- WAC 182-538A-060 Fully integrated managed care and choice. (1) The medicaid agency requires a client to enroll in a fully integrated managed care (FIMC) managed care organization (MCO) when that client:
 - (a) Is eligible;
- (b) Resides in a mandatory enrollment FIMC regional service area; and
 - (c) Is not exempt from FIMC enrollment under WAC 182-538A-130.
- (2)(a) American Indian and Alaska native (AI/AN) clients and their descendants may choose one of the following:
- (i) Enrollment with an FIMC MCO available in their regional service area;
- (ii) Enrollment with a primary care case management (PCCM) provider through a tribal clinic or urban Indian center available in their area; or
 - (iii) The agency's fee-for-service system.
- (b) To enroll with an FIMC MCO or PCCM provider, an AI/AN client may:
 - (i) Call the agency's toll-free enrollment line at 800-562-3022;
- (ii) Enroll online through the Washington Healthplanfinder at https://www.wahealthplanfinder.org; or
- (iii) Go to the ProviderOne client portal at https://www.waproviderone.org/client and follow the prompts.
- (3) A client must enroll with an FIMC MCO available in the regional service area where the client resides.
- (4) The agency enrolls all family members with the same FIMC MCO, if available.
- (5) If a family member is enrolled in the patient review and coordination (PRC) program, that family member must follow the rules in WAC 182-501-0135.
- (6) When a client requests enrollment with an FIMC MCO or PCCM provider, the agency enrolls a client effective the first day of the current month a client becomes eligible.
 - (7) To enroll with an FIMC MCO, a client may:
 - (a) Call the agency's toll-free enrollment line at 800-562-3022;
- (b) Enroll online through the Washington Healthplanfinder at https://www.wahealthplanfinder.org; or
- (c) Go to the ProviderOne client portal at https://www.waproviderone.org/client and follow the prompts.
- (8) The agency assigns a client who does not choose an FIMC MCO or PCCM provider as follows:
- (a) If the client has a family member or members enrolled with an FIMC MCO, the client is enrolled with that FIMC MCO;
- (b) If the client has a family member or members enrolled with a PCCM provider, the client is enrolled with that PCCM provider;
- (c) The client is reenrolled within the previous six months with their prior MCO plan if:
- (i) The agency identifies the prior MCO and the program is available; and
- (ii) The client does not have a family member enrolled with an agency-contracted MCO or PCCM provider.
- (d) If the client has a break in eligibility of less than two months, the client will be automatically reenrolled with his or her previous MCO or PCCM provider and no notice will be sent; or
- (e) If the client cannot be assigned according to (a), (b), (c), or (d) of this subsection, the agency assigns the client according to agency policy.

- (9) An FIMC enrollee's selection of a primary care provider (PCP) or assignment to a PCP occurs as follows:
 - (a) An FIMC enrollee may choose:
- (i) A PCP or clinic that is in the enrollee's FIMC MCO's provider network and accepting new enrollees; or
- (ii) A different PCP or clinic participating with the enrollee's FIMC MCO's provider network for different family members.
- (b) The FIMC MCO assigns a PCP or clinic that meets the access standards described in the relevant managed care contract if the enrollee does not choose a PCP or clinic.
- (c) An FIMC enrollee may change PCPs or clinics for any reason, provided the PCP or clinic is within the enrollee's FIMC MCO's provider network and accepting new enrollees.
- (d) An FIMC enrollee may file a grievance with the FIMC MCO if the FIMC does not approve an enrollee's request to change PCPs or clinics.
- (e) Enrollees required to participate in the agency's PRC program may be limited in their right to change PCPs (see WAC 182-501-0135).

[Statutory Authority: RCW 41.05.021, 41.05.160, and 74.09.873. WSR 19-11-080, § 182-538A-060, filed 5/17/19, effective 6/17/19. Statutory Authority: RCW 41.05.021, 41.05.160. WSR 16-05-051, § 182-538A-060, filed 2/11/16, effective 4/1/16.]