

WAC 388-106-1220 How are respite care providers reimbursed for their services through the family caregiver support program? The department reimburses:

(1) Respite care providers for the number of hours or days of services authorized and provided. If the provider already has a medic-aid rate established for providing a similar service, that rate is to be reimbursed by the local area agency on aging. If there is no established rate for the service, one can be negotiated between the local area agency on aging and the respite care service provider.

(2) Medicaid-certified licensed residential facilities providing respite services at the medicaid rate approved for that facility. Medicaid contracted providers must not charge more than the medicaid rate for any services covered from the date of eligibility, unless authorized by the department (see RCW 18.51.070). Participants must pay for services not included in the medicaid rate.

(3) Private nursing homes at their published daily rate.

[Statutory Authority: RCW 74.08.090 and 74.09.520. WSR 12-13-040, § 388-106-1220, filed 6/13/12, effective 7/14/12; WSR 05-11-082, § 388-106-1220, filed 5/17/05, effective 6/17/05.]