

WAC 182-538-068 Qualifications to become a primary care case management (PCCM) provider in integrated managed care regional service areas. A primary care case management (PCCM) provider or the individual providers in a PCCM group or clinic must:

- (1) Have a core provider agreement with the medicaid agency;
- (2) Be a recognized urban Indian health center or tribal clinic;
- (3) Accept the terms and conditions of the agency's PCCM contract;
- (4) Be able to meet the quality standards established by the agency; and
- (5) Accept the case management rate paid by the agency.

[Statutory Authority: RCW 41.05.021, 41.05.160, 2019 c 325, 2014 c 225, and 2018 c 201. WSR 19-24-063, § 182-538-068, filed 11/27/19, effective 1/1/20. Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 15-24-098, § 182-538-068, filed 12/1/15, effective 1/1/16. Statutory Authority: RCW 41.05.021, 42 C.F.R. 438. WSR 13-02-010, § 182-538-068, filed 12/19/12, effective 2/1/13. WSR 11-14-075, recodified as § 182-538-068, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090 and 74.09.522. WSR 08-15-110, § 388-538-068, filed 7/18/08, effective 8/18/08; WSR 06-03-081, § 388-538-068, filed 1/12/06, effective 2/12/06. Statutory Authority: RCW 74.09.080, 74.08.510, [74.08.]522, 74.09.450, 1115 Waiver, 42 U.S.C. 1396. WSR 02-01-075, § 388-538-068, filed 12/14/01, effective 1/14/02.]