Washington State Register

WSR 24-16-023 PERMANENT RULES HEALTH CARE AUTHORITY

[Filed July 26, 2024, 10:46 a.m., effective August 26, 2024]

Effective Date of Rule: Thirty-one days after filing.
Purpose: The health care authority is amending WAC 182-507-0125
to include state-funded long-term care services provided in an intermediate care facility for individuals with intellectual disabilities authorized by the Washington state department of social and health services, developmental disabilities administration.

Citation of Rules Affected by this Order: Amending WAC 182-507-0125.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160. Adopted under notice filed as WSR 24-13-044 on June 11, 2024.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 1, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 1, Repealed 0. Date Adopted: July 26, 2024.

Wendy Barcus Rules Coordinator

OTS-5450.1

 $\underline{\text{AMENDATORY SECTION}}$ (Amending WSR 23-04-034, filed 1/25/23, effective 2/25/23)

WAC 182-507-0125 State-funded long-term care services. (1) Caseload limits.

- (a) The state-funded long-term care services program is subject to caseload limits determined by legislative funding.
- (b) The aging and long-term support administration (ALTSA) or the <u>developmental disabilities administration (DDA)</u> must preauthorize state-funded long-term care service before payments begin.
- (c) ALTSA <u>or DDA</u> cannot authorize a service, under chapter 388-106 WAC <u>or under chapter 388-825 WAC</u>, if doing so would exceed statutory caseload limits.
- (2) Location of services. State-funded long-term care services may be provided in:
 - (a) The person's own home, defined in WAC 388-106-0010;
 - (b) An adult family home, defined in WAC 182-513-1100;
 - (c) An assisted living facility, defined in WAC 182-513-1100;

- (d) An enhanced adult residential care facility, defined in WAC 182-513-1100;
- (e) An adult residential care facility, defined in WAC 182-513-1100; ((or))
- (f) A nursing facility, defined in WAC 182-500-0050, but only if nursing facility care is necessary to sustain life; or
- (g) A residential habilitation center, defined in WAC 388-835-0010, that is an intermediate care facility for individuals with intellectual disabilities (ICF/IID), defined in WAC 182-500-0050.
- (3) Client eligibility. To be eligible for the state-funded longterm care services program, a person must meet all of the following conditions:
- (a) General eligibility requirements for medical programs under WAC 182-503-0505, except (c) and (d) of this subsection;
 - (b) Be age 19 or older;
- (c) Reside in one of the locations under subsection (2) of this section;
 - (d) Attain institutional status under WAC 182-513-1320;
- (e) Meet the functional eligibility requirements under WAC 388-106-0355 for nursing facility level of care or under WAC 388-845-0030 for ICF/IID level of care;
- (f) Not have a penalty period due to a transfer of assets under WAC 182-513-1363;
- (g) Not have equity interest in a primary residence more than the amount under WAC 182-513-1350; and
- (h) Meet the requirements under chapter 182-516 WAC for annuities owned by the person or the person's spouse.
 - (4) General limitations.
- (a) If a person entered Washington only to obtain medical care, the person is ineligible for state-funded long-term care services.
- (b) The certification period for state-funded long-term care services may not exceed 12 months.
- (c) People who qualify for state-funded long-term care services receive categorically needy (CN) medical coverage under WAC 182-501-0060.
- (5) Supplemental security income (SSI)-related program limitations.
- (a) A person who is related to the SSI program under WAC 182-512-0050 (1), (2), and (3) must meet the financial requirements under WAC 182-513-1315 to be eligible for state-funded long-term care services.
- (b) An SSI-related person who is not eligible for the state-funded long-term care services program under CN rules may qualify under medically needy (MN) rules under WAC 182-513-1395.
- (c) The agency determines how much an SSI-related person is required to pay toward the cost of care, using:
- (i) WAC 182-513-1380, if the person resides in a nursing facility or residential habilitation center.
- (ii) WAC 182-515-1505 or 182-515-1510, if the person resides in one of the locations listed in subsection (2)(a) through (e) of this section.
- (6) Modified adjusted gross income (MAGI)-based program limita-
- (a) A person who is related to the MAGI-based program may be eligible for state-funded long-term care services under this section and chapter 182-514 WAC if the person resides in a nursing facility.

- (b) A MAGI-related person is not eligible for residential or inhome care state-funded long-term care services unless the person also meets the SSI-related eligibility criteria under subsection (5)(a) of this section.
- (c) A MAGI-based person does not pay toward the cost of care in a nursing facility.
- $(\tilde{7})$ Current resource, income, PNA, and room and board standards are found at www.hca.wa.gov/free-or-low-cost-health-care/i-helpothers-apply-and-access-apple-health/program-standard-income-andresources.