

WAC 182-538A-190 Behavioral health services only (BHSO). This section applies to enrollees receiving behavioral health services only (BHSO) under the fully integrated managed care (FIMC) medicaid contract.

(1) The medicaid agency requires eligible clients in FIMC regional service areas to enroll in the BHSO program.

(2) A BHSO enrollee in an FIMC regional service area may change managed care organizations (MCOs) but may not disenroll from the BHSO program.

(3) For BHSO enrollees, the MCO covers the behavioral health benefit included in the FIMC medicaid contract.

(4) WAC 182-538-110 applies to BHSO enrollees in FIMC regional service areas.

(5) The agency assigns the BHSO enrollee to an MCO available in the area where the client resides.

(6) A BHSO enrollee may change MCOs for any reason with the change becoming effective according to the agency's managed care policy.

[Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 17-07-087, § 182-538A-190, filed 3/20/17, effective 4/20/17; WSR 16-05-051, § 182-538A-190, filed 2/11/16, effective 4/1/16.]