- WAC 182-538-067 Qualifications to become a managed care organization (MCO) in integrated managed care. (1) To provide physical or behavioral health services under the apple health IMC contract, a managed care organization (MCO) must:
  - (a) Contract with the agency; and
- (b) Contract with an agency-contracted behavioral health administrative service organization (BH-ASO) that maintains an adequate provider network to deliver services to clients in IMC regional service areas.
- (2) An MCO must meet the following qualifications to be eligible to contract with the agency:
- (a) Have a certificate of registration from the Washington state office of the insurance commissioner (OIC) that allows the MCO to provide health care services under a risk-based contract;
- (b) Accept the terms and conditions of the agency's managed care contract;
- (c) Meet the network and quality standards established by the agency; and
- (d) Pass a readiness review, including an on-site visit conducted by the agency.
- (3) (a) The agency may from time to time conduct a procurement for new apple health MCOs or to reduce or expand the use of existing apple health MCOs.
- (b) The agency may conduct a procurement when the agency determines in its sole discretion there is a need to:
  - (i) Expand or reduce current MCO contracts;
  - (ii) Enhance current MCO provider networks; or
- (iii) Establish new contracts for integrated managed care in one or more regional services areas; or
- (iv) Adjust the program to ensure adherence to state and federal law.
- (c) In accordance with RCW 74.09.522 and 74.09.871, the agency will give significant weight to the following factors in any procurement process:
- (i) Demonstrated commitment to, and experience in, serving low-income populations;
- (ii) Demonstrated commitment to, and experience in, serving persons who have mental illness, substance use disorders, or co-occurring disorders;
- (iii) Demonstrated commitment to, and experience with, partner-ships with county and municipal criminal justice systems, housing services, and other critical support services necessary to achieve the outcomes established in RCW 70.320.020, 71.24.435, and 71.36.025;
- (iv) Recognition that meeting enrollees' physical and behavioral health care needs is a shared responsibility of contracted behavioral health administrative services organizations, MCOs, service providers, the state, and communities;
- (v) Consideration of past and current performance and participation in other state or federal behavioral health programs as a contractor;
- (vi) Quality of services provided to enrollees under previous contracts with the state of Washington or other states;
- (vii) Accessibility, including appropriate utilization, of services offered to enrollees;
- (viii) Demonstrated capability to perform contracted services, including the ability to supply an adequate provider network; and

- (ix) The ability to meet any other requirements established by the agency.
- (d) The agency may define and consider additional factors as part of any procurement including, but not limited to:
- (i) Timely processing of, and payments to, providers in the MCO networks, including reconciliation of outstanding payments; and
- (ii) The optimal number of MCOs per regional services area, based on population and in the manner that the agency determines most beneficial for the program, clients, and providers.
- (4) The agency reserves the right not to contract with any otherwise qualified MCO.