

WAC 182-557-0050 Health home—General. (1) The agency's health home program provides patient-centered care to participants who:

(a) Have at least one chronic condition as defined in WAC 182-557-0100; and

(b) Are at risk of a second chronic condition as evidenced by a minimum predictive risk score of 1.5.

(2) The health home program offers six care coordination activities to assist participants in self-managing their conditions and navigating the health care system:

(a) Comprehensive or intensive care management including, but not limited to, assessing participant's readiness for self-management, promoting self-management skills, coordinating interventions tailored to meet the participant's needs, and facilitating improved outcomes and appropriate use of health care services;

(b) Care coordination and health promotion;

(c) Comprehensive transitional care between care settings including, but not limited to, after discharge from an inpatient facility (hospital, rehabilitative, psychiatric, skilled nursing, substance use disorder treatment or residential habilitation setting);

(d) Individual and family support services to provide health promotion, education, training and coordination of covered services for participants and their support network;

(e) Referrals to community and support services; and

(f) Use of health information technology (HIT) to link services between the health home and participants' providers.

(3) The agency's health home program does not:

(a) Change the scope of services for which a participant is eligible under medicare or a Title XIX medicaid program;

(b) Interfere with the relationship between a participant and his or her chosen agency-enrolled provider(s);

(c) Duplicate case management activities the participant is receiving from other providers or programs; or

(d) Substitute for established activities that are available through other programs administered by the agency or other state agencies.

(4) Qualified health home providers must:

(a) Contract with the agency to provide services under this chapter to eligible participants;

(b) Accept the terms and conditions in the agency's contract;

(c) Be able to meet the network and quality standards established by the agency;

(d) Accept the rates established by the agency; and

(e) Comply with all applicable state and federal requirements.

[Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 15-17-065, § 182-557-0050, filed 8/14/15, effective 9/14/15. Statutory Authority: RCW 41.05.021. WSR 13-21-048, § 182-557-0050, filed 10/11/13, effective 11/11/13. Statutory Authority: RCW 41.05.021 and 2011 c 316. WSR 13-12-002, § 182-557-0050, filed 5/22/13, effective 7/1/13. WSR 11-14-075, recodified as § 182-557-0050, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, 74.09.520, and 2007 c 259, § 4. WSR 07-20-048, § 388-557-0050, filed 9/26/07, effective 11/1/07.]