

WAC 182-502A-0801 Dispute resolution process. (1) An entity may informally dispute a preliminary finding. The medicaid agency must receive any request for dispute resolution within thirty calendar days of the date the entity received the preliminary finding. The request for dispute resolution must be in writing and include the following:

(a) The supporting evidence for each disputed preliminary finding; and

(b) The relief sought for each disputed preliminary finding.

(2) The dispute may include a request for a dispute resolution conference (DRC).

(a) If the agency grants the entity's request for a DRC, the DRC occurs within sixty calendar days of the date the entity received the agency's written acceptance of the request for a DRC.

(b) At least five business days before the DRC, the entity must notify the agency of who will attend the DRC on the entity's behalf.

(3) Following the timely submission of a written request for dispute resolution under subsection (1) of this section and completion of any DRC, the agency addresses in writing each written disputed preliminary finding raised by the entity.

(4) The agency may terminate the dispute resolution process and issue a final notice if the entity fails to comply with the requirements of this section.

[Statutory Authority: RCW 41.05.021, 41.05.160, and C.F.R. Sections 438.608 through 438.610. WSR 20-02-100, § 182-502A-0801, filed 12/31/19, effective 1/31/20. Statutory Authority: RCW 41.05.021, 41.05.160, 2017 c 242. WSR 18-07-050, § 182-502A-0801, filed 3/14/18, effective 4/14/18. Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 15-01-129, § 182-502A-0801, filed 12/19/14, effective 1/19/15.]