  - ~~((k))~~ (m) Hearing aid fitters/dispensers;
  - ~~((l))~~ (n) Home health aide credentialed with DOH as nursing assistant certified or nursing assistant registered;
  - ~~((m))~~ (o) Independent clinical social workers;
  - (p) Independent clinical social worker associates;
  - (q) Licensed practical nurse;
  - ~~((n))~~ (r) Marriage and family therapists;
  - ~~((o))~~ (s) Mental health counselors;
  - ~~((p))~~ (t) Mental health counselor associates;
  - (u) Mental health care providers;
  - ~~((q))~~ (v) Midwives;
  - ~~((r))~~ (w) Naturopathic physicians;
  - ~~((s))~~ (x) Nurse anesthetist;
  - ~~((t))~~ ~~Ocularists;~~
  - ~~((u))~~ (y) Ocularists;
  - (z) Occupational therapists;
    - ~~((v))~~ (aa) Ophthalmologists;
    - ~~((w))~~ (bb) Opticians;
    - ~~((x))~~ (cc) Optometrists;
    - ~~((y))~~ (dd) Orthodontists;
    - ~~((z))~~ (ee) Orthotist;
    - ~~((aa))~~ (ff) Osteopathic physicians;
    - ~~((bb))~~ (gg) Osteopathic physician assistants;
    - ~~((cc))~~ (hh) Peer counselors;
    - ~~((dd))~~ (ii) Podiatric physicians;
    - ~~((ee))~~ (jj) Pharmacists;
    - ~~((ff))~~ (kk) Physicians;
    - ~~((gg))~~ (ll) Physician assistants;
    - ~~((hh))~~ (mm) Physical therapists;

~~((+ii))~~ (nn) Prosthetist;  
~~((+jj))~~ (oo) Psychiatrists;  
~~((+kk))~~ (pp) Psychologists;  
~~((+ll))~~ (qq) Radiologists;  
~~((+mm))~~ (rr) Registered nurse;  
~~((+nn))~~ (ss) Registered nurse delegators;  
~~((+oo))~~ (tt) Registered nurse first assistants;  
~~((+pp))~~ (uu) Respiratory therapists;  
~~((+qq))~~ ~~Social workers; and~~  
~~((+rr))~~ (vv) Speech/language pathologists; and  
~~((+ss))~~ (ww) Substance use disorder professionals:  
(i) Mental health providers; and  
(ii) Peer counselors.  
(2) Agencies, centers and facilities:  
(a) Adult day health centers;  
(b) Ambulance services (ground and air);  
(c) Ambulatory surgery centers (medicare-certified);  
(d) Birthing centers (licensed by the department of health);  
(e) Cardiac diagnostic centers;  
(f) Case management agencies;  
(g) Substance use disorder treatment facilities certified by the department of health (DOH);  
(h) Withdrawal management treatment facilities certified by DOH;  
(i) Community AIDS services alternative agencies;  
(j) Community behavioral health support services provider facilities;  
(k) Community mental health centers;  
~~((+k))~~ (l) Diagnostic centers;  
~~((+l))~~ (m) Early and periodic screening, diagnosis, and treatment (EPSDT) clinics;  
~~((+m))~~ (n) Family planning clinics;  
~~((+n))~~ (o) Federally qualified health centers (designated by the federal department of health and human services);  
~~((+o))~~ (p) Genetic counseling agencies;  
~~((+p))~~ (q) Health departments;  
~~((+q))~~ (r) Health maintenance organization (HMO)/managed care organization (MCO);  
~~((+r))~~ (s) HIV/AIDS case management;  
~~((+s))~~ (t) Home health agencies;  
~~((+t))~~ (u) Hospice agencies;  
~~((+u))~~ (v) Hospitals;  
~~((+v))~~ (w) Indian health service facilities/tribal 638 facilities;  
~~((+w))~~ (x) Tribal or urban Indian clinics;  
~~((+x))~~ (y) Inpatient psychiatric facilities;  
~~((+y))~~ (z) Intermediate care facilities for individuals with intellectual disabilities (ICF-IID);  
~~((+z))~~ (aa) Kidney centers;  
~~((+aa))~~ (bb) Laboratories (CLIA certified);  
~~((+bb))~~ (cc) Maternity support services agencies; maternity case managers; infant case management, first steps providers;  
~~((+cc))~~ (dd) Neuromuscular and neurodevelopmental centers;  
~~((+dd))~~ (ee) Nurse services/delegation;  
~~((+ee))~~ (ff) Nursing facilities (approved by the DSHS aging and long-term support administration);  
~~((+ff))~~ (gg) Pathology laboratories;  
~~((+gg))~~ (hh) Pharmacies;

- ~~((hh))~~ (ii) Private duty nursing agencies;
- ~~((ii))~~ (jj) Radiology - Stand-alone clinics;
- ~~((jj))~~ (kk) Rural health clinics (medicare-certified);
- ~~((kk))~~ (ll) School districts and educational service districts;

and

~~((ll))~~ (mm) Sleep study centers (~~;~~ and ~~(mm)~~ Washington state school districts and educational service districts).

- (3) Suppliers of:
  - (a) Blood, blood products, and related services;
  - (b) Durable and nondurable medical equipment and supplies;
  - (c) Complex rehabilitation technologies;
  - (d) Infusion therapy equipment and supplies;
  - (e) Prosthetics/orthotics;
  - (f) Hearing aids; and
  - (g) Respiratory care, equipment, and supplies.
- (4) Contractors:
  - (a) Transportation brokers;
  - (b) Spoken language interpreter services agencies;
  - (c) Independent sign language interpreters; and
  - (d) Eyeglass and contact lens providers.

**WAC 182-531-1400 Psychiatric physician-related services and other professional mental health services.** (1) The mental health services covered in this section are different from the mental health services covered under community mental health and involuntary treatment programs in chapter 182-538D WAC.

(2) Inpatient and outpatient mental health services not covered under chapter 182-538D WAC may be covered by the agency under this section.

**Inpatient mental health services**

(3) For hospital inpatient psychiatric admissions, providers must comply with chapter 182-538D WAC.

(4) The agency covers professional inpatient mental health services as follows:

(a) When provided by a psychiatrist, psychiatric advanced registered nurse practitioner (ARNP), psychiatric mental health nurse practitioner-board certified (PMHNP-BC), or psychologist in conjunction with the prescribing provider;

(b) The agency pays only for the total time spent on direct psychiatric client care during each visit, including services provided when making rounds. The agency considers services provided during rounds to be direct client care services and may include, but are not limited to:

(i) Individual psychotherapy up to one hour;

(ii) Family/group therapy; or

(iii) Electroconvulsive therapy.

(c) One electroconvulsive therapy or narcosynthesis per client, per day, and only when performed by a psychiatrist.

**Outpatient mental health services**

(5) The agency covers outpatient mental health services when provided by the following licensed health care practitioners who are eligible providers under chapter 182-502 WAC:

(a) Psychiatrists;

(b) Psychologists;

(c) Psychiatric advanced registered nurse practitioners (ARNP);

(d) Psychiatric mental health nurse practitioners-board certified (PMHNP-BC);

(e) Mental health counselors;

(f) Mental health counselor associates;

(g) Independent clinical social workers;

~~((g))~~ (h) Independent clinical social worker associates;

(i) Advanced social workers; ~~((e~~

~~(h))~~ (j) Advanced social worker associates;

(k) Marriage and family therapists; or

(l) Marriage and family therapist associates.

(6) With the exception of child psychiatrists, as defined in RCW 71.34.020, qualified practitioners listed in subsection (5) of this section who diagnose and treat clients age 18 and younger must meet one of the following:

(a) The education and experience requirements for a child mental health specialist found in WAC 182-538D-0200; or

(b) Be working under the supervision of a practitioner who meets these requirements.

(7) The agency does not limit the total number of outpatient mental health visits a licensed health care professional can provide.

(8) The agency evaluates a request for covered outpatient mental health services in excess of the limitations in this section under WAC 182-501-0169.

(9) The agency covers outpatient mental health services with the following limitations:

(a) Diagnostic evaluations. One psychiatric diagnostic evaluation, per provider, per client, per calendar year, unless significant change in the client's circumstances renders an additional evaluation medically necessary and is authorized by the agency.

(i) For clients 20 years of age and younger, additional evaluations are paid for when medically necessary and authorized by the agency, per WAC 182-534-0100 and 182-501-0165.

(ii) For clients five years of age and younger, the agency pays for the following without requiring prior authorization:

(A) Up to five sessions to complete a psychiatric diagnostic evaluation; and

(B) Evaluations in the home or community setting, including reimbursement for provider travel.

(iii) For clients age five through age 20, the services in (a)(ii)(A) and (B) of this subsection are paid for when medically necessary and authorized by the agency.

(b) Psychotherapy. One or more individual or family/group psychotherapy visits, with or without the client, per day, per client, when medically necessary.

(c) Medication management. One psychiatric medication management service, per client, per day, in an outpatient setting when performed by one of the following:

(i) Psychiatrist;

(ii) Psychiatric advanced registered nurse practitioner (ARNP);

or

(iii) Psychiatric mental health nurse practitioner-board certified (PMHNP-BC).

(10) To receive payment for providing mental health services, providers must bill the agency using the agency's published billing instructions.