

WAC 182-530-7700 Reimbursement—Dual eligible clients/medicare.

For clients who are dually eligible for medical assistance and medicare benefits, the following applies:

(1) The agency pays medicare coinsurance, copayments, and deductibles for Part A, Part B, and medicare advantage Part C, subject to the limitations in WAC 182-502-0110.

(2) Medicare Part D:

(a) Medicare is the payer for drugs included in the medicare Part D benefit.

(b) The agency does not pay for Part D drugs or Part D copayments.

(c) For drugs excluded from the medicare Part D benefit:

(i) The agency offers the same drug benefit as a nondual eligible client has within those same classes;

(ii) If the client has another third party insurer, that insurer is the primary payer; and

(iii) The agency is the payer of last resort.

[Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 17-07-001, § 182-530-7700, filed 3/1/17, effective 4/1/17. Statutory Authority: RCW 41.05.021, 2011 c 5, 2010 2nd sp.s. c 1 § 208 (25), and Section 1902 (n)(3)(B) of the Social Security Act, as modified by Section 4714 of the Balanced Budget Act of 1997. WSR 13-14-052, § 182-530-7700, filed 6/27/13, effective 7/28/13. WSR 11-14-075, recodified as § 182-530-7700, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.04.050, 74.08.090, 74.09.530, and 74.09.700. WSR 07-20-049, § 388-530-7700, filed 9/26/07, effective 11/1/07.]