WSR 15-17-010 PERMANENT RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 15-245—Filed August 6, 2015, 4:26 p.m., effective September 6, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: Amend rules for recreational salmon fishing in coastal freshwater bodies based on 2015 North of Falcon recommendations. Rules for recreational salmon fishing change year to year to reflect resource availability and achieve conservation goals. Amendments to other recreational fishing in freshwater waterbodies (WAC 220-55-220, 220-55-230, 220-56-105, 220-56-180, 220-56-282, 220-310-175, 220-310-185, 220-310-190, 220-310-195, 220-310-200, 232-28-620, and 232-28-621) occurred under a separate filing (WSR 15-13-081 on June 12, 2015).

Citation of Existing Rules Affected by this Order: Amending WAC 220-310-180.

Statutory Authority for Adoption: RCW 77.04.012, 77.04.013, 77.04.020, 77.04.055, and 77.12.047.

Adopted under notice filed as WSR 15-12-117 on June 3, 2015.

Changes Other than Editing from Proposed to Adopted Version: The following changes were made after the CR-102 was filed for language consistency, clarification, or as a result of public response during the North of Falcon sport fishing process.

WAC 220-310-180 Freshwater exceptions to statewide rules—Coast.

- 1. Hoh River, south Fork (Jefferson County), outside of the Olympic National Park boundary: The provision "Open August 1 in June through April 15," was changed for clarity and consistency to "Open August 1 through April 15."
- 2. Hoquiam River, including the East and West forks (Grays Harbor County): The salmon limit from December 1 through December 31 was corrected to say, "...only 1 adult may be retained." Previously, the rule said two adults may be retained.
- 3. Sol Duc River (Clallam County): The salmon retention language for the September 1 through November 30 season opener from the mouth to the concrete pump station at the Sol Duc Hatchery was revised for clarity and consistency. Initially the language was: "Limit 6; only 3 adult salmon may be retained, only one may be a wild adult." The language now reads, "Limit 6; only 3 adult salmon may be retained, and only one may be a wild adult."

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 6, 2015.

J. W. Unsworth, Director Fish and Wildlife Commission

AMENDATORY SECTION (Amending WSR 14-16-027, filed 7/25/14, effective 8/25/14)

WAC 220-310-180 Freshwater exceptions to statewide rules—Coast. (1) Aberdeen Lake (Grays Harbor County):

- (a) Open the fourth Saturday in April through October 31.
- (b) Trout: No more than 2 trout over 15 inches in length may be retained.
- (2) Alder Creek (Pacific County) (Naselle River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
 - (3) ((Aldwell Lake (Clallam County): Closed.
 - (4))) Anderson Lake (Jefferson County):
- (a) Open the fourth Saturday in April through October 31; fishing from a floating device equipped with an internal combustion motor prohibited.
 - (b) Open September 1 through October 31:
 - (i) Selective gear rules apply.
 - (ii) Trout: Catch and release only.

$((\frac{(5)}{(5)}))$ (4) Bear Creek (Clallam County) (Bogachiel River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

$((\frac{(6)}{(6)}))$ (5) Bear Creek (Clallam County) (Sol Duc River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

$((\frac{7}{1}))$ (6) Bear River (Pacific County):

- (a) Open the first Saturday in June through March 31.
- (b) August 16 through November 30: Night closure in effect.
- (i) From the mouth (Highway 101 Bridge) to Lime Quarry Road (approximately two river miles):
 - (A) August 16 through November 30:
 - (I) Barbless hooks required.
 - (II) Anti-snagging rule applies.
- (B) Release all fish, except anglers may retain up to 2 hatchery steelhead.
 - (C) Salmon:
- (I) Open September 1 through ((November 30)) January 31.

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- (II) Limit 6 fish; ((no more than 2)) only 4 may be adults((, and no more than one wild adult coho may be retained)).
 - (III) Release ((chum and)) wild Chinook.
- (ii) From the Lime Quarry Road upstream to the Longview Fiber Bridge:
 - (A) Selective gear rules apply.
- (B) Release all fish, except anglers may retain up to 2 hatchery steelhead.

$((\frac{8}{2}))$ (7) Beaver Creek (Clallam County) (Sol Duc River tributary):

- (a) From the mouth upstream to Beaver Falls:
- (i) Open the first Saturday in June through October 31.
- (ii) Selective gear rules apply.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (b) From Beaver Falls upstream to Beaver Lake: Open the first Saturday in June through October 31.

$((\frac{9}{2}))$ (8) Beaver Lake (Clallam County):

- (a) Selective gear rules apply.
- (b) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (c) Trout: Maximum length 12 inches.

(((10))) (9) Big Creek (Grays Harbor County):

- (a) Open the first Saturday in June through ((the last day in)) October 31.
 - (b) Selective gear rules apply.

(((11))) (10) Big Quilcene River (Jefferson County):

- (a) From the mouth to Rodgers Street:
- (i) Open the first Saturday in June through August 15.
- (ii) Selective gear rules apply.
- (iii) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (iv) Catch and release only.
 - (b) From Rodgers Street to the Highway 101 Bridge:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Catch and release only.
 - (iii) From the first Saturday in June through August 15:
 - (A) Selective gear rules apply.
- (B) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (iv) August 16 through October 31:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
 - (v) Salmon:
 - (A) Open August 16 through October 31.
- (B) Limit 4 coho only; only coho hooked inside the mouth may be retained.
- (c) From the electric weir at Quilcene National Fish Hatchery to the upper boundary of Falls View campground:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
 - (iii) Catch and release only.
- (d) From the upper boundary of Falls View campground upstream: Open the Saturday before Memorial Day through October 31.

$((\frac{(12)}{12}))$ (11) Big River (Clallam County), outside of Olympic National Park:

- (a) Open the first Saturday in June through October 15, and January 1 through the last day of February.
 - (b) Selective gear rules apply.
- (c) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (d) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release kokanee.

(((13))) (12) Black Creek (Grays Harbor County) (Wynoochee River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((14))) <u>(13)</u> **Black Lake (Pacific County):** Open the fourth Saturday in April through October 31.

$((\frac{(15)}{15}))$ (14) Black River (Grays Harbor/Thurston counties):

- (a) From the mouth to State Highway 12:
- (i) Open the first Saturday in June through October 31.
- (ii) Selective gear rules apply.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (b) From Highway 12 to bridge on 128th Ave. S.W.:
 - (i) Anti-snagging rule applies.
 - (ii) Night closure in effect.
 - (iii) Barbless hooks are required.
- (iv) Open for game fish the first Saturday in June through October 31; trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (v) Salmon open October 1 through January 31:
 - (A) From October 1 through November 30:
 - (I) Limit 6; only 2 adults may be retained.
 - (II) Release Chinook and chum.
 - (B) From December 1 through January 31:
- (I) Limit 6; only 2 adults may be retained and only one may be a wild adult ((may be wild)) coho.
 - (II) Release Chinook and chum.
- (c) From bridge on 128th Avenue S.W. (west of Littlerock) to Black Lake:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.

$((\frac{16}{16}))$ (15) Bogachiel River (Clallam County):

- (a) From the mouth to Highway 101 Bridge:
- (i) Open the first Saturday in June through April 30.
- (ii) Trout:
- (A) From the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (B) From April 1 through April 30: Trout minimum length 14 inches.
- (C) November 1 through last day in February: The limit may include one additional hatchery steelhead.
- (D) February 16 through April 30: It is permissible to retain wild steelhead.

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- (iii) Salmon open July 1 through November 30:
- (A) From July 1 through August 31:
- (I) Limit 6; no more than 2 adults may be retained.
- (II) Release wild adult Chinook and wild adult coho.
- (B) From September 1 through November 30: Limit 6; ((two salmon may be adults, plus 2 additional adult hatchery eoho)) only one adult may be retained.
- (b) From Highway 101 Bridge to Olympic National Park boundary:
 - (i) Open the first Saturday in June through April 30.
- (ii) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (iii) Selective gear rules apply.
- (iv) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length, as part of the limit.
 - (((17))) (16) Bone River (Pacific County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((18))) (17) Bunker Creek (Lewis County) (Chehalis River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((19))) (18) Butte Creek (Pacific County) (Smith River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
 - (((20))) (19) Calawah River (Clallam County):
 - (a) From the mouth to the Highway 101 Bridge:
 - (i) Open the first Saturday in June through April 30.
 - (ii) Trout:
- (A) From the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (B) From April 1 through April 30: Trout minimum length 14 inches.
- (C) From November 1 through the last day in February: The limit may include one additional hatchery steelhead.
- (D) From February 16 through April 30: It is permissible to retain wild steelhead.
 - (iii) Salmon open July 1 through November 30:
 - (A) From July 1 through August 31:
- (I) Limit 6; ((no more than)) only 2 adults may be retained.
 - (II) Release wild adult Chinook and wild adult coho.
- (B) From September 1 through November 30: Limit 6; ((up to two salmon may be adults, plus up to 2 additional adult hatchery coho)) only one adult may be retained.
 - (b) From the Highway 101 Bridge to the forks:
 - (i) Open the first Saturday in June through April 30.
- (ii) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (iii) Selective gear rules apply.
- (iv) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length, as part of the limit.
- $((\frac{(21)}{2}))$ (20) Calawah River, North Fork (Clallam County):
 - (a) Open the first Saturday in June through October 31.

- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

$(((\frac{(22)}{2})))$ (21) Calawah River, South Fork (Clallam County):

- (a) Open the first Saturday in June through the last day in February from the mouth to the Olympic National Park boundary.
 - (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((23))) (22) Cases Pond (Pacific County):

- (a) Open the fourth Saturday in April through November 30 to juvenile anglers only.
 - (b) Landlocked salmon rules apply.
- $((\frac{(24)}{)})$ (23) Cedar Creek (Clallam County), outside of Olympic National Park:
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((25))) (24) Cedar Creek (Grays Harbor/Thurston counties) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- $(((\frac{26}{2})))$ (25) Cedar Creek (Jefferson County), outside Olympic National Park:
- (a) Open the first Saturday in June through the last day in February.
 - (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((27))) (26) Cedar River (Pacific County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

$((\frac{(28)}{)})$ (27) Chehalis River (Grays Harbor County), including all channels, sloughs, and interconnected waterways:

- (a) From the mouth (Highway 101 Bridge in Aberdeen) to ((the high bridge on Weyerhaeuser 1000 line (approximately 400 yards downstream from Roger Creek, south of Pe EII))) South Elma Bridge (Wakefield Road) including all channels, sloughs, and interconnected waterways:
- (i) ((Open August 16)) <u>All species July 1</u> through November 30:
 - (A) Single-point barbless hooks are required.
- (B) Anglers may fish with two poles from the mouth to the South Elma Bridge (Wakefield Road), provided they possess a valid two-pole endorsement.
 - (ii) Gamefish:
 - (A) Open the first Saturday in June through April 15:
- (B) Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon:

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- (A) Open May 1 through June 30: (((I) Open from the mouth Highway 6 Bridge in the town of Adna only.
 - (II))) Limit one salmon.
 - (B) ((August 16)) Open July 1 through November 30:
- (I) ((Open from the mouth to the confluence with the Black River only:
- (II))) Limit 6; ((no more than)) only 3 adults may be retained.
 - (((III))) (II) Release adult Chinook.
 - (C) ((September 16 through November 30:
- (I) Open from the confluence with the Black River to the Highway 6 Bridge in the town of Adna.
 - (II) Limit 6; no more than 3 adults may be retained.
 - (III) Release chum and adult Chinook.
 - (D) October 1 through November 30:
- (I) Open from the Highway 6 Bridge in the town of Adna to the high bridge on Weyerhaeuser 1000 line approximately 400 yards downstream of Roger Creek (south of Pe Ell) only.
 - (II) Limit 6; no more than 3 adults may be retained.
 - (III) Release Chinook and chum.
 - (E))) December 1 through January 31:
- (I) ((Open from the mouth to the confluence with the Black River.
- (II))) Limit 6; ((no more than 2 may be adults,)) only 2 adults may be retained and only one ((adult)) may be a wild adult coho ((may be retained)).
 - (((HH))) (II) Release Chinook.
 - (((F) December 1 through January 31:
- (I) Open from the confluence with the Black River to the high bridge on Weyerhaeuser 1000 line approximately 400 yards downstream of Roger Creek (south of Pe Ell).
- (II) Limit 6; no more than 2 adult salmon, and only one adult wild coho may be retained.
 - (III) Release chum and Chinook.
- (iv) Sturgeon: It is permissible to fish for sturgeon 24 hours per day; catch and release only.))
- (b) From South Elma Bridge (Wakefield Road) to the Black River:
- (i) All species: Single-point barbless hooks are required August 16 through November 30.
 - (ii) Gamefish:
 - (A) Open the first Saturday in June through April 15.
- (B) Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon:
 - (A) Open May 1 through June 30: Limit one salmon.
 - (B) Open September 16 through November 30:
 - (I) Limit 6; only 3 adults may be retained.
 - (II) Release adult Chinook.
 - (C) Open December 1 through January 31:
- (I) Limit 6; only 2 adults may be retained, and only one may be a wild adult coho.
 - (II) Release Chinook.
- (c) From Black River to the Highway 6 Bridge in the town of Adna:
- (i) All species August 16 through November 30: Single-point barbless hooks are required.
 - (ii) Gamefish:
 - (A) Open the first Saturday in June through April 15:

- (B) Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon:
 - (A) Open May 1 through June 30: Limit one salmon.
 - (B) Open September 16 through November 30:
 - (I) Limit 6; only 3 adults may be retained.
 - (II) Release adult Chinook and chum.
 - (C) Open December 1 through January 31:
- (I) Limit 6; only 2 adults may be retained and only one may be a wild adult coho.
 - (II) Release Chinook and chum.
- (d) From the Highway 6 Bridge in the town of Adna to the high bridge on Weyerhaeuser 1000 line approximately 400 yards downstream of Roger Creek (south of Pe Ell):
- (i) All species August 16 through November 30: Singlepoint barbless hooks are required.
 - (ii) Gamefish:
 - (A) Open the first Saturday in June through April 15.
- (B) Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon:
 - (A) Open October 1 through November 30:
 - (I) Limit 6; only 3 adults may be retained.
 - (II) Release Chinook and chum.
 - (B) Open December 1 through January 31:
- (I) Limit 6; only 2 adults may be retained and only one may be a wild adult coho.
 - (II) Release Chinook and chum.
- (e) From high bridge on Weyerhaeuser 1000 line (approximately 400 yards downstream from Roger Creek, south of Pe Ell, including all forks) upstream:
 - (i) Open the first Saturday in June through April 15.
 - (ii) Selective gear rules apply.
- (iii) Release all fish, except anglers may retain up to 2 hatchery steelhead.
- $((\frac{(29)}{29}))$ (28) Chehalis River, South Fork (Lewis County):
- (a) From the mouth to County Highway Bridge near Boistfort School:
 - (i) Open the first Saturday in June through April 15.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (b) From the County Highway Bridge near Boistfort School, upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (((30))) (29) Chehalis River Potholes (adjacent to the Chehalis River south of Highway 12 in Grays Harbor County, not including sloughs or beaver ponds): Open the fourth Saturday in April through October 31.
 - (((31))) (30) Chenois Creek (Grays Harbor County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
 - (((32))) (31) Chester Creek (Grays Harbor County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.

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(((33))) (32) Chimacum Creek (Jefferson County):

- (a) From the mouth to Ness's Corner Road:
- (i) Open the first Saturday in June through August 31.
- (ii) Selective gear rules apply.
- (iii) Catch and release only.
- (b) From Ness's Corner Road to headwaters:
- (i) Open the first Saturday in June through October 31.
- (ii) Selective gear rules apply.
- (iii) Catch and release only.

(((34))) (33) Clallam River (Clallam County):

- (a) Open the first Saturday in June through January 31.
- (b) Selective gear rules apply from the first Saturday in June through October 31.
- (c) From the first Saturday in June through October 31: Catch and release only.
 - (d) Trout: Minimum length 14 inches.

(((35))) (34) Clearwater River (Jefferson County):

- (a) From the mouth to Snahapish River:
- (i) Open the first Saturday in June through April 15:
- (A) From February 16 through April 15: It is permissible to retain wild steelhead.
- (B) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Salmon:
 - (A) Open September 1 through November 30.
- (B) Limit 6; ((no more than 2 may be adults)) only one may be an adult.
 - (C) Release wild adult coho.
 - (b) From Snahapish River upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (iii) It is unlawful to fish from a floating device equipped with an internal combustion motor.
- (iv) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length, as part of the limit.

$((\frac{(36)}{)})$ (35) Cloquallum Creek (Grays Harbor County):

- (a) From the mouth to the outlet at Stump Lake:
- (i) Open the first Saturday in June through the last day in February.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length, as part of the limit.
 - (b) From the outlet at Stump Lake upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.

(((37))) (36) Coal Creek (Clallam County) tributary to Ozette River, outside the Olympic National Park boundary:

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length, as part of the limit.
 - (ii) Release kokanee.

(((38))) (37) Connor Creek (Grays Harbor County):

(a) Open the first Saturday in June through October 31.

- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((39))) (38) Cook Creek (Grays Harbor County), from the Quinault Indian Reservation boundary upstream:

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((40))) (39) Copalis River (Grays Harbor County):

- (a) General river rules:
- (i) From the first Saturday in June through last day in February: Open for game fish.
- (ii) It is permissible to retain hatchery steelhead with a dorsal fin height of less than 2 1/8 inches or with an adipose or ventral fin clip.
 - (b) Rules by river section:
 - (i) From the mouth to Carlisle Bridge:
- (A) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (B) Salmon:
 - (I) Open September 1 through January 31.
- (II) Limit 6; ((no more than)) only 2 adult salmon may be retained
 - (III) Release adult Chinook and chum.
- (ii) From Carlisle Bridge upstream: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

$((\frac{(41)}{)}))$ $(\underline{40})$ Crim Creek (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((42))) (41) Crocker Lake (Jefferson County): Closed.

(((43))) (42) Crooked Creek (Clallam County) and tributaries that are outside of Olympic National Park:

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release kokanee.
- (((44))) <u>(43)</u> **Damon Lake (Grays Harbor County):** Open the first Saturday in June through October 31.

(((45))) (44) Deep Creek (Clallam County) (Humptulips River tributary):

- (a) Open December 1 through January 31.
- (b) Selective gear rules apply.
- (c) Release all fish except anglers may retain up to two hatchery steelhead.

(((46))) (45) Deep Creek (Grays Harbor County):

- (a) Open the first Saturday in June through ((last day in)) October 31.
 - (b) Selective gear rules apply.

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(((47))) (46) Delezene Creek (Grays Harbor County) (Chehalis River tributary):

- (a) Open the first Saturday in June through ((last day in)) October 31.
 - (b) Selective gear rules apply.

(((48))) (47) Dickey River (Clallam County):

- (a) From Olympic National Park boundary upstream to the confluence of the East and West forks:
 - (i) Open the first Saturday in June through April 30.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (iii) February 16 through April 30: It is permissible to retain wild steelhead.
 - (iv) Salmon open July 1 through November 30:
 - (A) From July 1 through August 31:
- (I) Limit 6; ((no more than)) only 2 adult salmon may be retained.
 - (II) Release wild adult Chinook and wild adult coho.
- (B) From September 1 through November 30: Limit 6; ((two salmon may be adults, plus 2 additional adult hatchery eoho)) only one adult may be retained.
- (b) From the confluence of the East and West forks upstream (for both forks):
 - (i) Open the first Saturday in June through April 30.
 - (ii) Selective gear rules apply.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((49))) (48) Donkey Creek (Grays Harbor County):

- (a) Open the first Saturday in June through ((last day in)) October 31.
 - (b) Selective gear rules apply.
- (((50))) (<u>49</u>) **Duck Lake (Grays Harbor County):** Crappie limit 10; minimum length 9 inches.

(((51))) (50) Dungeness River (Clallam County):

- (a) From the mouth to the forks at Dungeness <u>Forks</u> Campground:
 - (i) Open October ((8)) 6 through January 31.
 - (ii) Trout: Minimum length 14 inches.
 - (iii) Salmon:
- (A) Open only from the mouth to the hatchery intake pipe at river mile 11.3 from October ((§)) <u>16</u> through December 31.
 - (B) Limit 4 coho only.
- (b) From Gold Creek upstream: Open the Saturday before Memorial Day through October 31.

$((\frac{52}{2}))$ (51) East Twin River (Clallam County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

$((\frac{(53)}{)})(\underline{52})$ Eight Creek (Lewis County) (tributary to Elk Creek, which is a Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

(((54))) (53) Elk Creek (Clallam County), outside of Olympic National Park:

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:

- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release kokanee.

$((\frac{(55)}{54}))$ (54) Elk Creek (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

(((56))) (55) Elk Lake (Clallam County):

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release all kokanee.

(((57))) (56) Elk River (Grays Harbor County):

- (a) From the mouth (Highway 105 Bridge) to the confluence of east and middle branches:
- (i) Open the first Saturday in June through the last day in February.
- (ii) From August 16 through November 30: Single-point barbless hooks are required.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iv) Salmon open October 1 through November 30:
- (A) Limit 6; ((no more than)) only one adult may be retained.
 - (B) Release Chinook.
- (b) From confluence of east and middle branches upstream:
- (i) Open the first Saturday in June through the last day in February.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((58))) (57) Elkhorn Creek (Pacific County) (Smith Creek tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

$((\frac{(59)}{)}))$ (58) Ellis Creek (Pacific County) (Willapa River tributary):

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.

((((60))) (<u>59</u>) Ellsworth Creek (Pacific County) (Naselle River tributary):

- (a) Open the first Saturday in June through September 30.
 - (b) Selective gear rules apply.
 - (((61))) (60) Elwha River (Clallam County): Closed.

(((62))) (61) Failor Lake (Grays Harbor County):

- (a) Open the fourth Saturday in April through ((the last day in)) October 31.
- (b) Trout: It is unlawful to retain more than two trout over 15 inches in length per day.

$((\frac{(63)}{)})$ (62) Fairchild Creek (Pacific County) (Wilson Creek tributary, which is a Willapa River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

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$((\frac{(64)}{)}) (\underline{63})$ Fall River and all forks (Pacific County) (North River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- $((\frac{(65)}{)}))$ (64) Falls Creek (Pacific County) (Willapa River tributary):
 - (a) Open the first Saturday in June through October 15.
 - (b) Selective gear rules apply.
- (((66))) (65) Fern Creek (Pacific County) (Willapa River tributary):
 - (a) Open the first Saturday in June through October 15.
 - (b) Selective gear rules apply.
- (((67))) (66) Finn Creek (Pacific County) (North Nemah River tributary): Open the first Saturday in June through October 31.

(((68))) (<u>67</u>) Fork Creek (Pacific County) (Willapa River tributary):

- (a) From Forks Creek Hatchery rack upstream 500 feet at fishing boundary sign:
- (i) Open only for anglers with disabilities who permanently use a wheelchair and possess a designated harvester companion card.
 - (ii) Night closure in effect.
 - (iii) From October 1 through November 30:
 - (A) Single-point barbless hooks are required.
 - (B) Stationary gear restriction applies.
- (iv) Open the first Saturday in June through July 15 and October 1 through March 31: Release all fish, except anglers may retain up to 2 hatchery steelhead.
 - (v) Salmon((÷)) open October 1 through January 31.
 - (A) From October 1 through November 30:
- (I) Limit 6; ((no more than 3 may be)) only 3 adults may be retained, and only 2 ((adult)) may be wild adult coho ((may be retained)).
 - (II) Release wild Chinook ((and chum)).
 - (B) From December 1 through January 31:
- (I) Limit 6; ((no more than 2 may be)) only 2 adults may be retained, and only one ((ndult)) may be a wild adult coho ((may be retained)).
 - (II) Release wild Chinook ((and chum)).
- (b) From the fishing boundary sign 500 feet above Forks Creek Hatchery rack upstream to the source:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.

(((69))) <u>(68)</u> Garrard Creek (Grays Harbor County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((70))) (69) Gibbs Lake (Jefferson County):
- (a) Selective gear rules apply.
- (b) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (c) Trout: Catch and release only.
- (((71))) <u>(70)</u> Goodman Creek (Jefferson County), outside Olympic National Park:
- (a) Open the first Saturday in June through the last day in February.
 - (b) Selective gear rules apply.

- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (((72))) (71) Grass Creek (Grays Harbor County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((73))) (<u>72</u>) **Gray Wolf River (Clallam County):** From the bridge at river mile 1.0, upstream:
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
 - (c) Catch and release only.
- (((74))) (73) Halfmoon Creek (Pacific County) (Willapa River tributary):
 - (a) Open the first Saturday in June through October 15.
 - (b) Selective gear rules apply.
- ((((75)))) (<u>74)</u> Halfway Creek (Lewis County) (tributary of Stillman Creek, which is a Chehalis River tributary):
- (a) Open the first Saturday in June through October 31 from the mouth to the second bridge crossing on Pe Ell McDonald Road.
 - (b) Selective gear rules apply.
- (((76))) <u>(75)</u> Hanaford Creek (Lewis County) (Skookumchuck River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- $(((\frac{77}{1})))$ (76) Harris Creek (Grays Harbor County) (Chehalis River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Trout: Selective gear rules apply.
 - (((78))) (77) Hoh River (Jefferson County):
- (a) From the Olympic National Park boundary upstream to the DNR Oxbow Campground Boat Launch:
- (i) Open ((the first Saturday in June)) August 1 through April 15.
- (((ii))) (A) From February 16 through April 15: It is permissible to retain wild steelhead.
 - (((iii) From the first Saturday in June through April 15:
- (A) The first Saturday in June)) (B) From August 1 through August 31: Selective gear rules apply.
- (C) From August 1 through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- $((\frac{(B)}{D}))$ (D) From April 1 through April 15: Trout minimum length 14 inches.
- (((C))) (E) From November 1 through February 15: The trout limit may include one additional hatchery steelhead.
- (((iv))) (ii) Salmon open September 1 through November 30: Limit 6; ((no more than 2 adults)) only one adult may be retained.
- (b) From the DNR Oxbow Campground Boat Launch to ((Mortans)) Morgans Crossing Boat Launch site:
- (i) Open ((the first Saturday in June)) August 1 through April 15.
- (A) It is unlawful to fish from a floating device equipped with an internal combustion motor.
- (B) Selective gear rules apply ((the first Saturday in June)) August 1 through October 15 and December 1 through April 15.

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- (ii) From ((the first Saturday in June)) August 1 through April 15: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (iii) Salmon open October 16 through November 30: Limit 6; ((no more than 2 adults)) only one adult may be retained.
- (c) From Morgan's Crossing Boat Launch upstream to the Olympic National Park boundary below mouth of South Fork Hoh River:
 - (i) Selective gear rules apply.
- (ii) It is unlawful to fish from a floating device equipped with an internal combustion motor.
- (iii) Open ((the first Saturday in June)) August 1 through April 15: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (((79))) (78) Hoh River, South Fork (Jefferson County), outside the Olympic National Park boundary:
- (a) Open ((the first Saturday in June)) <u>August 1</u> through April 15.
 - (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - ((80))) (79) Hoko River (Clallam County):
 - (a) From the mouth to the upper Hoko Bridge:
- (i) ((It is permissible to fish up to the hatchery ladder, except)) Closed to fishing ((from shore on the hatchery side of the river)) from the hatchery ladder downstream 100 feet.
- (ii) Open the first Saturday in June through March 15. Open to fly fishing only September 1 through October 31.
 - (iii) Trout: Minimum length fourteen inches.
- (b) From the upper Hoko Bridge to Ellis Creek Bridge (river mile 18.5):
- (i) Open the first Saturday in June through March 31 to fly fishing only.
- (ii) Release all fish except anglers may retain up to two hatchery steelhead.
- (((81))) (80) Hoquiam River, including West Fork (Grays Harbor County):
- (a) From the mouth (Highway 101 Bridge on Simpson) to Dekay Road Bridge (West Fork):
- (i) August 16 through November 30: Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through the last day of February: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon((÷
 - (A))) open October 1 through ((November 30.
 - (B)) December 31:
 - (A) From October 1 through November 30:
- (I) Limit 6; ((no more than)) only 2 adults may be retained.
 - (((C))) (II) Release Chinook.
 - (B) From December 1 through December 31:
 - (I) Limit 6; only one adult may be retained.
 - (II) Release Chinook.
 - (b) From Dekay Road Bridge upstream:

- (i) Open the first Saturday in June through the last day of February.
 - (ii) Selective gear rules apply.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((82))) (81) Hoquiam River, East Fork (Grays Harbor County):

- (a) From the mouth to the confluence of Berryman Creek:
- (i) August 16 through November 30: Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through the last day of February: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon((÷
 - (A))) open October 1 through ((November 30.
 - (B))) <u>December 31.</u>
 - (A) From October 1 through November 30:
- (I) Limit 6; ((no more than)) only 2 adults may be retained.
 - (((C))) (II) Release Chinook.
 - (B) From December 1 through December 31:
 - (I) Limit 6; only 1 adult may be retained.
 - (II) Release Chinook.
- (b) From the confluence of Berryman Creek upstream to Youman's Road Bridge:
- (i) Open the first Saturday in June through the last day of February.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (((83))) (82) Hoquiam River, Middle Fork (Grays Harbor County): From the mouth upstream:
- (a) Open the first Saturday in June through last day of October.
 - (b) Selective gear rules apply.
 - (((84))) (83) Horseshoe Lake (Jefferson County):
 - (a) Open the fourth Saturday in April through October 1.
 - (b) Selective gear rules apply.
- (c) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (d) Trout: Limit one.
 - (((85))) (84) Howe Creek (Jefferson County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
 - (c) Catch and release only.
- $((\frac{(86)}{(85)}))$ (85) Humptulips River (Grays Harbor County):
- (a) From the mouth (Jessie Slough) to the Highway 101 Bridge, including all channels, sloughs, and interconnected waterways:
 - (i) From August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to

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retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

- (iii) Salmon open September 1 through January 31:
- (A) From September 1 through ((Θ etober 31)) September 30:
- (I) Limit 6; ((no more than 3)) only 2 adults may be retained, and only one may be a wild adult Chinook ((may be retained)).
 - (II) Release wild coho.
- (B) From ((November)) October 1 through November ((30)) 15:
- (I) Limit 6; ((no more than 3)) only 2 adults may be retained, and only one may be an adult Chinook.
 - (II) Release ((Chinook and)) wild coho.
- (C) From ((December 1)) <u>November 16</u> through January 31:
- (I) Limit 6: ((No more than)) Only 2 adults may be retained.
 - (II) Release Chinook and wild coho.
- (b) From the Highway 101 Bridge to the confluence of the East and West forks:
- (i) From December 1 through March 31: It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (ii) From August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
 - (iii) Open the first Saturday in June through March 31:
- (A) From the first Saturday in June through the last day in February: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (B) From March 1 through March 31:
- (I) Release all fish, except anglers may retain up to 2 hatchery steelhead.
 - (II) Selective gear rules apply.
 - (iv) Salmon open September 1 through January 31:
- (A) From September 1 through ((October 31)) September 30:
- (I) Limit 6; ((no more than 3)) only 2 adults may be retained, and only one may be a wild adult Chinook ((may be retained)).
 - (II) Release wild coho.
- (B) From ((November)) October 1 through November ((30)) 15:
- (I) Limit 6; ((no more than 3)) only 2 adults may be retained, and only one may be an adult Chinook.
 - (II) Release ((Chinook and)) wild coho.
- (C) From ((December 1)) <u>November 16</u> through January 31:
- (I) Limit 6; ((no more than)) only 2 adults may be retained.
 - (II) Release Chinook and wild coho.
- (((87))) (86) Humptulips River, East Fork (Grays Harbor County):
- (a) From the mouth to the concrete bridge on Forest Service Road 220:
- (i) August 16 through October 31: Anti-snagging rule applies and night closure in effect.

- (ii) Open the first Saturday in June through October 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (b) From the concrete bridge on Forest Service Road 220 upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.

(((88))) (87) Humptulips River, West Fork (Grays Harbor County):

- (a) From the mouth to Donkey Creek:
- (i) August 16 through November 30: Anti-snagging rule applies and night closure in effect.
 - (ii) Open the first Saturday in June through March 31:
- (A) From the first Saturday in June through the last day in February: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (B) From March 1 through March 31:
 - (I) Selective gear rules apply.
- (II) It is unlawful to fish from a floating device equipped with an internal combustion motor.
- (III) Release all fish, except anglers may retain up to 2 hatchery steelhead.
 - (b) From Donkey Creek upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.

(((89))) (<u>88)</u> Independence Creek (Grays Harbor County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

(((90))) (89) Jimmy-Come-Lately Creek (Clallam County):

- (a) From the mouth to confluence with East Fork:
- (i) Open the first Saturday in June through August 31.
- (ii) Selective gear rules apply.
- (iii) Catch and release only.
- (b) From confluence with East Fork upstream, including East Fork: Open the first Saturday in June through October 31

(((91))) (90) Joe Creek (Grays Harbor County):

- (a) From the mouth to Ocean Beach Road Bridge:
- (i) August 16 through November 30: Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through November 30: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon open September 1 through November 30:
- (A) Limit 6; ((no more than)) only 2 adults may be retained.
 - (B) Release adult Chinook and chum.
 - (b) From Ocean Beach Road Bridge upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

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(((92))) (91) Johns River (Grays Harbor County):

- (a) From the mouth (Highway 105 Bridge) to Ballon Creek:
- (i) August 16 through November 30: Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through the last day in February: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon open October 1 through November 30:
- (A) Limit 6; ((no more + than)) only one adult may be retained.
 - (B) Release Chinook.
- (b) From Ballon Creek upstream, including North and South Forks:
- (i) Open the first Saturday in June through September 30 and December 1 through the last day in February.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((93))) (92) Jones Creek (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

(((94))) (93) Kalaloch Creek (Jefferson County), outside Olympic National Park:

- (a) Closed within the section posted as the Olympic National Park water supply.
- (b) Open the first Saturday in June through the last day in February:
 - (i) Selective gear rules apply.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((95))) <u>(94)</u> Leland Creek (Jefferson County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.
- (((96))) (95) **Leland Lake (Jefferson County):** No more than two trout over 14 inches in length may be retained.
- (((97))) (96) Lena Lake, Lower (Jefferson County): The inlet stream is closed from the mouth upstream to the footbridge (about 100 feet).

$((\frac{(98)}{)}))$ (97) Lincoln Creek, including South Fork (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- $((\frac{(99)}{)}))$ (98) **Lincoln Pond (Clallam County):** Open to juvenile anglers only.

(((100))) <u>(99)</u> Little Hoko River (Clallam County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

$((\frac{(101)}{)})$ (100) Little Hoquiam River (Grays Harbor County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

$((\frac{(102)}{101}))$ Little North River and all forks (Grays Harbor County) (North River tributary):

(a) Open the first Saturday in June through October 31.

(b) Selective gear rules apply.

$((\frac{(103)}{(102)}))$ Little Quilcene River (Jefferson County):

- (a) From the mouth to the Little Quilcene River Bridge on Penny Creek Road:
 - (i) Open the first Saturday in June through October 31.
- (ii) From the mouth to Highway 101 Bridge: Closed September 1 through October 31.
 - (iii) Selective gear rules apply.
- (iv) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (v) Catch and release only.
- (b) From Little Quilcene River Bridge on Penny Creek Road upstream: Open the first Saturday in June through October 31.
- (((104))) (103) Long Beach Peninsula waterways and lakes (Pacific County): Open the fourth Saturday in April through October 31.
- (((105))) (104) **Loomis Lake (Pacific County):** Open the fourth Saturday in April through October 31.
- $(((\frac{106}{0})))$ (105) Loomis Pond (Grays Harbor County): Closed.

((((107)))) (<u>106)</u> Lower Salmon Creek and all forks (Grays Harbor/Pacific counties) (North River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

(((108))) (107) Lucas Creek (Lewis County) (tributary to the Newaukum River North Fork):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Catch and release only.

(((109))) (108) Ludlow Creek (Jefferson County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

(((110))) (109) Ludlow Lake (Jefferson County):

- (a) Open the fourth Saturday in April through October
- (b) Trout: It is unlawful to retain more than two trout over 14 inches in length.

(((111))) (110) Lyre River (Clallam County):

- (a) From the mouth to falls near river mile 3:
- (i) Open the first Saturday in June through January 31.
- (ii) Trout: Minimum length 14 inches.
- (b) From the falls to the Olympic National Park boundary:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
 - (iii) Catch and release only.

(((112))) (111) Matheny Creek (Jefferson County) (Queets River tributary), outside Olympic National Park:

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((113))) (112) McDonald Creek (Clallam County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

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(((114))) (113) Middle Nemah River (Pacific County):

- (a) From the mouth upstream to the department of natural resources bridge on the Middle Nemah A-Line Road:
- (i) Open the first Saturday in June through March 31: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (ii) August 1 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
 - (iii) Salmon:
 - (A) Open September 1 through January 31.
- (B) Limit 6; ((anglers may not retain)) no more than ((2)) 4 adults may be retained.
 - (C) Release wild Chinook((, wild coho, and chum)).
- (b) From the department of natural resources bridge on the Middle Nemah A-Line Road upstream:
 - (i) Open the first Saturday in June through March 31:
 - (A) Selective gear rules apply.
- (B) Release all fish except anglers may retain up to 2 hatchery steelhead.
- (ii) August 16 through November 30: Anti-snagging rule applies and night closure in effect.

$((\frac{(115)}{)}))$ $(\underline{114})$ Mill Creek (Pacific County) (Willapa River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((116))) (115) Mill Creek Pond (Grays Harbor County): Open to juvenile anglers only.

(((117))) (<u>116</u>) Mitchell Creek (Lewis County) (tributary to the Newaukum River North Fork):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Catch and release only.

$((\frac{(118)}{(117)}))$ (117) Moclips River (Grays Harbor County):

- (a) Open from the mouth to the Quinault Indian Reservation boundary from the first Saturday in June through the last day in February.
 - (b) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (ii) It is permissible to retain steelhead with a dorsal fin height of less than 2 1/8 inches or with an adipose or ventral fin clip.
 - (c) Salmon is open September 1 through January 31:
- (i) Limit 6; ((no more than)) only 2 adults may be retained.
 - (ii) Release chum and adult Chinook.

(((119))) (118) Morse Creek (Clallam County):

- (a) From the mouth to Port Angeles Dam:
- (i) Open from December 1 through January 31.
- (ii) Trout: Minimum length 14 inches.
- (b) From Port Angeles Dam upstream: Open the first Saturday in June through October 31.

(((120))) (119) Mosquito Creek (Jefferson County):

- (a) Open outside Olympic National Park upstream to the Goodman 3000 Mainline Bridge from the first Saturday in June through the last day in February.
 - (b) Selective gear rules apply.

- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length, as part of the limit.
- (((121))) (120) Mox Chehalis Creek (Grays Harbor County) (Chehalis River tributary): Open the first Saturday in June through October 31: Selective gear rules apply.

$((\frac{(122)}{(121)}))$ (121) Naselle River (Pacific/Wahkiakum counties):

- (a) From the Highway 101 Bridge to the Highway 4 Bridge:
 - (i) From August 1 through November 15:
 - (A) Night closure in effect.
 - (B) Anti-snagging rule applies.
 - (C) Barbless hooks are required.
- (D) From the South Fork upstream to the Highway 4 Bridge: Stationary gear restriction applies.
- (ii) From Highway 101 Bridge upstream to Highway 401: Anglers may fish with ((a two-pole endorsement)) two poles August 1 through January 31, provided they possess a valid two-pole endorsement.
- (iii) Open the first Saturday in June through April 15: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (iv) Salmon open August 1 through January 31:
 - (A) From August 1 through October 31:
- (I) Limit 6; ((no more than 3)) only 4 adults may be retained.
 - (((B))) (II) Release wild Chinook ((and chum)).
 - (B) From November 1 through January 31:
- (I) Limit 6; only 4 adults may be retained and only two adults may be wild coho.
 - (II) Release wild Chinook.
- (b) From the Highway 4 Bridge to the upstream entrance of the Naselle Hatchery Attraction Channel:
- (i) Closed waters from the upstream entrance of the hatchery attraction channel downstream 400 feet.
- (ii) It is unlawful to fish from a floating device equipped with an internal combustion motor.
- (iii) From ((October)) <u>September</u> 16 through November 15:
 - (A) Night closure in effect.
 - (B) Anti-snagging rule applies.
 - (C) Barbless hooks are required.
 - (D) Stationary gear rules in effect.
- (iv) Open the first Saturday in June through July 31 and ((October 6)) September 16 through April 15: Release all fish except anglers may retain up to 2 hatchery steelhead.
- (v) Salmon open ((October)) <u>September</u> 16 through January 31:
 - (A) From September 16 through October 31:
- (I) Limit 6; ((no more than 3)) only 4 adults may be retained.
 - (((B))) (II) Release wild Chinook ((and chum)).
 - (B) From November 1 through January 31:
- (I) Limit 6; only 4 adults may be retained and only two may be wild adult coho.
 - (II) Release wild Chinook.

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- (c) From the upstream entrance of the Naselle Hatchery Attraction Channel to the Crown Mainline (Salme) Bridge:
 - (i) The following areas are closed:
- (A) From the falls in Sec. 6, T10N, R8W (Wahkiakum Co.) downstream 400 feet.
- (B) Downstream of the full spanning concrete diversion structure at the Naselle Hatchery: Closed August 1 through October 15.
- (ii) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (iii) From August 1 through November 15:
 - (A) Night closure in effect.
 - (B) Anti-snagging rule applies.
 - (C) Barbless hooks are required.
 - (D) Stationary gear rules in effect.
- (iv) Open the first Saturday in June through April 15: Release all fish, except anglers may retain up to 2 hatchery steelhead.
 - (v) Salmon open October 16 through January 31:
 - (A) From October 16 through October 31:
- (I) Limit 6; ((no more than 3)) only 4 adults may be retained.
 - (((B))) (II) Release wild Chinook ((and chum)).
 - (B) From November 1 through January 31:
- (I) Limit 6; only 4 adults may be retained and only two may be wild adult coho.
 - (II) Release wild Chinook.
- (d) From the Crown Mainline (Salme) Bridge to the mouth of the North Fork:
- (i) Open the first Saturday in June through April 15: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (ii) From August 16 through November 30:
 - (A) Night closure ((and anti-snagging)) in effect.
 - (B) Anti-snagging rule ((in effect)) applies.
 - (e) Upstream from the mouth of the North Fork:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (iii) Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (((123))) (122) North Naselle River (Pacific County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
 - (((124))) (123) South Naselle River (Pacific County):
- (a) From the mouth to Bean Creek: Open the first Saturday in June through the last day in February.
- (b) From the first Saturday in June through August 15: Selective gear rules apply.
- (c) August 16 through November 30: Anti-snagging rule applies and night closure in effect.
- (d) Release all fish except anglers may retain up to 2 hatchery steelhead.
- (((125))) (124) Neil Creek (Grays Harbor County) (Wynoochee River tributary):
- (a) Open from the mouth to USFS 22 Road from the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- $((\frac{(126)}{}))$ (125) Newaukum River, including South Fork (Lewis County):
 - (a) From the mouth to Leonard Road near Onalaska:

- (i) Open the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
- (iii) Salmon open October 1 through the last day in February:
 - (A) From October 1 through November 30:
- (I) Limit 6; ((no more than)) only 3 adults may be retained.
 - (II) Release Chinook and chum.
 - (B) From December 1 through the last day in February:
- (I) Limit 6; ((no more than)) only 2 adults may be retained, and only one ((adult)) may be a wild adult coho.
 - (II) Release Chinook and chum.
- (b) From Leonard Road near Onalaska to Highway 508 Bridge near Kearny Creek:
- (i) Open the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
 - (c) From Highway 508 Bridge upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
 - (iii) Trout: Catch and release only.
- (iv) August 16 through October 31: Night closure in effect.
- $((\underbrace{(127)}))\,\underbrace{(126)}$ Newaukum River, Middle Fork (Lewis County), from the mouth to Tauscher Road Bridge:
 - (a) Open the first Saturday in June to March 31.
- (b) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length.
- $((\frac{(128)}{127}))$ Newaukum River, North Fork (Lewis County), from the mouth to 400 feet below the Chehalis city water intake:
 - (a) Open the first Saturday in June through March 31.
- (b) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length.
- (((129))) (128) Newman Creek (Grays Harbor County) (Chehalis River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((130))) (129) Newskah Creek (Grays Harbor County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((131))) (130) **Niawiakum River (Pacific County):** From Highway 101 Bridge to the South Bend/Palix Road Bridge:
 - (a) August 16 through November 30:
 - (i) Night closure in effect.
 - (ii) Single-point barbless hooks are required.

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- (b) Open the first Saturday in June through November 30.
 - (c) Salmon((÷)) open September 1 through November 30.
 - (i) ((Open September 1 through November 30.
- (ii))) Limit 6; ((of which no more than 2 may be adult salmon.
 - (iii))) only 2 adults may be retained.
- (ii) Release ((ehum, wild coho, and)) wild Chinook and wild coho.
 - (((132))) (131) North Nemah River (Pacific County):
- (a) From Highway 101 Bridge upstream to the bridge on Nemah Valley Road:
 - (i) Open the first Saturday in June through March 31.
- (ii) Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (iii) From August 1 through November 30:
 - (A) Night closure in effect.
 - (B) Stationary gear restriction applies.
 - (C) Single-point barbless hooks are required.
 - (iv) Salmon((:
- (A))) open August 1 through ((November 30)) January 31.
- (((1))) (A) Limit 6; ((no more than 3)) only 4 adults may be retained ((and only 2 adults may be wild coho)).
 - (((II))) (<u>B)</u> Release ((chum and)) wild Chinook.
 - (((B) Open December 1 through January 31.
- (I) Limit 6; no more than 2 adults may be retained and only one adult may be a wild coho.
 - (II) Release chum and wild Chinook.))
- (b) From the bridge on Nemah Valley Road upstream to ((Cruiser Creek)) Nemah Hatchery barrier dam:
- (i) The ((bridge on)) Nemah ((Valley Road)) <u>Hatchery</u> <u>Bridge</u> upstream to Nemah Hatchery <u>barrier dam</u>: Closed ((August 1 through November 15)).
- (ii) Open the first Saturday in June through <u>July 31 and November 16 through March 31</u>.
- (iii) Release all ((game)) fish except anglers may retain up to 2 hatchery steelhead.
 - (iv) From August 16 through November 30:
 - (A) Anti-snagging rule applies ((and night)).
 - (B) Night closure in effect.
- (v) ((December 1 through March 31:)) Selective gear rules apply <u>December 1 through March 31.</u>
- (c) From the Nemah Hatchery barrier dam upstream to N-700 Road:
 - (i) Open the first Saturday in June through March 31.
- (ii) Release all game fish except anglers may retain up to 2 hatchery steelhead.
 - (iii) From August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Anti-snagging rule applies.
- (iv) Selective gear rules apply from December 1 through March 31:
 - (v) Salmon open October 1 through January 31:
 - (A) Limit 6; only 4 adults may be retained.
 - (B) Release wild Chinook.
 - (d) From the N-700 Road upstream to Cruiser Creek:
 - (i) Open the first Saturday in June through March 31.
- (ii) Release all fish except anglers may retain up to 2 hatchery steelhead.

- (iii) From August 16 through November 30:
- (A) Night closure in effect.
- (B) Anti-snagging rule applies.
- (iv) Selective gear rules apply from December 1 through March 31.

$(((\frac{133}{132})))$ (132) North River (Grays Harbor/Pacific counties):

- (a) From the Highway 105 Bridge to Salmon Creek (located approximately 2 miles upstream from Highway 101):
 - (i) August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through the last day in February: Release all fish except anglers may retain up to 2 hatchery steelhead.
- (iii) Salmon open October 1 through ((December)) <u>January</u> 31:
 - (A) ((From October 1 through November 30:
- (1))) Limit 6; ((no more than 3)) only 4 adults may be retained((, and only 2 adults may be wild coho)).
 - (((II))) (B) Release wild Chinook ((and chum.
 - (B) From December 1 through December 31:
- (I) Limit 6; no more than 2 adults may be retained, and only one adult may be a wild coho.
 - (II) Release wild Chinook and chum)).
- (b) From Salmon Creek (located approximately 2 miles upstream from Highway 101) to Fall River:
 - (i) August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Anti-snagging rule applies.
 - (C) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through the last day in February: Release all fish except anglers may retain up to 2 hatchery steelhead.
- (iii) Salmon open October 1 through ((December)) <u>January</u> 31:
 - (A) ((From October 1 through November 30:
- (1))) Limit 6; ((no more than 3)) only 4 adults may be retained((, and only 2 adults may be wild coho)).
 - (((II))) (B) Release wild Chinook ((and chum.
 - (B) From December 1 through December 31:
- (I) Limit 6; no more than 2 adults may be retained, and only one adult may be a wild coho.
 - (II) Release wild Chinook and chum)).
 - (c) From Fall River to Raimie Creek:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (iii) Release all fish except anglers may retain up to 2 hatchery steelhead.
- (((134))) <u>(133)</u> **Owens Pond (Pacific County):** The first Saturday in June through October 31 season.
- $((\frac{(135)}{134}))$ Palix River, including all forks (Pacific County):
- (a) From the Highway 101 Bridge to the mouth of the Middle Fork:
 - (i) August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.

- (ii) Open the first Saturday in June through March 31: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (iii) Salmon:
- (A) Open September 1 through ((November 30)) January 31.
- (B) Limit 6; ((no more than 2)) only 4 adults may be retained ((and only one adult may be a wild coho)).
 - (C) Release ((chum and)) wild Chinook.
- (b) From the confluence with the Middle Fork upstream and all forks, including South Fork Palix and Canon rivers:
 - (i) August 16 through October 15:
 - (A) Anti-snagging rule applies.
 - (B) Night closure in effect.
- (ii) From the first Saturday in June through August 15, and from December 16 through March 31: Selective gear rules apply.
- (iii) Open the first Saturday in June through October 15, and from December 16 through March 31.
- (iv) Release all fish except anglers may retain up to 2 hatchery steelhead.

(((136))) (135) Palmquist Creek (Clallam County), outside of Olympic National Park:

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release kokanee.
- (((137))) (136) **Peabody Creek (Clallam County):** Open the first Saturday in June through October 31 to juvenile anglers only.
- (((138))) (137) **Penny Creek (Jefferson County):** Open the first Saturday in June through October 31.
- (((139))) (138) **Petroleum Creek (Clallam County):** From the Olympic National Park boundary upstream:
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (((140))) <u>(139)</u> **Pheasant Lake (Jefferson County):** Open the fourth Saturday in April through October 31.

((((141))) (<u>140</u>) Pilchuck Creek (Clallam County) (Sooes River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

$(((\frac{142}{1})))$ (141) Pioneer Creek (Grays Harbor County) (North River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((143))) (142) **Pleasant Lake (Clallam County):** Trout: Kokanee minimum length 6 inches, maximum length 18 inches.

(((144))) (143) Porter Creek (Grays Harbor County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((145))) (144) **Promised Land Pond (Grays Harbor County):** Open the first Saturday in June through October 31.

(((146))) (145) Pysht River (Clallam County):

- (a) Open the first Saturday in June through January 31.
- (b) Selective gear rules apply.
- (c) From the first Saturday in June through October 31: Catch and release only.
- (d) From November 1 through January 31: Trout minimum length 14 inches.

$((\frac{147}{1}))$ (146) Rock Creek (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

$((\frac{(148)}{)})\frac{(147)}{(147)}$ Stearns Creek (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

$(((\frac{149}{1})))$ (148) Stillman Creek (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31 from the mouth to water supply pipeline at Mill Creek.
 - (b) Selective gear rules apply.

$(((\frac{150}{150})))$ (149) Stowe Creek (Lewis County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

(((151))) (150) Quigg Lake (Grays Harbor County):

- (a) Open the first Saturday in June through April 15.
- (b) Trout: Minimum length 14 inches.
- (c) Salmon:
- (i) Open October 1 through January 31.
- (ii) Limit 6 hatchery coho salmon((, of which no more than)); only 4 may be adult hatchery coho.

(((152))) (151) Quillayute River (Clallam County), outside of Olympic National Park: Open year-round.

- (a) ((Open)) From May 1 through the Friday before the first Saturday in June: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (b) ((Open the first Saturday in June through April 30:
- (i))) From the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (((ii))) (c) From April 1 through April 30: Trout minimum length 14 inches.
- (((iii))) (d) From November 1 through the last day in February: Anglers may retain one additional hatchery steelhead as part of the limit.
- (((iv))) (e) From February 16 through April 30: It is permissible to retain wild steelhead.
- $((\frac{(e)}{(e)}))$ (f) Salmon: $((\frac{(i)}{(e)}))$ Open February 1 through $((\frac{\text{August } 31}{(e)}))$ November 30:
 - (i) From February 1 through August 31:
- (A) Limit 6; ((no more than)) only 2 adults may be retained.

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- (B) Release wild adult Chinook and wild adult coho.
- (ii) ((Open)) From September 1 through November 30: Limit 6; ((two)) only 3 adults may be ((adults, plus anglers may retain 2 additional adult hatchery coho)) retained and only one may be a wild adult.
- (((153))) (152) **Quinault River (Grays Harbor County):** From the mouth at the upper end of Quinault Lake upstream to the Olympic National Park boundary:
 - (a) Open the first Saturday in June through April 15:
- (i) February 16 through April 15: It is permissible to retain one wild steelhead per day.
- (ii) Trout: minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (b) Salmon open July 1 through November 30:
 - (i) From July 1 through September 30:
 - (A) Limit 6 jack salmon only.
 - (B) Single-point barbless hooks are required.
 - (ii) From October 1 through November 30:
- (A) Limit 6; ((no more than)) only 2 adults may be retained.
 - (B) Release sockeye and chum.

$(((\frac{154}{})))$ (153) Quinn Creek (Clallam County), outside of Olympic National Park:

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release kokanee.
- (((155))) <u>(154)</u> **Radar Ponds (Pacific County):** Salmon: Landlocked salmon rules apply.

$((\frac{(156)}{)}))$ (155) Raimie Creek and all forks (Pacific County) (North River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

$((\frac{157}{1}))$ (156) Ripley Creek (Jefferson County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

$((\frac{(158)}{)})$ (157) Rock Creek (Grays Harbor County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((159))) (158) Rocky Brook (Jefferson County) (Dosewallips River tributary): From the falls 1000 feet upstream of the mouth: Open the first Saturday in June through October 31.

$((\frac{(160)}{(160)}))$ (159) Rue Creek, including West Fork (Pacific County) (South Fork Willapa tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

(((161))) (160) Salmon Creek and all forks (Grays Harbor County) (North River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

$((\frac{(162)}{)})$ (161) Salmon Creek (Pacific County) (tributary of Naselle River):

- (a) Open the first Saturday in June through the last day in February.
 - (b) Selective gear rules apply.
- (c) Release all fish except anglers may retain up to 2 hatchery steelhead.

(((163))) (162) Salmon River (Jefferson County), outside Olympic National Park and the Quinault Indian Reservation:

- (a) Open the first Saturday in June through the last day in February:
- (i) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (ii) It is permissible to retain steelhead with a dorsal fin height of less than 2 1/8 inches or with an adipose or ventral fin clip.
 - (b) Salmon open September 1 through November 30:
- (i) Limit 6; ((no more than)) only 3 adults may be retained, ((and)) no more than 2 adults may be Chinook, and only one Chinook may be wild.
 - (ii) Release wild adult coho salmon.
- (((164))) <u>(163)</u> **Salt Creek (Clallam County):** From the mouth to the bridge on Highway 112:
 - (a) Open the first Saturday in June through January 31.
 - (b) Selective gear rules apply.
- (c) First Saturday in June through October 31: Catch and release only.
- (d) November 1 through January 31: Anglers may retain up to 2 hatchery steelhead.

(((165))) (164) Sand Creek (Grays Harbor County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (((166))) (<u>165)</u> Sandyshore Lake (Jefferson County):
- (a) Open the fourth Saturday in April through October
- (b) Trout: No more than two over 14 inches in length may be retained.
- (((167))) <u>(166)</u> **Satsop Lakes (Grays Harbor County):** Open the fourth Saturday in April through October 31.

$((\frac{(168)}{(167)}))$ (167) Satsop River and East Fork (Grays Harbor County):

- (a) From the mouth to the bridge at Schafer State Park:
- (i) August 16 through November 30:
- (A) Night closure in effect.
- (B) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon open September 16 through January 31:
 - (A) From September 16 through November 30:
- (I) Limit 6; ((no more than)) only 3 adults may be retained
 - (II) Release wild adult Chinook.
 - (B) From December 1 through January 31:
- (I) Limit 6; ((no more than)) only 2 adults may be retained, and only one may be an wild adult ((wild)) coho.

- (II) Release Chinook.
- (b) From the bridge at Schafer State Park upstream to 400 feet below Bingham Creek Hatchery barrier dam:
- (i) Open the first Saturday in June through October 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Open August 16 through October 31:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
- (c) From 400 feet downstream of the Bingham Creek Hatchery barrier dam upstream to the dam:
- (i) Closed, except open within posted markers to anglers with disabilities who permanently use a wheelchair and possess a designated harvester companion card.
 - (ii) Night closure in effect.
- (iii) From August 16 through October 31: Single-point barbless hooks are required.
- (iv) Open the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (v) Salmon open September 16 through January 31:
 - (A) From September 16 through November 30:
- (I) Limit 6; ((no more than)) only 3 adults may be retained.
 - (II) Release wild adult Chinook.
 - (B) From December 1 through January 31:
- (I) Limit 6; ((no more than)) only 2 adults may be retained, and only one may be ((an)) a wild adult ((wild)) coho.
 - (II) Release Chinook.
 - (d) From the Bingham Creek Hatchery dam upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (iii) August 16 through October 31: Night closure in effect.

$((\frac{(169)}{})))$ (168) Satsop River, Middle Fork (Turnow Branch):

- (a) From the mouth to Cougar Smith Road:
- (i) From August 16 through November 30:
- (A) Anti-snagging rule applies.
- (B) Night closure in effect.
- (ii) Open the first Saturday in June through the last day in February: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (b) From Cougar Smith Road upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
 - (iii) August 16 through October 31:
 - (A) Night closure in effect.
 - (B) Anti-snagging rule applies.

(((170))) (169) Satsop River, West Fork:

- (a) From the mouth to Cougar Smith Road:
- (i) August 16 through November 30:
- (A) Anti-snagging rule applies.
- (B) Night closure in effect.
- (ii) Open the first Saturday in June through the last day in February: Trout minimum length 14 inches, except it is

- permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (b) From Cougar Smith Road to USFS 2260 Road Bridge at Spoon Creek:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (iii) August 16 through October 31: Night closure in effect.
- (c) From USFS 2260 Road Bridge at Spoon Creek upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
 - (iii) Eastern brook trout: Limit 5; no minimum size.

((((171))) (<u>170)</u> Schafer Creek (Grays Harbor County) (Wynoochee River tributary):

- (a) From the mouth to USFS 22 Road:
- (b) Open the first Saturday in June through October 31.
- (c) Selective gear rules apply.

(((172))) (171) Sekiu River (Clallam County):

- (a) From the mouth to the forks:
- (i) Open the first Saturday in June through January 31.
- (ii) From the first Saturday in June through October 31: Selective gear rules apply.
- (iii) November 1 through January 31: Catch and release only.
 - (iv) Trout: Minimum length 14 inches.
 - (b) From the forks upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
 - (iii) Catch and release only.

(((173))) (172) Shine Creek (Jefferson County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.
- $((\frac{(174)}{)})$ (173) Shye Lake (Grays Harbor County): Open the first Saturday in June through October 31.

(((175))) (174) Siebert Creek (Clallam County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

(((176))) (175) Silent Lake (Jefferson County):

- (a) Open the fourth Saturday in April through October
- (b) It is unlawful to fish from a floating device equipped with an internal combustion motor.
- (c) Trout: It is unlawful to retain more than two over 14 inches in length.

((((177)))) (<u>176)</u> Sitkum River (Clallam County) (Calawah River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((178))) (177) Siwash Creek (Clallam County), outside of Olympic National Park:

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:

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- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release all kokanee.

$((\frac{(179)}{(178)}))$ (178) Skookumchuck River (Thurston County):

- (a) From the mouth to 100 feet below the outlet of the PP&L/WDFW steelhead rearing pond located at the base of the Skookumchuck Dam:
 - (i) August 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
 - (ii) Open the first Saturday in June through April 30:
- (A) From the first Saturday in June through March 31, trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (B) From April 1 through April 30: Trout minimum length 14 inches.
- (iii) Salmon open October 1 through the last day in February:
 - (A) From October 1 through November 30:
- (I) Limit 6; ((no more than)) only 3 adults may be retained.
 - (II) Release Chinook and chum.
 - (B) From December 1 through the last day in February:
- (I) Limit 6; ((no more than)) only 2 adults may be retained and only one may be a wild adult coho.
 - (II) Release Chinook and chum.
- (b) From Skookumchuck Reservoir upstream, selective gear rules apply.

((((180))) (<u>179</u>) Smith Creek (near North River) (Pacific County):

- (a) From the mouth to the Highway 101 Bridge:
- (i) August 16 through November 30:
- (A) Night closure in effect.
- (B) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through the last day in February: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (iii) Salmon open October 1 through December 31:
 - (A) From October 1 through November 30:
- (I) Limit 6; ((no more than)) only 3 adults may be retained, and only 2 ((adults)) may be wild adult coho.
 - (II) Release wild Chinook ((and chum)).
 - (B) From December 1 through December 31:
- (I) Limit 6; ((no more than)) only 2 adults may be retained, and only one ((adult)) may be a wild adult coho.
 - (II) Release wild Chinook ((and chum)).
 - (b) From the Highway 101 Bridge upstream:
 - (i) Selective gear rules apply.
- (ii) Open the first Saturday in June through the last day in February: Release all fish except anglers may retain up to 2 hatchery steelhead.

$((\frac{(181)}{)}))$ (180) Smith Creek (Pacific County) (Chehalis River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.

$((\frac{(182)}{(181)}))$ (181) Snahapish River (Jefferson County) (Clearwater River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((183))) (182) Sol Duc River (Clallam County):

- (a) Open year-round from the mouth to the concrete pump station at the Sol Duc Hatchery:
- (i) May 1 through the Friday before the first Saturday in June: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (ii) From the first Saturday in June through April 30:
- (A) The first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (B) April 1 through April 30: Trout minimum length 14 inches.
- (C) November 1 through the last day in February: Anglers may retain one additional hatchery steelhead as part of the trout limit.
- (D) February 16 through April 30: It is permissible to retain wild steelhead.
 - (iii) Salmon open February 1 through November 30:
 - (A) From February 1 through August 31:
- (I) Limit 6; ((no more than)) only 2 adults may be retained
 - (II) Release wild adult Chinook and wild adult coho.
- (III) May 1 through August 31: Closed from the Sol Duc Hatchery outlet creek upstream to the old trestle pilings.
- (B) From September 1 through November 30: Limit 6; ((two)) only 3 adult salmon((, plus 2 additional adult hatchery coho may be retained as part of the limit)) may be retained, and only one may be a wild adult.
- (b) From the concrete pump station at Sol Duc Hatchery to the Highway 101 Bridge upstream of Klahowya Campground:
 - (i) Open the first Saturday in June through April 30.
 - (ii) Selective gear rules apply.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (c) From the Highway 101 Bridge upstream of Klahowya Campground to the Olympic National Park boundary:
 - (i) Open the first Saturday in June through October 31.
- (ii) Release all fish, except anglers may retain up to 2 hatchery steelhead.
 - (iii) Selective gear rules apply.
- (iv) It is unlawful to fish from a floating device equipped with an internal combustion motor.

(((184))) (183) Solberg Creek (Clallam County) (Big River tributary):

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(ii) Release kokanee.

(((185))) (184) Solleks River (Jefferson County) (Clearwater River tributary):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

(((186))) (185) Sooes River (Tsoo-Yess River) (Clallam County), outside of Makah Indian Reservation:

- (a) Open the first Saturday in June through the last day in February.
 - (b) From the first Saturday in June through October 31:
 - (i) Selective gear rules apply.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (c) Open November 1 through the last day in February: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (((187))) (186) South Bend Mill Pond (Pacific County): Open to juvenile anglers only.

$((\frac{(188)}{(187)}))$ South Creek (Clallam County), outside of Olympic National Park:

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release all kokanee.

(((189))) (188) South Nemah River (Pacific County):

- (a) From the mouth (Lynn Point, 117 degrees true to opposite shore) to the confluence with Middle Nemah River:
 - (i) September 1 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through March 31: Release all fish except anglers may retain up to 2 hatchery steelhead
 - (iii) Salmon:
 - (A) Open September 1 through January 31.
 - (B) Limit 6; only ((2)) $\underline{4}$ adults may be retained.
 - (C) Release wild Chinook((, wild coho, and chum)).
- (b) From the confluence with the Middle Nemah River upstream to the second Highway 101 Bridge crossing:
 - (i) Open the first Saturday in June through March 31.
 - (ii) Selective gear rules apply.
- (iii) Release all fish except anglers may retain up to 2 hatchery steelhead.

$((\frac{(190)}{(189)}))$ (189) Stevens Creek (Grays Harbor County):

- (a) From the mouth to the Highway 101 Bridge:
- (i) Closed from the WDFW hatchery outlet downstream $400 \ \text{feet}$.
- (ii) Open the first Saturday in June through September 30 and December 1 through the last day in February.

- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (b) From the Highway 101 Bridge upstream to the Newbury Creek Road Bridge:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.

(((191))) (190) Sutherland Lake (Clallam County):

- (a) Open the fourth Saturday in April through October 31.
- (b) Trout: Minimum length 6 inches and maximum length 18 inches.

((((192))) (191) Sylvia Creek (Grays Harbor County) (Wynoochee River tributary):

- (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((193))) (<u>192</u>) **Sylvia Lake (Grays Harbor County):** It is unlawful to retain more than 2 trout over 15 inches in length.

(((194))) (193) Tarboo Creek (Jefferson County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

(((195))) (194) Tarboo Lake (Jefferson County):

- (a) Open the fourth Saturday in April through October 31.
- (b) It is unlawful to fish from a floating device equipped with an internal combustion motor.
- (c) Trout: It is unlawful to retain more than two over 14 inches in length.

$((\frac{(196)}{(195)}))$ (195) Teal Lake (Jefferson County):

- (a) It is unlawful to fish from a floating device equipped with an internal combustion motor.
 - (b) Selective gear rules apply.
 - (c) Trout: Limit one.

(((197))) (196) Thorndyke Creek (Jefferson County):

- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.

$((\frac{(198)}{(197)}))$ Thunder Creek (Clallam County) (Tributary to East Fork Dickey River):

- (a) Open the first Saturday in June through April 30.
- (b) From D2400 Road upstream: Closed from November 1 through April 30.
 - (c) Selective gear rules apply.
- (d) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

$((\frac{(199)}{(198)}))$ (198) Trap Creek (Pacific County) (Willapa River tributary):

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.

$(((\frac{200}{})))$ (199) Trout Creek (Clallam County) (Big River tributary):

- (a) Open the first Saturday in June through October 15.
- (b) Selective gear rules apply.
- (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.

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- (ii) Release all kokanee.
- $((\frac{(201)}{)}))$ (200) **Twin Lake (Jefferson County):** Open the fourth Saturday in April through October 31.
- (((202))) (201) Umbrella Creek (Clallam County), outside Olympic National Park, including tributaries:
 - (a) Open the first Saturday in June through October 15.
 - (b) Selective gear rules apply.
 - (c) Trout:
- (i) Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Release all kokanee.
- (((203))) (202) **Valley Creek (Clallam County):** Open the first Saturday in June through October 31 to juvenile anglers only.
- $((\frac{(204)}{)})$ (203) Vance Creek (Grays Harbor County) (Chehalis River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- $((\frac{(205)}{)}))$ (204) Vance Creek/Elma Ponds (Grays Harbor County), Pond One (Bowers Lake) and Pond Two (Lake Ines):
- (a) Pond One/Bowers Lake is open only to juvenile anglers, seniors, and anglers with a disability who possess a designated harvester companion card.
- (b) Open the fourth Saturday in April through November 30:
- (i) Anglers may not retain more than 2 trout over 15 inches in length.
 - (ii) Landlocked salmon rules apply.
- $((\frac{(206)}{)}))$ (205) Van Winkle Creek (Grays Harbor County):
 - (a) August 16 through November 30:
 - (i) Night closure in effect.
 - (ii) Anti-snagging rule applies.
- (b) From the mouth to 400 feet below the outlet of Lake Aberdeen Hatchery:
- (i) Open the first Saturday in June through January 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (ii) Salmon open September 1 through January 31:
- (A) Limit 6; ((no more than)) only 3 adults may be retained.
 - (B) Release Chinook.
 - (c) From Lake Aberdeen upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- $(((\frac{207)}{206}))$ (206) Vesta Creek and all forks (Grays Harbor County) (North River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- $((\frac{(208)}{)})(\underline{207})$ Ward Creek (Pacific County) (Willapa River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((209))) (<u>208</u>) **Wentworth Lake (Clallam County):** It is unlawful to fish from a floating device equipped with an internal combustion motor.

- (((210))) (209) West Twin River (Clallam County):
- (a) Open the first Saturday in June through October 31.
- (b) Selective gear rules apply.
- (c) Catch and release only.
- ((((211)))) (<u>210)</u> Wildcat Creek (Grays Harbor County) (Cloquallum Creek tributary):
- (a) Open from the mouth to the confluence of the Middle and East Forks from the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((212))) (<u>211)</u> Wildcat Creek, East Fork (Grays Harbor County) (Cloquallum Creek tributary):
- (a) Open from the mouth to the Highway 108 Bridge (Simpson Avenue, in the town of McCleary) from the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
 - (((213))) (212) Willapa River (Pacific County):
- (a) From the mouth (city of South Bend boat launch) to the Highway 6 Bridge approximately 2 miles below the mouth of Trap Creek:
 - (i) From August 1 through November 30:
- (A) It is unlawful to fish from a floating device from the second bridge on Camp One Road upstream to the mouth of Mill Creek (approximately 0.5 miles).
 - (B) Night closure in effect.
 - (C) Single-point barbless hooks are required.
- (D) Stationary gear restriction applies, except from the mouth of the Willapa River to the WDFW access site at the mouth of Ward/Wilson creeks.
- (ii) From the City of South Bend boat launch upstream to the second bridge on Camp One Road: Anglers may fish with two poles August 1 through January 31, provided they possess a valid two-pole endorsement.
- (iii) Open the first Saturday in June through March 31; release all fish except anglers may retain up to 2 hatchery steelhead.
 - (((iii))) (iv) Salmon open August 1 through January 31:
 - (A) ((From August 1 through November 30:
- (1))) Limit 6; ((no more than 3)) only 4 adults may be retained ((and only 2 adults may be wild coho)).
 - (((H))) (B) Release wild Chinook ((and ehum.
 - (B) From December 1 through January 31:
- (I) Limit 6; no more than 2 adults may be retained and only one adult may be a wild coho.
 - (II) Release wild Chinook and chum)).
 - (b) From Highway 6 Bridge to Fork Creek:
- (i) From ((October 1)) September 16 through November 30:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
 - (C) Stationary gear restriction applies.
- (ii) Open the first Saturday in June through July 15 and from ((October 1)) September 16 through March 31: Release all fish, except anglers may retain up to 2 hatchery steelhead.
- (iii) Salmon open ((October 1)) September 16 through January 31:
 - (A) ((From October 1 through November 30:
- (1))) Limit 6; ((no more than 3)) only 4 adults may be retained ((and only 2 adults may be a wild coho)).
 - (((H))) (B) Release wild Chinook ((and chum.

- (B) From December 1 through January 31:
- (I) Limit 6; no more than 2 adults may be retained, and only one adult may be a wild coho.
 - (II) Release wild Chinook and chum)).
- (c) From Fork Creek upstream to the Highway 6 Bridge near the town of Lebam:
 - (i) From August 16 through October 31:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through October 31: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (iii) Salmon open October 1 through January 31:
- (A) Limit 6; only 4 adults may be retained and only two may be wild adult coho.
 - (B) Release wild Chinook.
- (d) From the Highway 6 Bridge near the town of Lebam upstream:
 - (i) From August 16 through October 31:
 - (A) Night closure in effect.
 - (B) Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through October 31: Release all fish except anglers may retain up to 2 hatchery steelhead.
- (((214))) (213) Willapa River, South Fork (Pacific County): From the mouth to the bridge on Pehl Road:
- (a) From the falls/fish ladder downstream 400 feet in Section 6, Township 13 North, and Range 8 West: Closed.
- (b) Selective gear rules apply from the first Saturday in June through July 31.
 - (c) From August 1 through November 30:
 - (i) Night closure in effect.
 - (ii) Anti-snagging rule applies.
 - (iii) Barbless hooks are required.
- (d) Open the first Saturday in June through the last day in February: Release all fish except anglers may retain up to 2 hatchery steelhead.
 - (e) Salmon((÷
 - (i)) open August 1 through January 31((-
 - (ii)))<u>:</u>
- (i) Limit 6; ((no more than)) only 3 adults may be retained, and only one may be wild adult coho.
- (((iii))) (ii) Release wild Chinook((, wild coho, and chum)).
 - (f) From Pehl Road upstream:
- (i) Open the first Saturday in June through the last day in February.
- (ii) Release all fish except anglers may retain up to 2 hatchery steelhead.
- $((\frac{(215)}{)}))$ (214) Williams Creek (Pacific County) (North Nemah River tributary):
 - (a) Open the first Saturday in June through October 15.
- (b) Release all fish except anglers may retain up to two hatchery steelhead.
- $((\frac{(216)}{)}))$ (215) Wilson Creek (Pacific County) (Willapa River tributary):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.

- $((\frac{(217)}{216}))$ (216) Wilson Creek, North Fork (Pacific County):
 - (a) Open the first Saturday in June through October 31.
 - (b) Selective gear rules apply.
- (((218))) (217) Wishkah River (Grays Harbor County):
- (a) From August 16 through November 30: Single-point barbless hooks are required.
 - (b) From the mouth to West Fork:
- (i) Open the first Saturday in June through the last day in February.
- (ii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon open September 16 through January 31:
 - (A) From September 16 through November 30:
- (I) Limit 6; ((no more than 2)) only 3 adults may be retained, and only 2 may be wild adult coho.
 - (II) Release Chinook.
 - (B) From December 1 through January 31:
- (I) Limit 6; ((no more than)) only 2 adults may be retained, and only one may be a wild adult coho.
 - (II) Release Chinook ((and wild coho)).
- (c) From the mouth of West Fork to 200 feet below the weir at the Wishkah Rearing Ponds:
- (i) From 150 feet upstream to 150 feet downstream of the Wishkah adult attraction channel/outfall structure (within the posted fishing boundary): Open only to anglers with disabilities who permanently use a wheelchair and have a designated harvester companion card.
- (ii) Open the first Saturday in June through the last day in February.
- (iii) Trout: Minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iv) Salmon open September 16 through January 31:
 - (A) From September 16 through November 30:
- (I) Limit 6; ((no more than 2)) only 3 adults may be retained, and only 2 may be wild adult coho.
 - (II) Release Chinook.
- (B) From $((\frac{\text{September } 16}{\text{November } 30}))$ <u>January 31</u>: $((\frac{\text{Release Chinook.}}{\text{Chinook.}})$
- (C) From December 1 through January 31: Release Chinook and wild coho.))
- (I) Limit 6; only 2 adults may be retained and only one may be a wild adult coho.
 - (II) Release Chinook.
 - (d) From the weir upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- $(((\frac{219}{219})))$ (218) Wishkah River, East and West forks (Grays Harbor County):
- (a) Open the first Saturday in June through ((the last day in)) October $\underline{31}$.
 - (b) Selective gear rules apply.
- $((\frac{(220)}{2}))$ (219) Wynoochee River (Grays Harbor County):
- (a) From the mouth to the WDFW White Bridge Access Site:

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- (i) From August 16 through November 30: Single-point barbless hooks are required.
- (ii) Open the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (iii) Salmon((÷
- (A))) open September 16 through ((November 30)) January 31.
- $(((\frac{B)}{B}))$ (A) Limit 6; $((\frac{B}{B}))$ only 2 adults may be retained.
 - (((C))) (B) Release Chinook.
- (b) From the WDFW White Bridge Access Site to the 7400 line bridge:
- (i) From August 16 through November 30: Single-point barbless hooks are required.
- (ii) From September 16 through November 30: It is unlawful to use bait.
- (iii) Open the first Saturday in June through March 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
- (c) From the 7400 line bridge to 400 feet below Wynoochee Dam, including the confluence of the reservoir upstream to Wynoochee Falls:
- (i) Closed from 400 feet downstream of Wynoochee Dam and from the barrier dam near Grisdale.
- (ii) Open the first Saturday in June through October 31 and from December 1 through March 31:
- (A) From the first Saturday in June through October 31: Trout minimum length 14 inches, except it is permissible to retain hatchery (adipose clipped) trout less than 14 inches in length as part of the limit.
 - (B) From December 1 through March 31:
 - (I) Selective gear rules apply.
- (II) Release all fish, except anglers may retain up to 2 hatchery steelhead.
 - (d) From Wynoochee Falls upstream:
 - (i) Open the first Saturday in June through October 31.
 - (ii) Selective gear rules apply.
- (iii) Eastern brook trout limit 5. Eastern brook trout do not count toward the trout limit. However, once the limit of trout other than eastern brook trout is reached, the limit for all species of trout is reached and the angler must cease fishing.
- $((\frac{(221)}{2}))$ (220) Wynoochee Reservoir (Grays Harbor County):
- (a) Open the first Saturday in June through ((the last day in)) October 31.
 - (b) Trout: Minimum length 12 inches.
 - (c) Landlocked salmon rules apply.

WSR 15-17-012 PERMANENT RULES HEALTH CARE AUTHORITY

(Washington Apple Health)

[Filed August 7, 2015, 7:55 a.m., effective September 7, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: This rule amendment is necessary to correct department names and rule numbers and to make other housekeeping changes.

Citation of Existing Rules Affected by this Order: Amending WAC 182-519-0050, 182-519-0100, and 182-519-0110.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160.

Adopted under notice filed as WSR 15-12-098 on June 2, 2015

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 3, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 3, Repealed 0.

Date Adopted: August 7, 2015.

Wendy Barcus Rules Coordinator

AMENDATORY SECTION (Amending WSR 12-20-001, filed 9/19/12, effective 10/20/12)

- WAC 182-519-0050 Monthly income and countable resource standards for medically needy (MN). (1) Changes to the medically needy income level (MNIL) occur on January 1st of each calendar year when the Social Security Administration (SSA) issues a cost-of-living adjustment ((for that year)).
- (2) Medically needy (MN) standards for (($\frac{\text{persons}}{\text{ple}}$)) $\frac{\text{peo-ple}}{\text{ple}}$ who meet institutional status requirements are in WAC (($\frac{388-513-1395}{\text{med}}$)) $\frac{182-513-1395}{\text{med}}$. The standard for a client who lives in an alternate living facility (($\frac{\text{ean be found}}{\text{med}}$)) $\frac{\text{is}}{\text{is}}$ in WAC (($\frac{388-513-1305}{\text{med}}$)) $\frac{182-513-1305}{\text{med}}$.
- (3) The resource standards for institutional programs are ((found)) in WAC ((388-513-1350)) 182-513-1350. The institutional standard chart ((ean be)) is found at http://www.dshs.wa.gov/manuals/eaz/sections/LongTermCare/LTCstandardspna.shtml.
- (4) Countable resource standards for the noninstitutional MN program are:

(a) One person \$2,000
(b) A legally married couple \$3,000
(c) For each additional family member add \$50

(5) ((For individuals)) People who do not meet institutional status requirements((5)) use the "effective" MNIL income standard ((used)) to determine eligibility for the ((medically needy)) MN program ((is the "effective"

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MNIL)). The "effective" MNIL is the one-person federal benefit rate (FBR) established by SSA each year, or the MNIL listed below, whichever amount is higher. The FBR is the supplemental security income (SSI) payment standard. For example, in 2012, the FBR is six hundred ninety-eight dollars.

1	2	3	4	5	6	7	8	9	10
467	592	667	742	858	975	1125	1242	1358	1483

AMENDATORY SECTION (Amending WSR 12-20-001, filed 9/19/12, effective 10/20/12)

- WAC 182-519-0100 Eligibility for the medically needy program. (1) ((An individual)) A person who meets the following conditions may be eligible for medically needy (MN) coverage under the special rules in chapters ((388-513 WAC)) 182-513 and ((388-515)) 182-515 WAC:
- (a) Meets the institutional status requirements of WAC ((388-513-1320)) 182-513-1320;
- (b) Resides in a medical institution as described in WAC ((388-513-1395)) <u>182-513-1395</u>; or
- (c) Receives waiver services under a medically needy inhome waiver (MNIW) ((according to WAC 388-515-1550)) under WAC 182-515-1550 or a medically needy residential waiver (MNRW) ((according to WAC 388-515-1540)) under WAC 182-515-1540.
- (2) ((An SSI-related individual)) A supplemental security income (SSI)-related person who lives in a ((department contracted)) medicaid agency-contracted alternate living facility may be eligible for MN coverage under ((the rules described in WAC 388-513-1305)) WAC 182-513-1305.
- (3) ((An individual)) A person may be eligible for MN coverage under this chapter when he or she is:
- (a) Not covered under subsection (1) and (2) of this section; and
- (b) Eligible for categorically needy (CN) medical coverage in all other respects, except that his or her CN countable income is above the CN income standard.
- (4) MN coverage may be available if the ((individual)) person is:
 - (a) A child;
 - (b) A pregnant woman;
 - (c) A refugee;
- (d) An SSI-related ((individual)) person, including an aged, blind, or disabled ((individual)) person, with countable income under the CN income standard, who is an ineligible spouse of an SSI recipient; or
- (e) A hospice client with countable income ((which is)) above the special income level (SIL).
- (5) ((An individual)) A person who is not eligible for CN medical ((and)) who ((is applying)) applies for MN coverage has the right to income deductions in addition to, or instead of, those used to ((arrive at)) calculate CN countable income. These deductions to income are applied to each month of the base period to ((determine)) calculate MN countable income((. The following deductions are used to calculate countable income for MN)):
- (a) The agency disregards the difference between the medically needy income level (MNIL) described in WAC

- 182-519-0050 and the federal benefit rate (FBR) established by the Social Security Administration each year. The FBR is the one_person ((Supplemental Security Income ())SSI(())) payment standard;
- (b) All health insurance premiums, ((with the exception of)) except for medicare Part A((, Part B, Part C and)) through Part D premiums, expected to be paid by the ((individual)) person or family member during the base period(((s))) or periods;
- (c) Any allocations to a spouse or to dependents for an SSI-related ((individual)) person who is married or who has dependent children. Rules for allocating income are described in WAC 182-512-0900 through 182-512-0960;
- (d) For an SSI-related ((individual)) person who is married and lives in the same home as his or her spouse who receives home and community-based waiver services under chapter ((388-515)) 182-515 WAC, an income deduction equal to the ((medically needy income level ())MNIL(())), minus the nonapplying spouse's income; and
- (e) A child or pregnant woman ((who is)) applying for MN coverage is eligible for income deductions allowed under ((TANF/SFA)) temporary assistance for needy families (TANF) and state family assistance (SFA) rules and not under the rules for CN programs based on the federal poverty level. See WAC ((182-109-0001(4))) 182-509-0001(4) for exceptions to the TANF((/)) and SFA rules ((which)) that apply to medical programs and not to the cash assistance program.
- (6) The MNIL for ((individuals who qualify)) a person who qualifies for MN coverage under subsection (1) of this section is based on rules in ((ehapter 388-513 and 388-515)) chapters 182-513 and 182-515 WAC.
- (7) The MNIL for all other ((individuals)) people is described in WAC 182-519-0050. If ((an individual)) a person has countable income ((which is)) at or below the MNIL, ((he or she)) the person is certified as eligible for up to twelve months of MN medical coverage.
- (8) If ((an individual)) a person has countable income ((which is)) over the MNIL, the countable income that exceeds the agency's MNIL standards is called "excess income."
- (9) ((When individuals have)) A person with "excess income" ((they are)) is not eligible for MN coverage until ((they provide evidence to)) the person gives the agency or its designee evidence of medical expenses incurred by ((themselves)) that person, their spouse, or family members ((who live)) living in the home for whom they are financially responsible. See WAC 182-519-0110(8). An expense ((has been)) is incurred when:
- (a) The ((individual has received the)) person receives medical treatment or medical supplies, is financially liable for the medical expense ((but)), and has not ((yet)) paid the bill; or
- (b) The ((individual has paid)) person pays for the expense within the current or retroactive base period ((described in)) under WAC 182-519-0110.
- (10) Incurred medical expenses or obligations may be used to offset any portion of countable income that is over the MNIL. This is the process of meeting "spenddown."

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- (11) The agency or its designee calculates the amount of ((an individual's)) a person's spenddown by multiplying the monthly excess income amount by the number of months in the certification period ((as described in)) under WAC 182-519-0110. The qualifying medical expenses must be greater than or equal to the total calculated spenddown amount.
- (12) ((An individual)) A person who is considered for MN coverage under this chapter may not spenddown excess resources to become eligible for the MN program. Under this chapter ((individuals are)), a person is ineligible for MN coverage if ((their)) the person's resources exceed the program standard in WAC 182-519-0050. ((An individual)) A person who is considered for MN coverage under WAC ((388-513-1395)) 182-513-1395, 182-514-0250 or 182-514-0255 is allowed to spenddown excess resources.
- (13) There is no automatic redetermination process for MN coverage. ((An individual)) A person must ((submit an application)) apply for each eligibility period under the MN program.
- (14) ((An individual)) A person who requests a timely administrative hearing under WAC 388-458-0040 is not eligible for continued benefits beyond the end of the original certification date under the MN program.

AMENDATORY SECTION (Amending WSR 12-20-001, filed 9/19/12, effective 10/20/12)

- WAC 182-519-0110 Spenddown of excess income for the medically needy program. (1) ((An individual)) A person who applies for ((medical assistance)) Washington apple health (WAH) and is eligible for medically needy (MN) coverage with a spenddown may choose a three-month or a sixmonth base period. A base period is a time period used to compute the ((amount of the)) spenddown liability amount. The months must be consecutive calendar months, unless ((one of the)) a condition((s)) in subsection (4) of this section applies.
- (2) A base period begins on the first day of the month((; in which an individual)) a person applies for ((medical assistance, subject to the exceptions)) WAH, unless a condition in subsection (4) of this section applies.
- (3) ((An individual)) A person may request a separate base period to cover ((the time period)) up to three calendar months immediately ((prior to)) before the month of application. This is called a retroactive base period.
- (4) A base period may vary from the terms in subsections (1), (2), or (3) of this section if:
- (a) A three-month base period would overlap a previous eligibility period; ((or))
- (b) The ((individual)) person has countable resources ((that are)) over the applicable standard for any part of the required base period; ((or))
- (c) The ((individual)) person is not or will not be able to meet the temporary assistance to needy families (TANF)-related or supplemental security income (SSI)-related requirement for the required base period; ((or))
- (d) The ((individual)) person is eligible for categorically needy (CN) coverage for part of the required base period; or

- (e) The ((individual)) person was not otherwise eligible for MN coverage for each ((of the)) month((s)) of the retroactive base period.
- (5) ((An individual's)) The medicaid agency or its designee calculates a person's spenddown liability ((is calculated by the agency or its designee)). The MN countable income from each month of the base period is compared to the effective medically needy income level (MNIL) ((described in)) under WAC 182-519-0050. Income ((which is)) over the effective MNIL standard (based on the ((individual's)) person's household size) in each month in the base period is added together to determine the total spenddown amount.
- (6) If household income varies and ((an individual's)) a person's MN countable income falls below the effective MNIL for one or more months, the difference ((is used to)) offsets the excess income in other months of the base period. ((If this results in)) See WAC 182-519-0100(7) if a spend-down amount ((of)) results in zero dollars and cents((, see WAC 182-519-0100(7))).
- (7) If ((an individual's)) a person's income decreases, the agency or its designee approves CN coverage for each month in the base period when the ((individual's)) person's countable income and resources are equal to or below the applicable CN standards. Children ((under the age of nineteen)) age eighteen and younger and pregnant women who become CN eligible in any month of the base period ((remain)) are continuously eligible for CN coverage for the remainder of the certification, even if there is a subsequent increase in income.
- (8) Once ((an individual's)) <u>a person's</u> spenddown amount ((has been)) <u>is</u> determined, qualifying medical expenses are deducted. ((To be considered)) <u>A</u> qualifying medical expense((, the expense)) must:
- (a) Be an expense for which the ((individual)) person is financially liable;
 - (b) Not have been used to meet another spenddown;
- (c) Not be the confirmed responsibility of a third party. The agency or its designee allows the entire expense if ((the)) a third party has not confirmed its coverage of the expense within:
 - (i) Forty-five days of the date of service; or
 - (ii) Thirty days after the base period ends.
 - (d) Be an incurred expense for the ((individual)) person:
 - (i) The ((individual's)) person's spouse;
- (ii) A family member((,)) residing in the <u>person's</u> home ((of the individual,)) for whom the ((individual)) <u>person</u> is financially responsible; or
- (iii) A relative((-,)) residing in the <u>person's</u> home ((of the individual,)) who is financially responsible for the ((individual)) person.
 - (e) Meet one of the following conditions:
- (i) Be an unpaid liability at the beginning of the base period;
- (ii) Be for <u>paid or unpaid</u> medical services ((either paid or unpaid and)) incurred during the base period;
- (iii) Be for medical services incurred and paid during the three-month retroactive base period if eligibility for ((medical assistance)) WAH was not established in that base period. Paid expenses that meet this requirement may be applied towards the current base period; or

- (iv) Be for medical services incurred during a previous base period ((and)), either unpaid or paid ((for)), if it was necessary for the ((individual)) person to make a payment due to delays in the certification for that base period.
- (9) An exception to ((the provisions in)) subsection (8) of this section exists for qualifying medical expenses ((that have been)) paid on ((behalf of the individual)) the person's behalf by a publicly administered program during the current or the retroactive base period. The agency or its designee uses the qualifying medical expenses to meet the spenddown liability. To qualify for this exception, the program must:
- (a) Not be federally funded or make ((the)) payments from federally matched funds;
- (b) Not pay the expenses ((prior to)) before the first day of the retroactive base period; and
- (c) Provide proof of the expenses paid on the person's behalf ((of the individual)).
- (10) Once the agency or its designee ((has determined that)) determines the expenses ((meet the definition of)) are a qualified medical expense ((as defined in)) under subsection (8) or (9) of this section, the expenses are subtracted from the spendown liability to determine the date the ((individual is eligible)) person's eligibility for medical coverage ((to)) begins. Qualifying medical expenses are deducted in the following order:
- (a) First, medicare and other health insurance deductibles, coinsurance charges, enrollment fees, copayments, and premiums that are the ((individual's)) person's responsibility under medicare Part A((, Part B, Part C and)) through Part D. (Health insurance premiums are income deductions under WAC 182-519-0100(5));
- (b) Second, medical expenses incurred and paid by the ((individual)) person during the three-month retroactive base period if eligibility for ((medical assistance)) WAH was not established in that base period;
- (c) Third, current payments on, or unpaid balance of, medical expenses incurred ((prior to)) before the current base period ((which have not been)) that were not used to establish eligibility for medical coverage in ((any other)) another base period. The agency or its designee sets no limit on the age of an unpaid expense; however, the expense must ((still)) be a current liability and be unpaid at the beginning of the base period;
- (d) Fourth, other medical expenses that ((would not be)) are not covered by the agency's or its designee's medical programs, minus any third-party payments ((which)) that apply to the charges. A licensed health care provider must provide or prescribe the items or services allowed as a medical expense ((must have been provided or prescribed by a licensed health care provider));
- (e) Fifth, other medical expenses ((which have been)) incurred by the ((individual)) person during the base period that are potentially payable by the MN program (minus any confirmed third-party payments that apply to the charges)((5)). This deduction is allowed even if payment is denied for these services because they exceed the agency's or its designee's limits on amount, duration, or scope of care. Scope of care is described in WAC 182-501-0060 and 182-501-0065; and

- (f) Sixth, other medical expenses ((that have been)) incurred by the ((individual)) person during the base period that are potentially payable by the MN program (minus any confirmed third-party payments that apply to the charges) and that are within the agency's or its designee's limits on amount, duration, or scope of care.
- (11) If ((an individual)) a person submits verification of qualifying medical expenses with his or her application that meet((s)) or exceed((s)) the spendown liability, ((he or she)) the person is eligible for MN medical coverage for the remainder of the base period unless their circumstances change. See WAC 388-418-0005 to determine which changes must be reported to the agency or its designee. The beginning of eligibility is determined ((as described in)) under WAC 182-504-0020.
- (12) If ((an individual)) a person cannot meet the spend-down amount ((at the time)) when the application is submitted, the ((individual)) person is not eligible until he or she provides proof of additional qualifying expenses that meet the spenddown liability.
- (13) Each dollar of a qualifying medical expense may count once against a spenddown period that leads to eligibility for MN coverage. However, medical expenses may be used more than once ((under the following circumstances)) if:
- (a) The ((individual)) person did not meet his or her total spenddown liability and become eligible in a previous base period and the bill remains unpaid; or
- (b) The medical expense was ((a bill)) incurred and paid within three months of the current application, and the agency or its designee could not establish <u>WAH</u> eligibility ((for medical assistance)) for the ((individual)) person in the retroactive base period.
- (14) The ((individual)) person must provide the proof of qualifying medical expense((s)) information to the agency or its designee((.The deadline for providing medical expense information is)) within thirty days after the base period ends, unless there is a good reason for delay.
- (15) Once ((an individual)) a person meets the spenddown requirement and the certification begin date ((has been)) is established, newly identified expenses ((eannot be)) are not considered toward that spenddown unless:
- (a) There is a good reason for the delay in submitting the expense; or ((there was an error by))
- (b) The agency or its designee ((in)) made an error when determining the correct begin date.
- (16) Good reasons for delay in providing medical expense information to the agency or its designee include, but are not limited to:
- (a) The ((individual)) person did not receive a timely bill from his or her medical provider or insurance company;
- (b) The ((individual)) <u>person</u> has medical issues that prevent((s)) him or her from submitting proof ((in a timely manner)) <u>on time</u>; or
- (c) The ((individual)) <u>person</u> meets the criteria for needing a supplemental accommodation under chapter 388-472 WAC.
- (17) The agency or its designee ((is not responsible to)) does not pay for any expense or portion of an expense ((that

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has been)) used to meet ((an individual's)) a person's spend-down liability.

- (18) If an expense is potentially payable under the MN program, and only a portion of the medical expense ((has been)) is assigned to meet spenddown, the medical provider ((may)) must not:
- (a) Bill the ((individual)) person for more than the amount ((which was)) assigned to the remaining spenddown liability((\cdot, \cdot)); or
- (b) Accept or retain any additional amount for the covered service from the ((individual)) person. Any additional amount may be billed to the agency or its designee. See WAC 182-502-0160, Billing a client.
- (((18))) (19) The agency or its designee determines whether any payment is due to the medical provider on medical expenses ((that have been)) partially assigned to meet a spenddown liability((, according to)) <u>under</u> WAC 182-502-0100
- (((19))) (<u>20)</u> If the medical expense assigned to spenddown was incurred outside of a period of MN eligibility, or if the expense is not ((the type that is)) covered by ((the agency's or its designee's medical assistance programs)) <u>WAH</u>, the agency or its designee ((is not responsible for)) <u>does not pay</u> any portion of the bill.

WSR 15-17-013 PERMANENT RULES HEALTH CARE AUTHORITY

(Washington Apple Health)

[Filed August 7, 2015, 9:11 a.m., effective September 7, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The agency is adding "institutional review board" and "center of excellence" to the list of general definitions. These terms are used in sections across Title 182 WAC and are appropriate to be added to the agency's general definitions chapter.

Citation of Existing Rules Affected by this Order: Amending WAC 182-500-0020 and 182-500-0050.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160.

Adopted under notice filed as WSR 15-14-047 on June $24,\,2015.$

Changes Other than Editing from Proposed to Adopted Version: The agency removed the proposed definition of "six months."

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 2, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 2, Repealed 0.

Date Adopted: August 7, 2015.

Wendy Barcus Rules Coordinator

AMENDATORY SECTION (Amending WSR 14-16-052, filed 7/29/14, effective 8/29/14)

WAC 182-500-0020 ((Medical assistance)) Washington apple health definitions—C. "Caretaker relative" means a relative of a dependent child by blood, adoption, or marriage with whom the child is living, who assumes primary responsibility for the child's care, and who is one of the following:

- (1) The child's father, mother, grandfather, grandmother, brother, sister, stepfather, stepmother, stepbrother, stepsister, uncle, aunt, first cousin, nephew, or niece.
- (2) The spouse of such parent or relative (including same sex marriage or domestic partner), even after the marriage is terminated by death or divorce.
- (3) Other relatives including relatives of half-blood, first cousins once removed, ((persons)) people of earlier generations (as shown by the prefixes of great, great-great, or great-great), and natural parents whose parental rights were terminated by a court order.

"Carrier" means an organization that contracts with the federal government to process claims under medicare Part B.

"Categorically needy (CN) or categorically needy program (CNP)" is the state and federally funded health care program established under Title XIX of the Social Security Act for ((persons)) people within medicaid-eligible categories, whose income and/or resources are at or below set standards.

"Categorically needy income level (CNIL)" is the standard used by the agency to determine eligibility under a categorically needy program.

"Categorically needy (CN) scope of care" is the range of health care services included within the scope of service categories described in WAC 182-501-0060 available to ((persons)) people eligible to receive benefits under a CN program. Some state-funded health care programs provide CN scope of care.

<u>"Center of excellence"</u> - A hospital, medical center, or other health care provider that meets or exceeds standards set by the agency for specific treatments or specialty care.

"Centers for Medicare and Medicaid Services (CMS)" ((means the agency within the federal department of health and human services (DHHS) with oversight responsibility for the medicare and medicaid programs)) - The federal agency that runs the medicare, medicaid, and children's health insurance programs, and the federally facilitated marketplace.

"Children's health program or children's health care programs" See "Apple health for kids."

"Community spouse." See "spouse" in WAC 182-500-100.

"Cost-sharing" means any expenditure required by or on behalf of an enrollee with respect to essential health benefits; such term includes deductibles, coinsurance, copayments, or similar charges, but excludes premiums, balance billing amounts for nonnetwork providers, and spending for noncovered services.

"Cost-sharing reductions" means reductions in costsharing for an eligible person enrolled in a silver level plan in the health benefit exchange or for a person who is an American Indian or Alaska native enrolled in a qualified health plan (QHP) in the exchange.

"Couple." See "spouse" in WAC 182-500-0100.

"Covered service" is a health care service contained within a "service category" that is included in a ((medical assistance)) Washington apple health (WAH) benefits package described in WAC 182-501-0060. For conditions of payment, see WAC 182-501-0050(5). A noncovered service is a specific health care service (for example, cosmetic surgery), contained within a service category that is included in a ((medical assistance)) WAH benefits package, for which the agency or the agency's designee requires an approved exception to rule (ETR) (see WAC 182-501-0160). A noncovered service is not an excluded service (see WAC 182-501-0060).

"Creditable coverage" means most types of public and private health coverage, except Indian health services, that provide access to physicians, hospitals, laboratory services, and radiology services. This term applies to the coverage whether or not the coverage is equivalent to that offered under premium-based programs included in Washington apple health (WAH). Creditable coverage is described in 42 U.S.C. 300gg-3 (c)(1).

AMENDATORY SECTION (Amending WSR 11-14-075, filed 6/30/11, effective 7/1/11)

WAC 182-500-0050 ((Medical assistance)) Washington apple health (WAH) definitions—I. "Ineligible spouse" see "spouse" in WAC ((388-500-0100)) 182-500-0100.

"Institution" means an entity that furnishes (in single or multiple facilities) food, shelter, and some treatment or services to four or more ((persons)) people unrelated to the proprietor. Eligibility for ((medical assistance)) Washington apple health (WAH) program may vary depending upon the type of institution in which an individual resides. For the purposes of ((medical assistance)) WAH programs, "institution" includes all ((of)) the following:

- (1) "Institution for mental diseases (IMD)" A hospital, nursing facility, or other institution of more than sixteen beds that is primarily engaged in providing diagnosis, treatment or care of ((persons)) people with mental diseases, including medical attention, nursing care and related services. An IMD may include inpatient chemical dependency facilities of more than sixteen beds which provide residential treatment for alcohol and substance abuse.
- (2) "Intermediate care facility for the mentally retarded (ICF/MR)" An institution or distinct part of an institution that is:
 - (a) Defined in 42 C.F.R. 440.150;

- (b) Certified to provide ICF/MR services under 42 C.F.R. 483, Subpart I; and
- (c) Primarily for the diagnosis, treatment, or rehabilitation for ((persons)) people with mental retardation or a related condition (((see WAC 388-823-0700 for information about what qualifies as a "related condition"))).
- (3) "Medical institution" An entity that is organized to provide medical care, including nursing and convalescent care. The terms "medical facility" and "medical institution" are sometimes used interchangeably throughout Title ((388)) 182 WAC.
- (a) To meet the definition of medical institution, the entity must:
 - (i) Be licensed as a medical institution under state law;
- (ii) Provide medical care, with the necessary professional personnel, equipment, and facilities to manage the health needs of the patient on a continuing basis ((in accordance with)) under acceptable standards; and
 - (iii) Include adequate physician and nursing care.
 - (b) Medical institutions include ((all of the following)):
- (i) "Hospice care center" An entity licensed by the department of health (DOH) to provide hospice services. Hospice care centers must be medicare-certified, and approved by the agency or the agency's designee to be considered a medical institution.
- (ii) "Hospital" Defined in WAC ((388-500-0045)) <u>182-</u>500-0045.
- (iii) "Nursing facility (NF)" An entity certified to provide skilled nursing care and long-term care services to medicaid recipients under ((Section 1919(a) of the)) Social Security Act Sec. 1919(a), 42 U.S.C. Sec. 1396r. Nursing facilities that may become certified include nursing homes licensed under chapter 18.51 RCW, and nursing facility units within hospitals licensed by ((the department of health ())DOH(())) under chapter 70.41 RCW. This includes the nursing facility section of a state veteran's facility.
- (iv) "Psychiatric hospital" An institution, or a psychiatric unit located in a hospital, licensed as a hospital ((in accordance with)) under applicable Washington state laws and rules, that is primarily engaged to provide psychiatric services for the diagnosis and treatment of mentally ill ((persons)) people under the supervision of a physician.
- (v) "Psychiatric residential treatment facility (PRTF)" A nonhospital residential treatment center licensed by ((department of health)) DOH, and certified by the agency or the agency's designee to provide psychiatric inpatient services to medicaid-eligible individuals age twenty-one ((years of age)) and younger. A PRTF must be accredited by the Joint Commission on Accreditation of Health care Organizations (JCAHO) or any other accrediting organization with comparable standards recognized by Washington state. A PRTF must meet the requirements in 42 C.F.R. 483, Subpart G, regarding the use of restraint and seclusion.
- (vi) "Residential habilitation center (RHC)" A residence operated by the state under chapter 71A.20 RCW that serves individuals who have exceptional care and treatment needs due to their developmental disabilities by providing residential care designed to develop individual capacities to their optimum. RHCs provide residential care and may be

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certified to provide ICF/MR services and((/or/)) nursing facility services.

- (c) Medical institutions do not include entities licensed by the agency or the agency's designee as adult family homes (AFHs) and boarding homes. AFHs and boarding homes include assisted living facilities, adult residential centers, enhanced adult residential centers, and developmental disability group homes.
- (4) **"Public institution"** means an entity that is the responsibility of a governmental unit or over which a governmental unit exercises administrative control.
 - (a) Public institutions include ((all of the following)):
- (i) Correctional facility An entity such as a state penitentiary or county jail, (includes placement in a work release program or outside of the institution, including home detention).
- (ii) Eastern and Western State mental hospitals. (Medicaid coverage for these institutions is limited to individuals age twenty-one and younger, and individuals age sixty-five and older.)
- (iii) Certain facilities administered by Washington state's department of veteran's affairs (see (b) of this subsection for facilities that are not considered public institutions).
- (b) Public institutions do not include intermediate care facilities, entities that meet the definition of medical institution (such as Harborview Medical Center and University of Washington Medical Center), or facilities in Retsil, Orting, and Spokane that are administered by the department of veteran's affairs and licensed as nursing facilities.

"Institution for mental diseases (IMD)" see "institution" in this section.

<u>"Institutional review board"</u> - A board or committee responsible for reviewing research protocols and determining whether:

- (1) Risks to subjects are minimized:
- (2) Risks to subjects are reasonable in relation to anticipated benefits, if any, to subjects, and the importance of the knowledge that may reasonably be expected to result;
 - (3) Selection of subjects is equitable;
- (4) Informed consent will be sought from each prospective subject or the subject's legally authorized representative;
 - (5) Informed consent will be appropriately documented;
- (6) When appropriate, the research plan makes adequate provision for monitoring the data collected to ensure the safety of subjects:
- (7) When appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of data; and
- (8) When some or all of the subjects are likely to be vulnerable to coercion or undue influence, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons, additional safeguards have been included in the study to protect the rights and welfare of these subjects.

"Institutionalized spouse" see "spouse" in WAC ((388-500-0100)) 182-500-0100.

"Intermediate care facility for the mentally retarded (ICF/MR)" see "institution" in this section.

WSR 15-17-034 PERMANENT RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 15-254—Filed August 11, 2015, 3:30 p.m., effective September 11, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: Amend rules for commercial salmon fishing in Puget Sound, including WAC 220-47-307 Closed areas—Puget Sound salmon, 220-47-311 Purse seine—Open periods, 220-47-401 Reef net—Open periods, 220-47-411 Gillnet—Open periods, and 220-47-428 Beach seine—Open periods.

Citation of Existing Rules Affected by this Order: Amending WAC 220-47-307, 220-47-311, 220-47-401, 220-47-411, and 220-47-428.

Statutory Authority for Adoption: RCW 77.04.012, 77.04.020, 77.04.130, 77.12.045, and 77.12.047.

Adopted under notice filed as WSR 15-06-068 on March 4, 2015, and WSR 15-11-101 on May 20, 2015.

Changes Other than Editing from Proposed to Adopted Version: Changes made to WAC 220-47-307 reflect edits to area closures to remain consistent with what has been agreed to with the comanagers. Amendments to WAC 220-47-311 and 220-47-411 were made based on requests by the industry and included adjustments to fishing hours for Puget Sound pink fisheries, adjustments to fishing hours for South Sound gillnet chum fisheries, and edits to alternate "first starts" for the gear groups in the Hood Canal and South Sound fall chum fisheries.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 5, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: June 24, 2015.

J. W. Unsworth Director

AMENDATORY SECTION (Amending WSR 14-14-011, filed 6/19/14, effective 7/20/14)

WAC 220-47-307 Closed areas—Puget Sound salmon. It is unlawful at any time, unless otherwise provided, to take, fish for, or possess salmon taken for commercial purposes with any type of gear from the following portions of Puget Sound Salmon Management and Catch Reporting

Areas, except that closures listed in this section do not apply to reef net fishing areas listed in RCW 77.50.050:

Areas 4B, 5, 6, 6B, and 6C - The Strait of Juan de Fuca Preserve as defined in WAC 220-47-266.

Area 6D - That portion within 1/4-mile of each mouth of the Dungeness River.

Area 7 -

- (1) The San Juan Island Preserve as defined in WAC 220-47-262.
- (2) Those waters within 1,500 feet of shore on Orcas Island from Deer Point northeasterly to Lawrence Point, thence west to a point intercepting a line projected from the northernmost point of Jones Island, thence 90° true to Orcas Island
- (3) Those waters within 1,500 feet of the shore of Cypress Island from Cypress Head to the northernmost point of Cypress Island.
- (4) Those waters easterly of a line projected from Iceberg Point to Iceberg Island, to the easternmost point of Charles Island, then true north from the northernmost point of Charles Island to the shore of Lopez Island.
- (5) Those waters northerly of a line projected from the southernmost point of land at Aleck Bay to the westernmost point of Colville Island, thence from the easternmost point of Colville Island to Point Colville.
- (6) Those waters easterly of a line projected from Biz Point on Fidalgo Island to the Williamson Rocks Light, thence to the Dennis Shoal Light, thence to the light on the westernmost point of Burrows Island, thence to the southwestern-most point of Fidalgo Head, and including those waters within 1,500 feet of the western shore of Allan Island, those waters within 1,500 feet of the western shore of Burrows Island, and those waters within 1,500 feet of the shore of Fidalgo Island from the southwestern-most point of Fidalgo Head northerly to Shannon Point.
- (7) Additional Fraser sockeye and pink seasonal closure: Those waters within 1,500 feet of the shore of Fidalgo Island from the Initiative 77 marker northerly to Biz Point.
- (8) Those waters within 1,500 feet of the eastern shore of Lopez Island from Point Colville northerly to Lopez Pass, and those waters within 1,500 feet of the eastern shore of Decatur Island from the southernmost point of land northerly to Fauntleroy Point, and including those waters within 1,500 feet of the shore of James Island.
- **Area 7A** The Drayton Harbor Preserve as defined in WAC 220-47-252.

Area 7B -

- (1) That portion south and east of a line from William Point on Samish Island to Saddlebag Island to the southeastern tip of Guemes Island, and that portion northerly of the railroad trestle in Chuckanut Bay.
- (2) That portion of Bellingham Bay and Portage Bay adjacent to Lummi Indian Reservation is closed north and west of a line from the intersection of Marine Drive and Hoff Road (48°46'59"N, 122°34'25"W) projected 180° true for 2.75 nautical miles (nm) to a point at 48°45'11"N, 122°34'25"W, then 250° true for 1.4 nm to a point at 48°44'50"N, 122°35'42"W, then 270° true for 1.4 nm to 48°44'50"N, 122°37'08"W, then 230° true for 1.3 nm to 48°44'24"N, 122°37'52"W, then 200° true for 1 nm to

- 48°43'45"N, 122°38'12"W, then 90° true for 1 nm to a point just northeast of Portage Island (48°43'45"N, 122°37'14"W), then 160° true for 1.4 nm to a point just east of Portage Island (48°42'52"N, 122°36'37"W).
- (3) Additional coho seasonal closure: September 1 through September 21, closed to gillnets in the waters of Area 7B west of a line from Point Francis (48°41'46"N, 122°36'32"W) to the red and green buoy southeast of Point Francis (48°40'27"N, 122°35'24"W), then to the northernmost tip of Eliza Island (48°39'38"N, 122°35'14"W), then along the eastern shore of the island to its southernmost tip (48°38'40"N, 122°34'57"W) and then north of a line from the southernmost tip of Eliza Island to Carter Point (48°38'24"N, 122°36'31"W). Nontreaty purse seiners fishing September 1 through September 21 in this area must release coho.
- **Area 7C** That portion southeasterly of a line projected from the mouth of Oyster Creek 237° true to a fishing boundary marker on Samish Island.

Area 8 -

- (1) That portion of Skagit Bay easterly of a line projected from Brown Point on Camano Island to a white monument on the easterly point of Ika Island, thence across the Skagit River to the terminus of the jetty with McGlinn Island.
- (2) Those waters within 1,500 feet of the western shore of Camano Island south of a line projected true west from Rocky Point.

Area 8A -

- (1) Those waters easterly of a line projected from Mission Point to Buoy C1, excluding the waters of Area 8D, thence through the green light at the entrance jetty of the Snohomish River and across the mouth of the Snohomish River to landfall on the eastern shore, and those waters northerly of a line from Camano Head to the northern boundary of Area 8D, except when open for pink fisheries.
- (2) Additional coho seasonal closure prior to October 3: Those waters southerly of a line projected from the Clinton ferry dock to the Mukilteo ferry dock.
- **Area 8D** Those waters easterly of a line projected from Mission Point to Hermosa Point.
- **Area 9** Those waters lying inside and westerly of a line projected from the Point No Point light to Sierra Echo buoy, thence to Forbes Landing wharf east of Hansville.

Area 10 -

- (1) Those waters easterly of a line projected from Meadow Point to West Point.
- (2) Those waters of Port Madison westerly of a line projected from Point Jefferson to the northernmost portion of Point Monroe.
- (3) Additional pink seasonal closure: The area east inside of the line originating from West Point and extending west to the closest midchannel buoy, thence true through Point Wells until reaching latitude 47°44'500"N, thence extending directly east to the shoreline.
- (4) Additional purse seine pink seasonal closure: The area within 500 feet of the eastern shore in Area 10 is closed to purse seines north of latitude 47°44'500"N.
- (5) Additional coho and chum seasonal closure: Those waters of Elliott Bay east of a line from Alki Point to the light at Fourmile Rock, and those waters northerly of a line pro-

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jected from Point Wells to "SF" Buoy, then west to President's Point.

Area 10E - Those waters of Liberty Bay north of a line projected due east from the southernmost Keyport dock, those waters of Dyes Inlet north of the Manette Bridge, and those waters of Sinclair Inlet southwest of a line projected true east from the Bremerton ferry terminal.

Area 11 -

- (1) Those waters northerly of a line projected true west from the light at the mouth of Gig Harbor, and those waters south of a line from Browns Point to the northernmost point of land on Point Defiance.
- (2) Additional coho seasonal closure: Those waters south of a line projected from the light at the mouth of Gig Harbor to the Tahlequah ferry dock, then south to the Point Defiance ferry dock, and those waters south of a line projected from the Point Defiance ferry dock to Dash Point.

Area 12 -

- (1) Those waters inside and easterly of a line projected from Lone Rock to the navigation light off Big Beef Creek, thence southerly to the tip of the outermost northern headland of Little Beef Creek.
 - (2) Additional purse seine chum seasonal closure:
- (((a) Those waters of Area 12 south and west of a line projected 94 degrees true from Hazel Point to the light on the opposite shore, bounded on the west by the Area 12/12B boundary line are closed to purse seines except this area is open for purse seines on October 27 and November 3.
- (b))) Those waters of Area 12 within 2 statute miles of the Hood Canal Bridge are closed to purse seines on October ((27)) 26 and November 3.

Area 12A -

- (1) Those waters north of a line projected due east from Broad Spit.
- (2) Those waters within 1,000 feet of the mouth of the Quilcene River.

Area 12B -

- (1) Those waters within 1/4-mile of the mouths of the Dosewallips, Duckabush, and Hamma Hamma rivers and Anderson Creek.
- (2) Additional Chinook seasonal closure: Those waters north and east of a line projected from Tekiu Point to Triton Head
- Areas 12, 12B and 12C Those waters within 1,000 feet of the eastern shore.

Area 12C -

- (1) Those waters within 2,000 feet of the western shore between the dock at Glen Ayr R.V. Park and the Hoodsport marina dock.
- (2) Those waters south of a line projected from the Cushman Powerhouse to the public boat ramp at Union.
- (3) Those waters within 1/4-mile of the mouth of the Dewatto River.

Area 12 - Chum seasonal closures:

(1) Those waters of Area 12 south and west of a line projected 94 degrees true from Hazel Point to the light on the opposite shore, bounded on the west by the Area 12/12B boundary line are closed to purse seines except this area is open for purse seines on October 27 and November 3.

(2) Those waters of Area 12 within 2 miles of the Hood Canal Bridge are closed to purse seines on October 27 and November 3.

Area 13A - Those waters of Burley Lagoon north of State Route 302; those waters within 1,000 feet of the outer oyster stakes off Minter Creek Bay, including all waters of Minter Creek Bay; those waters westerly of a line drawn due north from Thompson Spit at the mouth of Glen Cove; and those waters within 1/4-mile of Green Point.

<u>AMENDATORY SECTION</u> (Amending WSR 14-14-011, filed 6/19/14, effective 7/20/14)

WAC 220-47-311 Purse seine—Open periods. (1) It is unlawful to take, fish for, or possess salmon taken with purse seine gear for commercial purposes from Puget Sound, except in the following designated Puget Sound Salmon Management and Catch Reporting Areas and during the periods provided for in each respective Management and Catch Reporting Area:

AREA	TIME		DATE
7, 7A:	7AM - 6PM	-	((1 0/11,)) 10/12, ((10/ 14,)) 10/13, 10/15, 10/17, 10/18, 10/19, 10/20, 10/ 21, 10/22, 10/23, 10/24, 10/25, 10/26, 10/27, 10/ 28, 10/29, 10/30, 10/31((- 11/1))
	7AM - 5PM	-	11/1, 11/2, 11/3, 11/4, 11/5, 11/6, 11/7((, 11/8))

Note: In Areas 7 and 7A, it is unlawful to fail to brail when fishing with purse seine gear. Any time brailing is required, purse seine fishers must also use a recovery box in compliance with WAC 220-47-301 (7)(a) through (f).

2 ()			
7B, 7C:	6AM - 9PM	-	((8/13)) <u>8/12</u>
7B, 7C:	6AM - 8PM	-	((8/20, 8/27, 9/3)) <u>8/19, 8/26, 9/2</u>
7B:	((7AM)) <u>6AM</u> - 8PM	-	((9/8, 9/10, 9/12)) <u>9/7, 9/9, 9/11</u>
	7AM - 7PM	-	((9/15, 9/17, 9/19)) <u>9/14, 9/16, 9/18</u>
	7AM ((9/21)) <u>9/20</u>	-	6PM ((10/25)) <u>10/24</u>
	7AM ((10/27)) <u>10/26</u>	-	4PM ((10/31)) <u>10/30</u>
	7AM ((11/3)) <u>11/2</u>	-	4PM ((11/7)) <u>11/6</u>
	7AM ((11/10)) <u>11/9</u>	-	4PM ((11/14)) <u>11/13</u>
	7AM ((11/17)) <u>11/16</u>	-	4PM ((11/21)) <u>11/20</u>

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AREA	TIME		DATE
	7AM	-	4PM ((11/28)) <u>11/27</u>
	$((\frac{11/24}{}))$		
	11/23		

Note: That portion of Area 7B east of a line from Post Point to the flashing red light at the west entrance to Squalicum Harbor is open to purse seines beginning at 12:01 a.m. on the last Monday in October and until 4:00 p.m. on the first Friday in December.

	•		
<u>8:</u>	<u>6AM -</u> <u>8PM</u>	Ξ	8/25, 9/2, 9/9
8A:	<u>7AM - 7PM</u>	=	8/18, 8/26, 9/1
	7AM - 7PM	-	Limited participation - Two boats ((9/15, 9/22)) 9/14, 9/21
8D:	7AM - 7PM	-	((9/22, 9/29, 10/6)) <u>9/21, 9/28, 10/5</u>
	7AM - 6PM	-	((10/13)) <u>10/12</u> , 10/20, <u>10/26</u> , 10/28((, 10/30))
	7AM - 5PM	-	11/3, <u>11/9</u> , 11/11, ((11/ 13,)) 11/17, ((11/25)) <u>11/</u> <u>24</u>
10:	<u>7AM -</u> <u>7PM</u>	Ξ	Limited participation - Five boats only 8/19, 8/ 25, 8/27, 8/31, 9/2
10, 11:	7AM - 6PM	-	((10/16, 10/20, 10/28)) <u>10/15, 10/19, 10/26</u>
	7AM - 5PM	-	11/3, <u>11/9</u> , 11/11, ((11/ 13,)) 11/17, ((11/25)) <u>11/</u> <u>24</u>
12, 12B:	7AM - 6PM	-	((10/16, 10/20, 10/28)) <u>10/15, 10/19, 10/26</u>
	7AM - 5PM	-	11/3, <u>11/9</u> , 11/11, ((11/ 13,)) 11/17
12C:	7AM - 5PM	-	11/3, <u>11/9</u> , 11/11, ((11/ 13,)) 11/17, ((11/25)) <u>11/</u> <u>24</u>

Note: In Area 10 during any open period occurring in August or September, it is unlawful to fail to brail or use a brailing bunt when fishing with purse seine gear. Any time brailing is required, purse seine fishers must also use a recovery box in compliance with WAC 220-47-301 (7)(a) through (f).

- (2) It is unlawful to retain the following salmon species taken with purse seine gear within the following areas during the following periods:
- (a) Chinook salmon At all times in Areas 7, 7A, 8, 8A, 8D, 10, 11, 12, 12B, and 12C, and after October 20 in Area 7B
- (b) Coho salmon At all times in Areas 7, 7A, 10, and 11, and prior to September 1 in Area 7B.
- (c) Chum salmon Prior to October 1 in Areas 7 and 7A, and at all times in 8A.
- (d) All other saltwater and freshwater areas Closed for all species at all times.

<u>AMENDATORY SECTION</u> (Amending WSR 14-14-011, filed 6/19/14, effective 7/20/14)

WAC 220-47-401 Reef net open periods. (1) It is unlawful to take, fish for, or possess salmon taken with reef net gear for commercial purposes in Puget Sound, except in the following designated Puget Sound Salmon Management and Catch Reporting Areas, during the periods provided for in each respective area:

AREA	TIME	DATE(S)
7, 7A	5AM - 9PM Daily	((9/21 - 11/8))
		9/27 - 11/7

- (2) It is unlawful at all times to retain ((wild)) unmarked Chinook salmon taken with reef net gear, and it is unlawful prior to October 1 to retain chum or ((wild)) unmarked coho salmon taken with reef net gear.
- (3) It is unlawful to retain marked Chinook after September 30.
- (a) It is unlawful to retain marked Chinook with reef net gear if the fisher does not have in his or her immediate possession a department-issued Puget Sound Reef Net Logbook with all retained Chinook accounted for in the logbook. Marked Chinook are those with a clipped adipose fin and a healed scar at the site of the clipped fin.
- (b) Completed logs must be submitted and received within six working days to: Puget Sound Commercial Salmon Manager, Department of Fish & Wildlife, 600 Capitol Way N, Olympia, WA 98501-1091.
 - (4) All other saltwater and freshwater areas Closed.

AMENDATORY SECTION (Amending WSR 14-14-011, filed 6/19/14, effective 7/20/14)

WAC 220-47-411 Gillnet—Open periods. It is unlawful to take, fish for, or possess salmon taken with gillnet gear for commercial purposes from Puget Sound, except in the following designated Puget Sound Salmon Management and Catch Reporting Areas during the periods provided for in each respective fishing area:

AREA	TIME		DATE(S)	MINIMUM MESH
6D: Skiff gillnet only, definition WAC 220-16-046 and lawful gear description WAC 220-47-302.	7AM -	7PM	9/21, 9/22, <u>9/23</u> , 9/24, 9/25, ((9/26)) <u>9/28</u> , 9/29, 9/30, 10/1, 10/2, ((10/3)) <u>10/5</u> , 10/6, 10/7, 10/8, 10/9, ((10/10)) <u>10/12</u> , 10/13, 10/14, 10/15, 10/16, ((10/17)) <u>10/19</u> , 10/20, 10/21, 10/22, 10/23, ((10/12))	5"
			10/19, 10/20, 10/21, 10/22, 10/23, ((10/ 24)) 10/26, 10/27, 10/28, 10/29, 10/30	

Note: In Area 6D, it is unlawful to use other than 5-inch minimum mesh in the skiff gillnet fishery. It is unlawful to retain Chinook taken in Area 6D at any time, or any chum salmon taken in Area 6D prior to October 16. In Area 6D, any Chinook or chum salmon required to be released must be removed from the net by cutting the meshes ensnaring the fish.

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AREA	TIME		DATE(S)	MINIMUM MESH
7, 7A:	7AM -	- Midnight; use of recovery box required	((10/11,)) 10/12,((10/14, 10/18)) <u>10/13,</u> 10/15, 10/17	6 1/4"
	7AM -	- Midnight	10/18, 10/19, 10/20, 10/21, 10/22, 10/ 23, 10/24, 10/25, 10/26, 10/27, 10/28, 10/29, 10/30, 10/31, 11/1, 11/2, 11/3, 11/4, 11/5, 11/6, 11/7((,11/8))	6 1/4"

Note: In Areas 7 and 7A after October 9 but prior to October ((19)) 18, coho and Chinook salmon must be released, and it is unlawful to use a net soak time of more than 45 minutes. Net soak time is defined as the time elapsed from when the first of the gillnet web enters the water, until the gillnet is fully retrieved from the water. Fishers must also use a recovery box in compliance with WAC 220-47-302 (5)(a) through (f) when coho and Chinook release is required.

7B, 7C:	7PM	-	8AM	NIGHTLY ((8/10)) <u>8/9, 8/11, 8/12, ((8/13)) <u>8/16, 8/17, 8/18, 8/19, ((8/20)) <u>8/</u> <u>23, 8/24, 8/25, 8/26((, 8/27))</u></u></u>	7"
7B, 7C:	7AM ((8/31)) <u>8/30</u>	-	7AM ((9/5)) <u>9/4</u>		5"
7B:	7AM ((9/7)) <u>9/6</u>	-	7AM ((9/12)) <u>9/11</u>		5"
	7AM ((9/14)) <u>9/13</u>	-	7AM ((9/19)) <u>9/18</u>		5"
	7AM ((9/21)) <u>9/20</u>	-	Midnight ((10/25)) <u>10/23</u>		5"
	7AM ((10/27)) <u>10/26</u>	-	4PM ((10/31)) <u>10/</u> <u>30</u>		6 1/4"
	6AM ((11/3)) <u>11/2</u>	-	4PM ((11/7)) <u>11/6</u>		6 1/4"
	6AM ((11/10)) <u>11/9</u>	-	4PM ((11/14)) <u>11/</u> <u>13</u>		6 1/4"
	6 AM ((11/17)) <u>11/16</u>	-	4PM ((11/21)) <u>11/</u> 20		6 1/4"
	7 AM ((11/24)) <u>11/23</u>	-	4PM ((11/28)) <u>11/</u> 27		6 1/4"

Note: That portion of Area 7B east of a line from Post Point to the flashing red light at the west entrance to Squalicum Harbor is open to gillnets using 6 1/4-inch minimum mesh beginning 12:01 AM on the last day in October and until 4:00 PM on the first Friday in December.

8:	5AM	_	11PM	8/26, 9/1, 9/8	5"
0.	27 1171	_	111111	0/20, 5/1, 5/0	<u></u>

Note: In Area 8 it is unlawful to take or fish for pink salmon with drift gillnets greater than 60-mesh maximum depth. Fishers must also use minimum 5" and maximum 5 1/2" mesh during pink salmon management periods.

8A:	<u>5AM</u>	<u>=</u>	<u>11PM</u>	<u>8/19, 8/25, 9/2</u>	<u>5"</u>
	6PM	-	8AM	Limited participation; 2 boats only ((9/17)) 9/16	5"
	6PM	-	8AM	NIGHTLY <u>9/22</u> , 9/23((, 9/24))	5"
Note: In Area 8A fishers mus	t use minimum 5" a	nd maximum	n 5 1/2" mesh during pi	ink salmon management periods.	
8D:	6PM	-	8AM	NIGHTLY ((9/21, 9/25, 9/28, 10/2, 10/5, 10/9)) 9/20, 9/24, 9/27, 10/1, 10/4, 10/8	5"
	6PM ((9/22)) <u>9/21</u>	-	8AM ((9/25)) <u>9/24</u>		5"
	6PM ((9/29)) <u>9/28</u>	-	8AM ((10/2)) <u>10/1</u>		5"

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AREA	TIME			DATE(S)	MINIMUM MESH
	6PM ((10/6)) <u>10/5</u>	=	8AM ((10/9)) <u>10/8</u>		5"
	5PM	-	8AM	((10/12, 10/16)) <u>10/11, 10/15</u>	5"
	5PM ((10/13)) <u>10/12</u>	-	8AM ((10/16)) <u>10/15</u>		5"
	5PM	-	9AM	((10/19, 10/23, 10/26, 10/30)) <u>10/18, 10/22, 10/25, 10/29</u>	5"
	5PM ((10/20)) <u>10/19</u>	-	9AM ((10/23)) <u>10/22</u>		5"
	5PM ((10/27)) <u>10/26</u>	-	9AM ((10/30)) <u>10/29</u>		5"
	4PM	-	8AM	((11/2, 11/6)) <u>11/1, 11/5</u>	5"
	4PM ((11/3)) <u>11/2</u>	-	8AM ((11/6)) <u>11/5</u>		5"
	6AM	-	6PM	<u>11/11</u> , 11/12, ((11/13)) <u>11/18</u> , 11/19((, 11/20))	6 1/4"
	6AM	-	4PM	((11/14, 11/21)) 11/13, 11/20	6 1/4"
	7AM	-	6PM	<u>11/25,</u> 11/26((, 11/27))	6 1/4"
	7AM	-	4PM	((11/28)) <u>11/27</u>	6 1/4"
9A: Skiff gillnet only, definition WAC 220-16-046 and lawful gear description WAC 220-47-302.	7AM ((8/24)) <u>8/16</u>	-	7PM ((11/1)) 10/31	is unlawful to retain Chinoak calmon at any t	5"

Note: It is unlawful to retain chum salmon taken in Area 9A prior to October 1, and it is unlawful to retain Chinook salmon at any time. Any salmon required to be released must be removed from the net by cutting the meshes ensnaring the fish.

Note: In Area 10 fishers must use minimum 4 1/2" and maximum 5 1/2" mesh during pink salmon management periods. Also, during August or September openings, coho and Chinook salmon must be released, and it is unlawful to use a net soak time of more than 90 minutes. Net soak time is defined as the time elapsed from when the first of the gillnet web enters the water, until the gillnet is fully retrieved from the water. Fishers must also use a recovery box in compliance with WAC 220-47-302 (5)(a) through (f). During all limited participation fisheries, it is unlawful for vessels to take or fish for salmon without department observers on board.

10, 11:	5PM	-	9AM	NIGHTLY ((10/14, 10/21, 10/23, 10/26, 10/30)) <u>10/13, 10/20, 10/22, 10/27, 10/29</u>	6 1/4"
	5PM	-	7AM	NIGHTLY ((10/15)) <u>10/14</u>	6 1/4"
	4PM	-	8AM	11/1, 11/4, ((11/6, 11/9,)) 11/12, <u>11/15,</u> 11/18, ((11/20)) <u>11/22</u> , 11/23((, 11/26))	6 1/4"
	4PM	-	7AM	NIGHTLY ((11/12)) <u>11/10</u>	6 1/4"
12A: Skiff gillnet only, definition WAC 220-16-046 and lawful gear description WAC 220-47-302.	7AM	-	7PM	Dates determined per agreement with tribal co-managers in-season if Summer Chum Salmon Conservation Initiative goals are met allowing for openings of gillnet gear.	5"

Note: In Area 12A, it is unlawful to use other than 5-inch minimum mesh in the skiff gillnet fishery. It is unlawful to retain Chinook or chum salmon taken in Area 12A at any time, and any salmon required to be released must be removed from the net by cutting the meshes ensnaring the fish.

12, 12B:	7AM	-	8PM	<u>10/13</u> , 10/14, ((10/15 , 10/21 , 10/23)) <u>10/20</u> , 10/22	6 1/4"
	7AM	-	7PM	10/27, ((10/30)) <u>10/29</u>	6 1/4"
	6AM	-	6PM	<u>11/2</u> , 11/4, ((11/6,)) 11/10, 11/12, <u>11/16</u> , 11/18((, 11/20))	6 1/4"

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AREA	TIME			DATE(S)	MINIMUM MESH
12C:	6AM	-	6PM	<u>11/2</u> , 11/4, ((11/6 ,)) 11/10, 11/12, <u>11/16</u> , 11/18, ((11/20, 11/24, 11/26))	6 1/4"
	<u>7AM</u>	=	<u>6PM</u>	11/23, 11/24	<u>6 1/4"</u>

All other saltwater and freshwater areas - Closed.

Nightly openings refer to the start date.

Within an area or areas, a mesh size restriction remains in effect from the first date indicated until a mesh size change is shown, and the new mesh size restriction remains in effect until changed.

AMENDATORY SECTION (Amending WSR 14-14-011, filed 6/19/14, effective 7/20/14)

WAC 220-47-428 Beach seine—Open periods. It is unlawful to take, fish for, or possess salmon taken with beach seine gear for commercial purposes from Puget Sound except in the following designated Puget Sound Salmon Management and Catch Reporting Areas during the periods provided hereinafter in each respective Management and Catch Reporting Area:

All areas:

AREA		TIM	Œ	DATE(S)
<u>6D:</u>	<u>7AM</u>	Ξ	<u>7PM</u>	Limited participation - 2 boats only 7/20, 7/21, 7/22, 7/23, 7/24, 7/27, 7/28, 7/29, 7/30, 7/31
12A:	7AM	-	7PM	8/21, ((8/22)) <u>8/24</u> , 8/25, 8/26, 8/27, 8/28, ((8/29)) <u>8/31</u> , 9/1, 9/2, 9/3, 9/4, ((9/5)) <u>9/7</u> , 9/8, 9/9, 9/10, 9/11, ((9/12)) <u>9/14</u> , 9/15, 9/16, 9/17, 9/18, ((9/12)) <u>9/21</u> , 9/22, 9/23, 9/24, 9/25((, 9/26))
12H:	7AM	-	7PM	November (dates determined per agreement with tribal co-managers inseason if harvestable surplus of salmon remain).

It is unlawful to retain Chinook taken with beach seine gear in all areas, and it is unlawful to retain chum from Area 12A.

WSR 15-17-054 PERMANENT RULES HEALTH CARE AUTHORITY

(Washington Apple Health)

[Filed August 13, 2015, 3:41 p.m., effective September 13, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The agency is making housekeeping changes to correct agency names, update rule numbers and make other clarifications.

Citation of Existing Rules Affected by this Order: Amending WAC 182-539-0200, 182-539-0300, and 182-539-0350.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160

Adopted under notice filed as WSR 15-12-011 on May 21, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal

Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 3, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 3, Repealed 0.

Date Adopted: August 13, 2015.

Wendy Barcus Rules Coordinator

AMENDATORY SECTION (Amending WSR 11-14-075, filed 6/30/11, effective 7/1/11)

WAC 182-539-0200 AIDS—Health insurance premium payment program. (1) The purpose of the AIDS health insurance premium payment program is to help ((individuals)) people who are not eligible for the ((department's)) medicaid agency's Washington apple health medical programs and who are diagnosed with AIDS((;)) pay their health insurance premiums.

- (2) To be eligible for the AIDS health insurance premium payment program((, individuals must)):
 - (a) ((Be)) A person must be:
- (i) Diagnosed with AIDS as defined in WAC 246-100-011:
 - (((b) Be)) (ii) A resident of the state of Washington;
- (((e) Be)) (iii) Responsible for all((5)) or part of((5)) the health insurance premium payment (without the ((department's)) agency's help);
 - (((d) Not)) <u>(b) A person must not:</u>
- $\underline{\text{(i) Be}}$ eligible for one of the (($\frac{\text{department's}}{\text{department's}}$)) $\underline{\text{agency's}}$ other medical programs;
- (((e) Not)) (ii) Have personal income that exceeds three hundred seventy percent of the federal poverty level; and
- (((f) Not)) (iii) Have personal assets, after exemptions, exceeding fifteen thousand dollars((. The following personal assets are exempt from the personal assets calculation)), except for:
- (((i))) (A) A home used as the person's primary residence; and
 - ((((ii)))) (B) A vehicle used as personal transportation.

- (3) The ((department)) agency may contract with a not-for-profit community agency to administer the AIDS health insurance premium payment program. The ((department)) agency or its contractor determines ((an individual's)) a person's initial eligibility and redetermines eligibility on a periodic basis. To be eligible, ((individuals)) a person must:
- (a) Cooperate with the ((department's)) agency's contractor;
- (b) Cooperate with the eligibility determination and redetermination process; and
- (c) Initially meet and continue to meet the eligibility criteria in subsection (2) of this section.
- (4) ((Individuals,)) People diagnosed with AIDS((5)) who are eligible for ((one of the department's)) an agency medical program((s)) may ask the ((department)) agency to pay their health insurance premiums under a separate process. The client's community services office (CSO) ((is able to)) can assist the client with this process.
- (5) ((Once an individual)) When a person is eligible ((to participate in)) for the AIDS health insurance premium payment program, eligibility ((would)) ceases only when ((one of the following occurs. The individual)) the person:
 - (a) Is deceased;
 - (b) Voluntarily quits the program;
- (c) No longer meets the requirements of subsection (2) of this section; or
- (d) Has benefits terminated ((due to)) <u>because</u> the ((legislature's termination of)) <u>legislature terminated</u> the funding for this program.
- (6) The ((department)) agency sets a reasonable payment limit for health insurance premiums((. The department sets its limit)) by tracking the charges billed to the ((department)) agency for ((department)) clients ((who have)) with AIDS. The ((department)) agency does not pay health insurance premiums that exceed fifty percent of the average of charges billed to the ((department)) agency for ((its)) clients with AIDS.

AMENDATORY SECTION (Amending WSR 11-14-075, filed 6/30/11, effective 7/1/11)

WAC 182-539-0300 Case management for ((persons)) people living with HIV/AIDS. The ((department)) medicaid agency provides HIV/AIDS case management to assist ((persons)) people infected with HIV to: Live as independently as possible; maintain and improve health; reduce behaviors that put the ((client)) person and others at risk; and gain access to needed medical, social, and educational services.

- (1) To be eligible for ((department)) agency-reimbursed HIV/AIDS case management services, ((the)) a person must:
 - (a) Have a current medical diagnosis of HIV or AIDS;
- (b) Be eligible for Title XIX (medicaid) coverage under either the categorically needy program (CNP) or the medically needy program (MNP); and
 - (c) Require:
- (i) Assistance to obtain and effectively use necessary medical, social, and educational services; or
- (ii) Ninety days of continued monitoring ((as provided in WAC 388-539-0350(2))) under WAC 182-539-0350(2).

- (2) The ((department)) agency has an interagency agreement with the Washington state department of health (DOH) to administer the HIV/AIDS case management program for ((the department's)) Title XIX (medicaid) clients.
- (3) HIV/AIDS case management agencies who serve ((the department's)) Washington apple health clients must be approved ((to perform these services)) by HIV client services, DOH.
 - (4) HIV/AIDS case management providers must:
- (a) Notify HIV positive ((persons)) people of their state-wide choice of available HIV/AIDS case management providers and document that notification in the client's record. This notification requirement does not obligate HIV/AIDS case management providers to accept all clients who request their services.
- (b) Have a current, client-signed authorization <u>form</u> to release((f)) <u>and</u> obtain information ((form)). The provider must have a valid authorization on file for the months that case management services are billed to the ((department)) <u>agency</u> (see RCW 70.02.030). The fee referenced in RCW 70.02.030 is included in the ((department's reimbursement)) <u>agency's payment</u> to providers. ((The department's)) <u>Clients</u> ((may)) <u>must</u> not be charged for services or documents related to covered services.
- (c) Maintain ((sufficient)) enough contact to ensure ((the effectiveness of)) effective, ongoing services ((per)) under subsection (5) of this section. The ((department)) agency requires a minimum of one contact per month between the HIV/AIDS case manager and the client. However, contact frequency must be ((sufficient)) enough to ensure ((implementation and ongoing maintenance of)) the individual service plan (ISP) is implemented and maintained.
- (5) HIV/AIDS case management providers must document services as follows:
- (a) Providers must ((initiate)) start a comprehensive assessment within two working days of the client's referral to HIV/AIDS case management services.
- (b) Providers must complete the assessment before billing for ongoing case management services.
- (c) If the assessment does not meet ((these)) requirements under this subsection, the provider must document the reason(((s))) or reasons for failure to do so.
- (d) The assessment must include the following elements as reported by the client:
- (i) Demographic information (((e.g.)) <u>for example</u>, age, gender, education, family composition, housing((-)));
- (ii) Physical status, ((the identity of)) the client's primary care provider, and current information on the client's medications((f)) and treatments;
- (iii) HIV diagnosis (both the documented diagnosis ((at)) from the ((time of)) assessment and historical diagnosis information);
- (iv) Psychological((/social/cognitive)), social, and cognitive functioning and mental health history;
 - (v) Ability to perform daily activities;
 - (vi) Financial and employment status;
 - (vii) Medical benefits and insurance coverage;
- (viii) Informal support systems (((e.g.)) for example, family, friends, and spiritual support);

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- (ix) Legal status, durable power of attorney, and any self-reported criminal history; and
- (x) Self-reported behaviors ((which)) that could lead to HIV transmission or re-infection (((e.g.)) for example, drug((f)) or alcohol use).
- (((b))) (e) Providers must develop, monitor, and revise the client's ((individual service plan ())ISP(())). The ISP identifies and documents the client's unmet needs and the resources needed to assist in meeting the client's needs. The case manager and the client must develop the ISP within two days of the comprehensive assessment, or the provider must document the reason this is not possible. An ISP must be:
- (i) Signed by the client, documenting that the client is voluntarily requesting and receiving the ((department)) agency-reimbursed HIV/AIDS case management services; and
- (ii) Reviewed monthly by the case manager through inperson or telephone contact with the client. ((Both)) The case manager must note the review and any changes ((must be noted by the case manager)):
 - (A) In the case record narrative; or
- (B) By entering notations in, initialing, and dating the ISP.
- (((e) Maintained)) (f) Providers must maintain ongoing narrative records ((-These records)) and must document case management services provided in each month ((for which)) the provider bills the ((department)) agency. Records must:
- (i) Be entered in chronological order and signed by the case manager;
- (ii) Document the reason for the case manager's interaction with the client; and
- (iii) Describe the plans in place or to be developed to meet unmet client needs.

<u>AMENDATORY SECTION</u> (Amending WSR 11-14-075, filed 6/30/11, effective 7/1/11)

- WAC 182-539-0350 HIV/AIDS case management reimbursement information. (1) The ((department reimburses)) medicaid agency pays HIV/AIDS case management providers for the following three services:
- (a) Comprehensive assessment((-)). The assessment must cover the areas outlined in WAC ((388 539 0300))) 182-539-0300 (1) and (5).
- (i) The ((department reimburses)) agency pays for only one comprehensive assessment unless the client's situation changes as follows:
- (A) There is a fifty percent change in need from the initial assessment; or
- (B) The client transfers to a new case management provider.
- (ii) ((The department reimburses for a comprehensive assessment in addition to a monthly charge for ease management (either full-month or partial-month) if the)) If a comprehensive assessment is completed during a month the client is medicaid eligible and ((the)) ongoing case management has been provided, the agency pays for the assessment and the monthly case management charge (either full-month or partial-month).

- (b) HIV/AIDS case management, full-month((—)). Providers may request the full-month ((reimbursement)) payment for any month ((in which)) when the ((eriteria in WAC 388-539-0300)) requirements of WAC 182-539-0300 have been met and the case manager has an individual service plan (ISP) in place for twenty or more days in that month. The ((department reimburses)) agency pays only one full-month case management fee per client in any one month.
- (c) HIV/AIDS case management, partial-month((—)). Providers may request the partial-month ((reimbursement)) payment for any month ((in which the criteria in WAC 388-539-0300)) when the requirements of WAC 182-539-0300 have been met and the case manager has an ISP in place for fewer than twenty days in that month. Using the partial-month reimbursement, the ((department may reimburse)) agency may pay two different case management providers for services to a client who changes from one provider to a new provider during that month.
- (2) The ((department)) agency limits ((reimbursement)) payments to HIV/AIDS case managers when a client becomes stabilized and no longer needs an ISP with active service elements. The ((department)) agency limits ((reimbursement)) payment for monitoring to ninety days ((past the time)) after the last active service element of the ISP is completed. ((Case management providers who are monitoring a stabilized client must meet all of the following criteria in order to bill the department for up)) To bill the agency for a maximum of ninety days of monitoring, a provider must:
 - (a) Document the client's history of recurring need;
 - (b) Assess the client for possible future instability; and
 - (c) Provide monthly monitoring contacts.
- (3) The ((department)) agency reinstates ((reimbursement)) payment for ongoing case management if a client shifts from monitoring status to active case management status due to documented need(((s))) or needs. Providers must meet the requirements in WAC ((388-539-0300)) 182-539-0300 when a client is reinstated to active case management.

WSR 15-17-055 PERMANENT RULES NORTHWEST CLEAN AIR AGENCY

[Filed August 13, 2015, 4:08 p.m., effective September 13, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The goal of this rule making is four-fold. First is to clarify and reconcile the rule language to better match state and federal rules and laws, including several minor clarifications and word changes, new and revised definitions (i.e., greenhouse gases, volatile organic compounds), and incorporation of three minor new source review exemptions. This will remove unnecessary gaps from the state and federal rules and laws that make implementation confusing and inconsistent for both the agency and regulated entities. Second is to update the maximum civil penalty to reflect the adjustment for inflation as allowed by law for the sake of transparency. Third is to newly adopt by reference five National Emissions Standards for Hazardous Air Pollutants.

Fourth is to update the effectiveness dates of the list of external regulations that we adopt by reference to enable implementation of the most recent version.

Citation of Existing Rules Affected by this Order: Amending Sections 104, 132, 133, 145, 155, 200, 300, and 470 of the Regulation of the NWCAA.

Statutory Authority for Adoption: Chapter 70.94 RCW. Adopted under notice filed as WSR 15-13-135 on June 17, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 13, 2015.

Mark Buford Deputy Director

Reviser's note: The material contained in this filing exceeded the page-count limitations of WAC 1-21-040 for appearance in this issue of the Register. It will appear in the 15-18 issue of the Register.

WSR 15-17-056 PERMANENT RULES HEALTH CARE AUTHORITY

(Washington Apple Health)

[Filed August 14, 2015, 9:22 a.m., effective September 14, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: This rule amendment clarifies eligibility for the breast and cervical cancer treatment program.

Citation of Existing Rules Affected by this Order: Amending WAC 182-505-0120.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160.

Adopted under notice filed as WSR 15-12-076 on May 29, 2015.

Changes Other than Editing from Proposed to Adopted Version: The agency removed the reference to alternative benefit plan in subsection (1)(d) and clarified that Washington apple health-categorically needy includes the modified adjusted gross income-based adult group.

Also, subsection (1)(i) includes an editorial change that lists the department of health's (DOH) form number for income standards and replaces a reference to DOH's web site.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or

Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 1, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 1, Repealed 0.

Date Adopted: August 14, 2015.

Wendy Barcus Rules Coordinator

AMENDATORY SECTION (Amending WSR 14-21-075, filed 10/10/14, effective 11/10/14)

WAC 182-505-0120 Washington apple health breast and cervical cancer treatment program (((BCCTP))) for women—Client eligibility. (1) Effective April 1, 2014, a woman is eligible for categorically needy (CN) coverage under the Washington apple health (WAH) breast and cervical cancer treatment program (BCCTP) only when she:

- (a) Has been screened for breast or cervical cancer under the department of health's breast, cervical, and colon health program (BCCHP);
- (b) ((Is found to)) Requires treatment for ((either)) breast ((or)) cancer, cervical cancer, or ((for)) a related precancerous condition;
 - (c) Is under sixty-five years of age;
- (d) Is not ((eovered by another WAH-CN program)) eligible for other WAH-CN coverage, including coverage under the MAGI-based adult group;
- (e) Is uninsured or does not otherwise have creditable coverage;
- (f) Meets residency requirements ((as described in)) under WAC 182-503-0520;
- (g) Meets Social Security number requirements ((as described in)) under WAC 182-503-0515;
- (h) ((Meets the requirements for citizenship or U.S. national status)) Is a U.S. citizen, U.S. national, qualifying American Indian born abroad, or (("))qualified alien(("status as described in)) under WAC 182-503-0535; and
- (i) Meets the income standard set by the BCCHP (((the standard may be found at: http://www.doh.wa.gov/Portals/1/Documents/Pubs/342-090-BCCHPFundingSources.pdf))) in DOH form 342-031.
- (2) The certification period for breast and cervical cancer treatment covered under this section is twelve months, as provided in WAC 182-504-0015. ((Renewal of eligibility must be completed prior to the end of each certification period)) To remain continuously enrolled, the client must renew her eligibility before the certification period ends. Eligibility for BCCTP coverage under subsection (1)(b) of this section continues throughout the course of treatment as certified by the BCCHP. Retroactive coverage ((is)) may be available ((as provided in)) under WAC 182-504-0005.

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WSR 15-17-065 PERMANENT RULES HEALTH CARE AUTHORITY

(Washington Apple Health)

[Filed August 14, 2015, 1:29 p.m., effective September 14, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: Revisions to this chapter are necessary to develop a grievance and appeal process for the health homes program and to add a clinical eligibility tool for those clients who do not have sufficient claims history to qualify for health homes. Additional changes were made to the definitions, client eligibility, appeals process, and a new section identifying the steps the agency uses to calculate a person's risk score used in the clinical eligibility tool.

Citation of Existing Rules Affected by this Order: Amending WAC 182-557-0050, 182-557-0100, 182-557-0200, 182-557-0300, and 182-557-0400.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160.

Adopted under notice filed as WSR 15-14-106 on June 30, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 5, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 5, Repealed 0.

Date Adopted: August 14, 2015.

Wendy Barcus Rules Coordinator

AMENDATORY SECTION (Amending WSR 13-21-048, filed 10/11/13, effective 11/11/13)

- **WAC 182-557-0050 Health home—General.** (1) The agency's health home program provides patient-centered care to ((beneficiaries)) participants who:
- (a) Have ((a)) at least one chronic condition as defined in WAC 182-557-0100; and
- (b) ((Be)) <u>Are</u> at risk of a second chronic condition ((with)) <u>as evidenced by</u> a minimum predictive risk score of 1.5((- and)
- (c) Are at risk for high health costs, avoidable admissions to institutional care settings, and poor health outcomes)).
- (2) <u>The health home((s)) program offers</u> six care coordination activities to assist ((the beneficiary)) <u>participants</u> in self-managing ((his or her)) <u>their</u> 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 ((beneficiary's)) 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 ((beneficiaries)) 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 ((beneficiaries')) participants' providers.
 - (3) The agency's health home program does not:
- (a) Change the scope of services for which a ((beneficiary)) participant is eligible under medicare or a Title XIX medicaid program;
- (b) Interfere with the relationship between a ((beneficiary)) participant and his or her chosen agency-enrolled provider(s);
- (c) Duplicate case management activities the ((beneficiary)) participant is receiving from other providers or programs; or
- (d) Substitute for established activities that are available through <u>other</u> programs administered ((through)) 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 ((beneficiaries)) 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.

AMENDATORY SECTION (Amending WSR 13-12-002, filed 5/22/13, effective 7/1/13)

WAC 182-557-0100 Health home program—Definitions. The following terms and definitions ((apply to the health home program:)) and those found in chapter 182-500 WAC apply to this chapter:

<u>Action</u> - For the purposes of this chapter, means one or more of the following:

- (a) The denial of eligibility for health home services.
- (b) The denial or limited authorization by the qualified health home of a requested health home service, including a type or level of health home service.
- (c) The reduction, suspension, or termination by the qualified health home of a previously authorized health home service.

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(d) The failure of a qualified health home to provide authorized health home services or provide health home services as quickly as the participant's condition requires.

Agency - See WAC 182-500-0010.

((**Beneficiary** - A person who is eligible for health home services. See WAC 182-557-0200.))

Chronic condition - ((A condition that, in combination with the beneficiary's risk score, determines eligibility for health home services. The chronic conditions covered are)) Means mental health conditions, substance use disorders, asthma, diabetes, heart disease, cancer, cerebrovascular disease, coronary artery disease, dementia or Alzheimer's disease, intellectual disability ((or disease)), HIV/AIDS, renal failure, chronic respiratory conditions, neurological disease, gastrointestinal, hematological, and musculoskeletal conditions.

((Contractor - The entity providing covered services under contract with the agency.))

<u>Client</u> - For the purposes of this chapter, means a person who is eligible to receive health home services under this chapter.

<u>Clinical eligibility tool</u> - Means an electronic spreadsheet that determines a client's risk score using the client's age, gender, diagnoses, and medications.

Coverage area(((s))) - ((Predetermined)) Means a geographical area(((s))) composed of ((specific counties that will facilitate a phased-in implementation of health homes.

Covered services - The medicare and medicaid covered services that will be coordinated as part of health home program activities.

DSHS - The department of social and health services.)) one or more counties within Washington state. The map of the coverage areas and the list of the qualified health homes is available on the agency's web site at: http://www.hca.wa.gov/medicaid/health homes/Pages/index.aspx.

Fee-for-service (FFS) - See WAC 182-500-0035.

Full dual eligible - For the purpose of this chapter, means ((an individual)) a fee-for-service client who receives qualified medicare beneficiary coverage or specified low-income medicare beneficiary coverage and categorically needy health care coverage.

Grievance - Means an expression of a participant's dissatisfaction about any matter other than an action. Possible subjects for grievances include the quality of health home services provided when an employee of a qualified health home provider is rude to the participant or shares confidential information about the participant without their permission.

Health action plan - ((A beneficiary-prioritized plan identifying what the beneficiary plans to do to improve their health and/or self-management of health conditions.

Health home - An entity composed of community based providers, qualified and contracted by the agency to provide health home services to eligible beneficiaries.)) Means a plan that lists the participant's goals to improve and self-manage their health conditions and steps needed to reach those goals.

<u>Health home care coordinator</u> - Means staff employed by or subcontracted by the qualified health home to provide one or more of the six defined health home care coordination benefits listed in WAC 182-557-0050.

<u>Health home services - Means services described in</u> WAC 182-557-0050 (2)(a) through (f).

Medicaid - See WAC 182-500-0070.

((Participation - A beneficiary's agreement to a health action plan which constitutes an agreement by the beneficiary to participate in health home services.

Predictive modeling - Using historical medical claims data to predict future utilization of health care services.

PRISM or Predictive Risk Intelligence SysteM - A DSHS-secure web-based predictive modeling and clinical decision support tool. This tool provides a unified view of medical, behavioral health, and long-term care service data that is refreshed on a regular basis. PRISM provides prospective medical risk scores that are a measure of expected medical costs in the next twelve months based on the patient's disease profile and pharmacy utilization.

Risk score - A measure of expected cost risk in the next twelve months based on the beneficiary's disease profiles, medical care utilization, and pharmacy utilization.

Self-management - With guidance from a health home care coordinator or health home care team, the concept of the beneficiary being the driver of his or her own health through the process of:

- Identification of health care conditions;
- Health action planning;
- Education:
- Monitoring to ensure progress towards achievement of health action goals; and
- Active involvement of the beneficiary in the decision-making process with the health home care coordinator or health home care team.)) Participant Means a client who has agreed to receive health home services under the requirements of this chapter.

Qualified health home - Means an organization that contracts with the agency to provide health home services to participants in one or more coverage areas and meets the requirements in WAC 182-557-0050(4).

Risk score - Means a measure of the expected costs of the health care a client is likely to incur in the next twelve months that the agency calculates using an algorithm developed by the department of social and health services (DSHS) or the clinical eligibility tool.

<u>AMENDATORY SECTION</u> (Amending WSR 13-12-002, filed 5/22/13, effective 7/1/13)

WAC 182-557-0200 Health home program—((Client)) Eligibility ((and participation)). (1) To ((participate in)) be eligible for the health home program, a ((beneficiary)) client must:

(a) Be a recipient of categorically needy health care coverage((; or

(b) A full dual eligible; and

(i))) through:

(i) Fee-for-service, including full dual eligible clients; or

(ii) An agency-contracted managed care organization.

(b) Have one or more chronic condition(((s))) as defined in WAC 182-557-0100; and ((at risk of developing another as determined by a PRISM risk score of 1.5 or greater; and

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- (c) Have a risk score of 1.5 or greater measured either with algorithms developed by the department of social and health services or the agency's clinical eligibility tool located on the agency's web site at http://www.hca.wa.gov/Pages/ health homes.aspx; and
 - (d) Agree to participate in a health home program.
- (2) A ((beneficiary participating in the health home program must not be:
- (a) Eligible for)) person is ineligible to receive health home services when the person has third-party coverage that provides comparable <u>health</u> care ((management)) services ((or requires administrative controls that would duplicate or interfere with the agency's health home program; or
- (b) Receiving services through another health system that health home services would duplicate)).
- (3) Using ((data)) information provided by the department of social and health services (DSHS), the agency identifies ((beneficiaries)) clients who are ((potential participants of)) eligible for health home services.
- (((a) Beneficiaries who are)) (4) When the agency determines a client is eligible for health home((s will be enrolled with a qualified health home; and
- (b))) services, the agency enrolls the client with a qualified health home in the coverage area where the client lives.
- (a) The client may decline ((enrollment)) health home services or change to a different ((plan if he or she chooses to.
- (4) A beneficiary who meets the participation requirements in this section will:
- (a) Receive services from a qualified health home that contracts with the agency to provide health home services in the coverage area in which the beneficiary resides;
- (b) Work with a care coordinator employed by or contracting with a qualified health home provider to)) qualified health home or a different health home care coordinator.
- (b) If the client accepts enrollment in the health home program, a health home care coordinator will:
- (i) Work with the participant to develop a health action plan that ((details)) describes the ((beneficiary's)) participant's health goals and includes a plan for ((achievement of)) reaching those goals; and
- (((e) Receive additional)) (ii) Provide health home services at a level appropriate to the ((beneficiary's)) participant's needs.
- (5) A participant who does not agree with a decision regarding health home services, including a decision regarding the ((beneficiary's)) client's eligibility to ((participate in)) receive health home services, has the right to an administrative hearing as described in chapter 182-526 WAC.

NEW SECTION

- WAC 182-557-0225 Health home services—Methodology for calculating a person's risk score. The agency uses eight steps to calculate a person's risk score.
- (1) Step 1. Collect paid claims and health plan **encounter data.** The agency obtains a set of paid fee-for-service claims and managed care encounters for a client.
- (a) For clients age seventeen and younger, the agency uses all paid claims and encounters within the last twentyfour months.

- (b) For clients age eighteen and older, the agency uses all paid claims and encounters within the last fifteen months.
- (i) The claims and encounters include the international classification of diseases (ICD) diagnosis codes and national drug codes (NDC) submitted by health care providers. These are used in steps 2 and 3 to create a set of risk categories.
- (ii) The agency uses two algorithms developed by the University of San Diego:
- (A) Chronic illness and disability payment system (CDPS) which assigns ICD diagnosis codes to CDPS risk categories (see Table 6 in Steps to Calculate a Medical Expenditure Risk Score located at http://www.hca.wa.gov/ medicaid/health homes/Documents/calculate medical expenditure risk.pdf); and
- (B) Medical Rx (MRx) which assigns NDCs to MRx risk categories (see Table 7 in Steps to Calculate a Medical Expenditure Risk Score located at http://www.hca.wa.gov/ medicaid/health homes/Documents/calculate medical expenditure risk.pdf).
- (2) Step 2. Group ICD diagnosis codes into chronic illness and disability payment system risk categories.
- (a) To group ICD diagnosis codes into the CDPS risk categories (see Table 1 in (b) of this subsection), the agency uses an ICD diagnosis code to CDPS risk categories crosswalk in subsection (1)(b)(ii)(A) of this section. Each of the ICD diagnosis codes listed is assigned to one risk category. If an ICD diagnosis code is not listed in the crosswalk it does not map to a risk category that is used in the calculation of the risk score.

(b) Table 1. Titles of Chronic Illness and Disability **Payment System Risk Categories**

Cardiovascular, very high

CARVH

CARM	Cardiovascular, medium
CARL	Cardiovascular, low
CAREL	Cardiovascular, extra low
PSYH	Psychiatric, high
PSYM	Psychiatric, medium
PSYML	Psychiatric, medium low
PSYL	Psychiatric, low
SKCM	Skeletal, medium
SKCL	Skeletal, low
SKCVL	Skeletal, very low
CNSH	Central Nervous System, high
CNSM	Central Nervous System, medium
CNSL	Central Nervous System, low
PULVH	Pulmonary, very high
PULH	Pulmonary, high
PULM	Pulmonary, medium
PULL	Pulmonary, low
GIH	Gastro, high
GIM	Gastro, medium
GIL	Gastro, low

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DIA1H	Diabetes, type 1 high	MRx2	Alzheimers
DIA1M	Diabetes, type 1 medium	MRx3	Anti-coagulants
DIA2M	Diabetes, type 2 medium	MRx4	Asthma/COPD
DIA2L	Diabetes, type 2 low	MRx5	Attention Deficit
SKNH	Skin, high	MRx6	Burns
SKNL	Skin, low	MRx7	Cardiac
SKNVL	Skin, very low	MRx8	Cystic Fibrosis
RENEH	Renal, extra high	MRx9	Depression/Anxiety
RENVH	Renal, very high	MRx10	Diabetes
RENM	Renal, medium	MRx11	EENT
RENL	Renal, low	MRx12	ESRD/Renal
SUBL	Substance abuse, low	MRx13	Folate Deficiency
SUBVL	Substance abuse, very low	MRx14	CMV Retinitis
CANVH	Cancer, very high	MRx15	Gastric Acid Disorder
CANH	Cancer, high	MRx16	Glaucoma
CANM	Cancer, medium	MRx17	Gout
CANL	Cancer, low	MRx18	Growth Hormone
DDM	Developmental Disability, medium	MRx19	Hemophilia/von Willebrands
DDL	Developmental Disability, low	MRx20	Hepatitis
GENEL	Genital, extra low	MRx21	Herpes
METH	Metabolic, high	MRx22	HIV
METM	Metabolic, medium	MRx23	Hyperlipidemia
METVL	Metabolic, very low	MRx24	Infections, high
PRGCMP	Pregnancy, complete	MRx25	Infections, medium
PRGINC	Pregnancy, incomplete	MRx26	Infections, low
EYEL	Eye, low	MRx27	Inflammatory/Autoimmune
EYEVL	Eye, very low	MRx28	Insomnia
CERL	Cerebrovascular, low	MRx29	Iron Deficiency
AIDSH	AIDS, high	MRx30	Irrigating Solution
INFH	Infectious, high	MRx31	Liver Disease
HIVM	HIV, medium	MRx32	Malignancies
INFM	Infectious, medium	MRx33	Multiple Sclerosis/Paralysis
INFL	Infectious, low	MRx34	Nausea
HEMEH	Hematological, extra high	MRx35	Neurogenic Bladder
HEMVH	Hematological, very high	MRx36	Osteoporosis/Pagets
HEMM	Hematological, medium	MRx37	Pain
HEML	Hematological, low	MRx38	Parkinsons/Tremor
(3) Step 3	. Group national drug codes (NDCs) into	MRx39	Prenatal Care
MRx risk cate		MRx40	Psychotic Illness/Bipolar
	up the NDC codes into MRx risk categories	MRx41	Replacement Solution
	(b) of this subsection), the agency uses a NDC risk categories crosswalk in subsection	MRx42	Seizure Disorders
(1)(b)(ii)(B) of		MRx43	Thyroid Disorder
	2. Titles of Medicaid Rx Risk Categories	MRx44	Transplant
	_	MRx45	Tuberculosis
MRx1	Alcoholism		

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- (4) **Step 4. Remove duplicate risk categories.** After mapping all diagnosis and drug codes to the risk categories, the agency eliminates duplicates of each client's risk categories so that there is only one occurrence of any risk category for each client.
- (5) Step 5. Select the highest CDPS risk category within a disease group.
- (a) The agency organizes CPDS risk categories into risk category groups of different intensity levels. The high risk category in each group is used in the calculation of the risk score. The lower level risk categories are eliminated from further calculations.

(b) Table 3. Chronic Disease Payment System Risk Category Groups

Group Description	Risk Categories (Ordered Highest to Lowest Intensity)
AIDS/HIV and Infection	AIDSH, INFH, HIVM, INFM, INFL
Cancer	CANVH, CANH, CANM, CANL
Cardiovascular	CARVH, CARM, CARL, CAREL
Central Nervous System	CNSH, CNSM, CNSL
Diabetes	DIA1H, DIA1M, DIA2M, DIA2L
Developmental Disability	DDM, DDL
Eye	EYEL, EYEVL
Gastrointestinal	GIH, GIM, GIL
Hematological	HEMEH, HEMVH, HEMM, HEML
Metabolic	METH, METM, METVL
Pregnancy	PRGCMP, PRGINC
Psychiatric	PSYH, PSYM, PSYML, PSYL
Substance Abuse	SUBL, SUBVL
Pulmonary	PULVH, PULH, PULM, PULL

Group Description	Risk Categories (Ordered Highest to Lowest Intensity)
Renal	RENEH, RENVH, RENM, RENL
Skeletal	SKCM, SKCL, SKCVL
Skin	SKNH, SKNL, SKNVL

(6) Step 6. Determine age/gender category.

(a) For each client, the agency selects the appropriate age/gender category. The eleven categories are listed in Table 4 in (b) of this subsection. The categories for ages below five and above sixty-five are gender neutral.

(b) Table 4. Age/Gender Categories

Age	Gender
Age <1	
Age 1 to 4	
Age 5 to 14	Male
Age 5 to 14	Female
Age 15 to 24	Male
Age 15 to 24	Female
Age 25 to 44	Male
Age 25 to 44	Female
Age 45 to 64	Male
Age 45 to 64	Female
Age 65+	

(7) Step 7. Apply risk weights.

- (a) The agency assigns each risk category and age/gender category a weight. The weight comes from either the model for clients who are age seventeen and younger or from the model for clients age eighteen and older.
 - (b) In each model there are three types of weights.
- (i) Age/gender Weights that correspond to the age/gender category of a client.
- (ii) CDPS Weights that correspond to fifty-eight of the CDPS risk categories.
- (iii) MRx Weights that correspond to forty-five of the MRx risk categories.

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(c) Table 5. Risk Score Weights

Category Type	Category	Description	Children (age <18)	Adults (age 18+)
Age/Gender	Age <1	Clients of age less than 1	0.40671	0.00000
	Age 1 to 4	Clients age 1 to 4	0.40671	0.00000
	Age 5 to 14, Male	Male clients age 5 to 14	0.28867	0.00000
	Age 5 to 14, Female	Female clients age 5 to 14	0.29441	0.00000
	Age 15 to 24, Male	Male clients age 15 to 24	0.22630	-0.01629
	Age 15 to 24, Female	Female clients age 15 to 24	0.26930	0.03640

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Category Type	Category	Description	Weights for Children (age <18)	Weights for Adults (age 18+)
Category Type	Age 25 to 44, Male	Male clients age 25 to 44	0.00000	0.04374
	Age 25 to 44, Female	Female clients age 25 to 44	0.00000	0.06923
	Age 45 to 64, Male	Male clients age 45 to 64	0.00000	0.13321
	Age 45 to 64, Female	Female clients age 45 to 64	0.00000	0.06841
	Age 65+	Clients age 65 and older	0.00000	-0.05623
CDPS	CARVH	Cardiovascular, very high	0.53941	2.86702
0210	CARM	Cardiovascular, medium	0.23927	0.73492
	CARL	Cardiovascular, low	0.18510	0.24620
	CAREL	Cardiovascular, extra low	0.06589	0.06225
	PSYH	Psychiatric, high	0.47759	0.27085
	PSYM	Psychiatric, medium	0.31301	0.00000
	PSYML	Psychiatric, medium low	0.16307	0.00000
	PSYL	Psychiatric, low	0.10344	0.00000
	SKCM	Skeletal, medium	0.23477	0.42212
	SKCL	Skeletal, low	0.10630	0.15467
	SKCVL	Skeletal, very low	0.07873	0.06773
	CNSH	Central Nervous System, high	0.30440	0.78090
	CNSM	Central Nervous System, medium	0.34386	0.40886
	CNSL	Central Nervous System, low	0.16334	0.18261
	PULVH	Pulmonary, very high	1.28955	4.01723
	PULH	Pulmonary, high	0.67772	0.39309
	PULM	Pulmonary, medium	0.39768	0.31774
	PULL	Pulmonary, low	0.14708	0.13017
	GIH	Gastro, high	0.78046	1.34924
	GIM	Gastro, medium	0.29755	0.24372
	GIL	Gastro, low	0.14579	0.05104
	DIA1H	Diabetes, type 1 high	0.31680	1.04302
	DIA1M	Diabetes, type 1 medium	0.31680	0.23620
	DIA2M	Diabetes, type 2 medium	0.16101	0.17581
	DIA2L	Diabetes, type 2 low	0.16101	0.09635
	SKNH	Skin, high	0.49898	0.37981
	SKNL	Skin, low	0.25185	0.45155
	SKNVL	Skin, very low	0.07523	0.02119
	RENEH	Renal, extra high	2.43609	3.41999
	RENVH	Renal, very high	0.93888	0.69251
	RENM	Renal, medium	0.33261	0.92846
	RENL	Renal, low	0.17492	0.17220
	SUBL	Substance Abuse, low	0.27104	0.16104
	SUBVL	Substance Abuse, very low	0.04493	0.08784
	CANVH	Cancer, very high	1.31064	2.80074
	CANH	Cancer, high	0.57909	0.97173
	CAINII	Cancer, mgn	0.31303	0.9/1/3

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CANM Cancer, medium 0.29642 0.38022 CANL Cancer, low 0.15058 0.2265 DDM Developmental Disability, medium 0.31414 0.27818 DDL Developmental Disability, low 0.11095 0.05913 GENBL Genital, extra low 0.02242 0.01121 METH Metabolic, high 0.51575 0.4726 METM Metabolic, high 0.51575 0.4726 METM Metabolic, nedium 0.33886 0.11310 METVL Metabolic, nedium 0.33886 0.11868 METM Metabolic, very low 0.14658 0.18678 PRGCMP Pregnancy, complete 0.00000 0.0000 PRGINC Pregnancy, incomplete 0.17563 0.51667 EYEVL Eye, very low 0.04094 0.0000 CERI. Cerebrovascular, low 0.10623 0.0000 CERI. Cerebrovascular, low 0.10623 0.0000 AIDSh injh 0.91357 0.97689 HIVM				Weights for Children	Weights for Adults
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MRx18 Growth Hormone 0.97620 1.59521					
			Hemophilia/von Willebrands	11.68858	

[43] Permanent

Category Type	Category	Description	Weights for Children (age <18)	Weights for Adults (age 18+)
	MRx20	Hepatitis	0.16213	0.00000
	MRx21	Herpes	0.04497	0.01725
	MRx22	HIV	0.69702	1.01178
	MRx23	Hyperlipidemia	0.00000	0.03791
	MRx24	Infections, high	1.23096	1.51663
	MRx25	Infections, medium	0.07841	0.06192
	MRx26	Infections, low	0.00000	0.00918
	MRx27	Inflammatory/Autoimmune	0.09058	0.20046
	MRx28	Insomnia	0.08510	0.06437
	MRx29	Iron Deficiency	0.12948	0.15054
	MRx30	Irrigating Solution	0.64194	0.16387
	MRx31	Liver Disease	0.34084	0.22681
	MRx32	Malignancies	0.36730	0.44200
	MRx33	Multiple Sclerosis/Paralysis	0.03542	0.04353
	MRx34	Nausea	0.16101	0.17120
	MRx35	Neurogenic Bladder	0.13864	0.07675
	MRx36	Osteoporosis/Pagets	0.00000	0.00000
	MRx37	Pain	0.04154	0.04151
	MRx38	Parkinsons/Tremor	0.17179	0.06257
	MRx39	Prenatal Care	0.00000	0.13192
	MRx40	Psychotic Illness/Bipolar	0.24399	0.20274
	MRx41	Replacement Solution	0.47152	1.49405
	MRx42	Seizure Disorders	0.23418	0.19837
	MRx43	Thyroid Disorder	0.04267	0.06326
	MRx44	Transplant	0.34858	0.05810
	MRx45	Tuberculosis	0.22778	0.00000

(8) Step 8. Sum risk weights to obtain the risk score.

After obtaining the weights that correspond to a client's age/gender category and set of risk categories, the agency takes a sum of the values of all of the weights. This sum is the risk score for a client.

<u>AMENDATORY SECTION</u> (Amending WSR 13-12-002, filed 5/22/13, effective 7/1/13)

- WAC 182-557-0300 Health home services—Confidentiality and data sharing. (1) Qualified health homes ((eontractors)) must comply with the confidentiality and data sharing requirements that apply to ((elients)) participants eligible under medicare and Title XIX medicaid programs and as specified in the health home contract.
- (2) The agency and the department of social and health services (DSHS) share health care data with qualified health homes ((contractors)) under the provisions of RCW 70.02.050 and the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

(3) The agency requires qualified health homes ((eon-tractors)) to monitor and evaluate participant activities and report to the agency as required by the health home contract.

Weights for

Weights for

NEW SECTION

WAC 182-557-0350 Health home—Grievance and appeals. (1) Qualified health homes must have a grievances and appeals process in place that complies with the requirements of this section and must maintain records of all grievances and appeals.

- (a) This section contains information about the grievance system for fee-for-service clients, including full dual eligible clients, for health home services. These participants must follow the process in chapter 182-526 WAC for appeals.
- (b) Participants who are enrolled in an agency-contracted managed care organization must follow the process in WAC 182-538-110 to file a grievance or an appeal for health home services.

Permanent [44]

(2) Grievance process.

- (a) Only a participant or the participant's authorized representative may file a grievance with the qualified health home orally or in writing. A health home care coordinator may not file a grievance for the participant unless the participant gives the health home care coordinator written consent to act on the participant's behalf.
 - (b) The qualified health home must:
- (i) Accept, document, record, and process grievances that it receives from the participant, the participant's representative, or the agency;
- (ii) Acknowledge receipt of each grievance, either orally or in writing, within two business days of receiving the grievance.
 - (iii) Assist the participant with all grievance processes;
- (iv) Cooperate with any representative authorized in writing by the participant;
- (v) Ensure that decision makers on grievances were not involved in the activity or decision being grieved, or any review of that activity or decision by qualified health home staff;
- (vi) Consider all information submitted by the participant or the participant's authorized representative;
 - (vii) Investigate and resolve all grievances;
- (viii) Complete the disposition of a grievance and notice to the affected parties as quickly as the participant's health condition requires, but no later than forty-five calendar days from receipt of the grievance;
- (ix) Notify the participant, either orally or in writing, of the disposition of grievances within five business days of determination. Notification must be in writing if the grievance is related to a quality of care issue.

(3) Appeal process.

- (a) The qualified health home must give the participant written notice of an action.
 - (b) The written notice must:
- (i) State what action the qualified health home intends to take and the effective date of the action;
- (ii) Explain the specific facts and reasons for the decision to take the intended action;
- (iii) Explain the specific rule or rules that support the decision, or the specific change in federal or state law that requires the action;
- (iv) Explain the participant's right to appeal the action according to chapter 182-526 WAC;
- (v) State that the participant must request a hearing within ninety calendar days from the date that the notice of action is mailed.
- (c) The qualified health home must send the written notice to the participant no later than ten days before the date of action. The written notice may be sent by the qualified health home no later than the date of the action it describes only if:
- (i) The qualified health home has factual information confirming the death of a participant; or
- (ii) The qualified health home receives a written statement signed by a participant that:
- (A) The participant no longer wishes to receive health home services; or

- (B) Provides information that requires termination or reduction of health home services and which indicates that the participant understands that supplying the information will result in health home services being ended or reduced.
- (d) A health home care coordinator may not file an appeal for the participant.
- (e) If the agency receives a request to appeal an action of the qualified health home, the agency will provide the qualified health home notice of the request.
- (f) The agency will process the participant's appeal in accordance with chapter 182-526 WAC.
- (g) Continued coverage. If a participant appeals an action by a qualified health home, the participant's health home services will continue consistent with WAC 182-504-0130
- (h) Reinstated coverage. If the agency ends or changes the participant's qualified health home coverage without advance notice, the agency will reinstate coverage consistent with WAC 182-504-0135.
- (i) If the participant requests a hearing, the qualified health home must provide to the agency and the participant, upon request, and within three working days, all documentation related to the appeal.
- (j) The qualified health home is an independent party and is responsible for its own representation in any administrative hearing, subsequent review process, and judicial proceedings.
- (k) If a final order, as defined in WAC 182-526-0010, requires a qualified health home to provide the participant health home services that were not provided while the appeal was pending, the qualified health home must authorize or provide the participant those health home services promptly. A qualified health home cannot seek further review of a final order issued in a participant's administrative appeal of an action taken by the qualified health home.

AMENDATORY SECTION (Amending WSR 13-12-002, filed 5/22/13, effective 7/1/13)

WAC 182-557-0400 Health home—Payment. Only an agency-contracted qualified health home may bill and be paid for providing health home services described in this chapter. Billing requirements and payment methodology are described in the contract between the agency and the ((eon-tractor)) qualified health home.

WSR 15-17-066 PERMANENT RULES HEALTH CARE AUTHORITY

(Washington Apple Health)

[Filed August 14, 2015, 1:51 p.m., effective September 14, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: To establish in rule the agency's policy for payment of services provided by, or in conjunction with, a resident physician.

Citation of Existing Rules Affected by this Order: Amending WAC 182-531-0250 and 182-531-1900.

Permanent

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160

Adopted under notice filed as WSR 15-14-071 on June 26, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 2, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 2, Repealed 0.

Date Adopted: August 14, 2015.

Wendy Barcus Rules Coordinator

<u>AMENDATORY SECTION</u> (Amending WSR 15-03-041, filed 1/12/15, effective 2/12/15)

WAC 182-531-0250 Who can provide and bill for physician-related and health care professional services. (1) The health care professionals and health care entities listed in WAC 182-502-0002 and enrolled with the medicaid agency can bill for physician-related and health care professional services that are within their scope of practice.

- (2) The agency pays for services provided by, or in conjunction with, a resident physician when:
- (a) The services are billed under the teaching hospital's national provider identifier (NPI) or the supervising physician's NPI;
- (b) The performing provider is identified on the claim under the teaching or resident physician's NPI; and
- (c) The services are provided and billed according to this chapter and chapters 182-501 and 182-502 WAC.
- (3) The agency does not pay for services performed by any of the health care professionals listed in WAC 182-502-0003.
- $((\frac{(3)}{)})$ (4) The agency pays eligible providers for physician-related services and health care professional services if those services are mandated by, and provided to(($\frac{1}{2}$)) clients who are eligible for, one of the following:
- (a) The <u>early and periodic screening, diagnosis, and</u> treatment (EPSDT) program;
- (b) A Washington apple health program for qualified medicare beneficiaries (QMB); or
 - (c) A waiver program.

AMENDATORY SECTION (Amending WSR 11-14-075, filed 6/30/11, effective 7/1/11)

WAC 182-531-1900 ((Reimbursement)) Payment—General requirements for physician-related services. (1)

- The ((department reimburses)) medicaid agency pays physicians and related providers for covered services provided to eligible clients on a fee-for-service basis, subject to the exceptions, restrictions, and other limitations listed in this chapter and other published issuances.
- (2) ((In order to be reimbursed)) To receive payment, physicians must bill the ((department)) agency according to the conditions of payment under WAC ((388-501-0150 and other issuances)) 182-502-0100.
- (3) The ((department)) agency does not separately reimburse certain administrative costs or services. The ((department)) agency considers these costs to be included in the ((reimbursement)) payment. These costs and services include the following:
 - (a) Delinquent payment fees;
 - (b) Educational supplies;
 - (c) Mileage;
 - (d) Missed or canceled appointments;
- (e) Reports, client charts, insurance forms, <u>and</u> copying expenses;
 - (f) Service charges;
 - (g) Take home drugs; and
 - (h) Telephoning (e.g., for prescription refills).
- (4) The ((department)) agency does not routinely pay for procedure codes which have a "#" or "NC" indicator in the fee schedule. The ((department)) agency reviews these codes for conformance to medicaid program policy only as an exception to policy or as a limitation extension. See WAC ((388-501-0160 and 388-501-0165)) 182-501-0160 and 182-501-0165.

WSR 15-17-068 PERMANENT RULES HORSE RACING COMMISSION

[Filed August 15, 2015, 7:37 a.m., effective September 15, 2015]

Effective Date of Rule: Thirty-one days after filing.
Purpose: Amends the timeframe for when a horse may work to be removed from the official veterinarian's list.

Citation of Existing Rules Affected by this Order: Amending WAC 260-70-580 Official veterinarian's list.

Statutory Authority for Adoption: RCW 67.16.020.

Adopted under notice filed as WSR 15-14-012 on June 19, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 1, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 1, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 1, Repealed 0; Pilot Rule Making:

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New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 14, 2015.

Douglas L. Moore Executive Secretary

AMENDATORY SECTION (Amending WSR 11-03-052, filed 1/14/11, effective 2/14/11)

- WAC 260-70-580 Official veterinarian's list. (1) An official veterinarian will maintain a list of all horses determined by an official veterinarian to be unfit to compete in a race due to illness, physical distress, unsoundness, infirmity or other medical condition.
- (2) A horse may be removed from the veterinarian's list when an official veterinarian determines the horse is capable of competing in a race.
- (a) Horses placed on the veterinarian's list that are required to work prior to being removed from the list will remain on the list for a minimum of ((ten)) seven days. (For purposes of counting days, the first day is the day the horse is placed on the veterinarian's list.)
- (b) Horses that must work to be removed from the veterinary list due to soreness, lameness, or certain injuries will be allowed to work no sooner than the ((eleventh)) eighth day after being placed on the list.
- (i) Works should be scheduled with an official veterinarian twenty-four hours in advance.
- (ii) The official veterinarian may require a physical exam prior to approving the work.
- (iii) Horses must work a minimum distance to be determined by an official veterinarian in a time comparable for the track condition that day.
- (((iii))) (iv) A blood test will be taken by an official veterinarian following the workout and medications levels may not exceed permitted post-race levels. The horse may be allowed to enter "conditionally" prior to the report from the testing laboratory. If the sample is reported to exceed a post-race allowable threshold for an approved medication, the horse will be scratched.
- (c) Horses placed on the veterinarian's list that are not required to work may not race for a minimum of thirteen days from the date placed on the list. (For purposes of counting days, the first day is the day the horse is placed on the veterinarian's list.)

WSR 15-17-072 PERMANENT RULES SUPERINTENDENT OF PUBLIC INSTRUCTION

[Filed August 17, 2015, 11:45 a.m., effective September 17, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: WAC 392-123-165 prescribes time durations for contracts school board of directors may enter into. Contract durations are aligned with RCW 28A.335.170. Changes in this WAC are needed to provide uniform fiscal guidance

and avoid confusion and potential conflict with existing rule

Citation of Existing Rules Affected by this Order: Amending WAC 392-123-165.

Statutory Authority for Adoption: RCW 28A.335.170.

Adopted under notice filed as WSR 15-14-129 on July 1, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 7, 2015.

Randy Dorn Superintendent of Public Instruction

<u>AMENDATORY SECTION</u> (Amending WSR 90-16-002, filed 7/19/90, effective 8/19/90)

WAC 392-123-165 Contractual liability extending beyond end of fiscal period. The board of directors of any school district may enter into contracts for their respective districts ((for periods not exceeding five years in duration)) with public and private persons, organizations, and entities for the following purposes:

- (1) To rent or lease building space((,)) <u>and</u> portable buildings((, security systems, computers, and other equipment)) for periods not exceeding ten years in duration; and
- (2) To rent security systems, computers, and other equipment or have maintained and repaired security systems, computers and other equipment for periods not exceeding five years in duration.

The budget for each fund of each school district shall contain a schedule which identifies that portion of each contractual liability incurred pursuant to RCW 28A.335.170 which extends beyond the fiscal period being budgeted. Said schedule shall list for each such contractual liability a brief description, the accounting code, the beginning and ending dates, the total dollar amount, and the estimated dollar amount extending beyond the end of the fiscal period being budgeted.

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WSR 15-17-074 PERMANENT RULES SUPERINTENDENT OF PUBLIC INSTRUCTION

[Filed August 17, 2015, 11:46 a.m., effective September 17, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: WAC 392-349-015(5) currently prescribes an unnecessary time requirement for the superintendent of public instruction to provide to the fiscal committees of the legislature in January of odd numbered years a list of remote and necessary small school plants. Removing the prescribed time requirement will have no effect on the review committee or superintendent of public instruction staff to obtain or supply this list. Removing the prescribed timing promotes efficiency for the review committee to conduct their review as prescribed in WAC 392-349-015(5). This list of remote and necessary small school plants is easily accessible by superintendent of public instruction staff and available to the fiscal committee at their request at any time.

Citation of Existing Rules Affected by this Order: Amending WAC 392-349-015.

Statutory Authority for Adoption: RCW 28A.315.175.

Adopted under notice filed as WSR 15-14-127 on July 1, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 7, 2015.

Randy Dorn Superintendent of Public Instruction

AMENDATORY SECTION (Amending WSR 06-17-038, filed 8/8/06, effective 9/8/06)

WAC 392-349-015 Remote and necessary small school plants—Review committee. (1) There is hereby established by the superintendent of public instruction a remote and necessary review committee comprised of at least the following five members:

(a) One member of the state board of education selected by the president of the board;

- (b) Two staff members from the office of the superintendent of public instruction, one who is knowledgeable about finance issues and one who is knowledgeable about curriculum issues, both selected by the state superintendent;
- (c) One school director selected by the Washington State School Directors' Association;
- (d) One school district administrator selected by the Washington Association of School Administrators((\(\frac{1}{2}\))\).
- (2) Vacancies on the review committee shall be filled by the person or organization responsible for appointments.
- (3) At the discretion of the superintendent of public instruction, other members may be added to the review committee.
- (4) It is the responsibility of the review committee to receive and review all applications from school districts requesting the superintendent of public instruction to grant remote and necessary status to a small school plant located in the district. Following the review of applications, the review committee shall recommend to the superintendent of public instruction whether such designation should be granted. Recommendations of the review committee shall be advisory only. The final determination rests solely with the superintendent of public instruction.
- (5) Every small school plant with remote and necessary status beginning 1996, shall be reviewed every four years by the review committee and the superintendent of public instruction. The review committee shall submit its findings and recommendations to the superintendent of public instruction. The review committee may conduct the review on-site, with the number of members participating determined by the committee, or may conduct the review by other means as determined by the committee. ((The superintendent of public instruction shall provide to the fiscal committees of the legislature in January of odd-numbered years a list of remote and necessary small school plants.))
- (6) A small school plant shall lose its remote and necessary status if the number of students exceeds the enrollment requirements set forth in the state Operating Appropriations Act for three consecutive years. The loss of remote and necessary status shall take effect the immediate ensuing school year. If a small school site should lose its remote and necessary status, the local serving school district may continue to maintain and operate the school site. When the enrollment of such small school plant again meets the requirements of the state Operating Appropriations Act, the school district may apply to the superintendent of public instruction for redesignation as a remote and necessary plant.
- (7) A small school plant shall lose its remote and necessary status if a local school district closes the small school plant. If the small school plant is reopened by the district, or a new small school plant is opened, the school district may apply to the superintendent of public instruction for remote and necessary designation for the small school plant. If such designation is granted, the remote and necessary status shall take effect as determined by the superintendent of public instruction.

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WSR 15-17-090 PERMANENT RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Economic Services Administration) [Filed August 18, 2015, 10:36 a.m., effective October 1, 2015]

Effective Date of Rule: October 1, 2015.

Purpose: The department is amending WAC 388-310-1300, 388-310-1500, and 388-450-0050, to reflect local minimum wage ordinances for the purposes of WorkFirst subsidized and unpaid employment programs.

Citation of Existing Rules Affected by this Order: Amending WAC 388-310-1300, 388-310-1500, and 388-450-0050.

Statutory Authority for Adoption: RCW 49.46.120, 74.04.050, 74.04.057, 74.04.500, 74.04.510, 74.08.090, 74.08A.120, chapters 74.08A and 74.12 RCW.

Adopted under notice filed as WSR 15-13-007 on June 4, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 3, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 3, Repealed 0.

Date Adopted: August 7, 2015.

Katherine I. Vasquez Rules Coordinator

AMENDATORY SECTION (Amending WSR 10-22-062, filed 10/29/10, effective 12/1/10)

WAC 388-310-1300 Community jobs. (1) What is the community jobs program?

Community jobs is a paid work experience that assists you to gain work skills and experience. You are placed in a community job (up to twenty hours per week) where your wages are paid by the community jobs program. If you participate in the program, you are eligible for support services that assist you in moving into a job where your employer pays all your wages.

(2) What is career jump?

Career jump offers job-ready community jobs participants an opportunity to gain paid work experience that leads to a permanent job. This program is a subset of community jobs and will be referred to as such. Career jump places you in a part time (up to twenty hours per week), community job where your earnings are paid by the community jobs program, for up to five months, at which time you will transition

to the employer's payroll. You will be provided with support services to assist you in retaining your job through the ninth month of the program. At or before the fifth month, the employment opportunity will be above minimum wage, thirty-two or more hours per week and include wage progression and benefits comparable to other employees.

(3) Who administers the community jobs program?

The ((state department of community, trade, and economic development (DCTED))) department of commerce (commerce) administers the community jobs program. ((DCTED)) Commerce contracts with local agencies throughout the state, known as community jobs contractors who develop and manage the community jobs positions, pay the wages, provide support services and act as the "employer of record" while you are enrolled in a community job.

(4) What types of work sites are used to provide community jobs?

The following work sites may be used to provide community jobs:

- (a) Federal, state or local governmental agencies and tribal governments;
- (b) Private and tribal nonprofit businesses, organizations and educational institutions;
- (c) Private for profit businesses for career jump placements.

(5) What are the requirements for the work sites?

Work sites for community jobs and career jump:

- (a) Must assist in strengthening work ethics, improve workplace skills and help you gain skills to move into a job where the employer pays all your wages. If they do not meet this requirement, they will not be considered for additional community jobs/career jump placements.
- (b) We will follow the employment rules described in WAC 388-310-1500. In any situation where training is inconsistent with the terms of a collective bargaining agreement, your community jobs contractor will obtain written approval from the labor organization concerned. Career jump employers will remain neutral with regard to neutralization in the worksite.
- (c) You will not be required to do work related to religious, electoral or partisan political activities.

(6) What are the benefits of community jobs?

You benefit from community jobs by:

- (a) Learning work skills;
- (b) Getting work experience;
- (c) Working twenty hours per week, while being paid federal, ((or)) state, or local minimum wage, whichever is higher; and
- (d) Earning paid personal leave as determined by ((DCTED)) commerce.

(7) How do I get into community jobs?

You will be placed into community jobs after you and your DSHS case manager decide:

- (a) You would benefit from community jobs after you have participated in job search without finding a job; and/or
- (b) You need a supportive work environment to help you become more employable.

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(8) What happens after I am placed in the community jobs program?

When you are placed in the community jobs program by DSHS:

- (a) You will be assigned to a community job by the community jobs contractor for no more than nine months. You will work twenty hours a week and participate in any other unpaid activities for twelve to twenty additional hours per week as required in your individual responsibility plan;
- (b) Your placement in community jobs will be reviewed by your DSHS case manager every three months during your nine-month placement for the following:
 - (i) To ensure you are TANF/SFA eligible; and
- (ii) To verify any earned or unearned income received by you or another member of your assistance unit (that is, you and other people in your household who are included on your cash grant).
- (c) Your community jobs contractor will review your case each month to ensure you are following your IRP and IDP, participating full time, and becoming more employable because of your community job;
- (d) If you request a different community jobs placement, we do not consider your request a refusal to participate without good cause under WAC 388-310-1600. You may be asked to explain why you want a different placement;
- (e) Grievance policies are in place for your protection. You will be required to sign an acknowledgment that you received a copy of this policy at the time of placement with the employer.

(9) How does community jobs affect my TANF benefits?

The amount of your TANF/SFA monthly grant will be determined by following the rules in WAC 388-450-0050 and 388-450-0215 (1), (3), (4), (5) and (6). WAC 388-450-0215(2), does not apply to your community jobs wages.

(10) What can I expect from my career jump placement?

- (a) You cannot represent more than ten percent of the total labor force for an employer that has ten or more employees
- (b) No more than one community jobs participant shall be allowed per private for profit worksite supervisor.
- (c) You will participate in developing a career progression plan that will include health care benefits comparable to other employees.
- (d) You may be eligible for unemployment benefits if you have participated in community jobs' career jump and have worked at least six hundred eighty hours in a base year. You will gain unemployment insurance credits for all hours worked under your career jump placement.
- (e) Your employer and your community jobs contractor will be required to follow ((DCTED's)) commerce's contractual agreements for career jump.

AMENDATORY SECTION (Amending WSR 08-07-046, filed 3/14/08, effective 5/1/08)

WAC 388-310-1500 WorkFirst—Employment conditions. (1) If I am a mandatory participant, are there any

limitations on the type of paid or unpaid employment I must accept?

If you are a mandatory participant, you must accept paid or unpaid employment (including any activity in which an employer-employee relationship exists) unless the employment:

- (a) Is not covered by industrial insurance (described in state law under Title 51 RCW) unless you are employed by a tribal government or a tribal private for-profit business;
 - (b) Is available because of a labor dispute;
- (c) Has working hours or conditions that interfere with your religious beliefs or practices (and a reasonable accommodation cannot be made);
- (d) Does not meet federal, state or tribal health and safety standards; or
- (e) Has unreasonable work demands or conditions, such as working for an employer who does not pay you on schedule

(2) Are there any additional limitations on when I can be required to accept paid employment?

You must accept paid employment unless the job or the employer:

- (a) Pays less than the federal, state, <u>local</u>, or tribe minimum wage, whichever is higher;
- (b) Does not provide unemployment compensation coverage (described in state law under Title 50 RCW) unless you:
- (i) Work for a tribal government or tribal for-profit business; or
- (ii) Are a treaty fishing rights related worker (and exempt under section 7873 of the Internal Revenue code);
- (c) Requires you to resign or refrain from joining a legitimate labor organization; or
- (d) Does not provide you benefits that are equal to those provided to other workers employed in similar jobs.

(3) How many hours of unpaid employment can I be required to perform?

You can be required to work a set number of hours of unpaid employment each month. The number of hours required will not be more than your TANF, SFA or GA-S cash grant plus Basic Food benefits, divided by the state or local, whichever is higher, minimum wage.

(4) What safeguards are in place to make sure I am not used to displace currently employed workers?

The following safeguards are in place to make sure you are not used to displace currently employed workers:

- (a) You cannot be required to accept paid or unpaid employment which:
- (i) Results in another employee's job loss, reduced wages, reduced hours of employment or overtime or lost employment benefits;
- (ii) Impairs existing contracts for services or collective bargaining agreements;
- (iii) Puts you in a job or assignment, or uses you to fill a vacancy, when:
- (A) Any other person is on lay off from the same (or very similar) job within the same organizational unit; or
- (B) An employer ends the job of a regular employee (or otherwise reduces its workforce) so you can be hired.

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- (iv) Reduces current employees' opportunities for promotions.
- (b) If a regular employee believes your subsidized or unpaid work activity (such as a community jobs or work experience position) violates any of the rules described above, this employee (or his or her representative) has the right to:
- (i) A grievance procedure (described in WAC 388-426-0005); and
 - (ii) A fair hearing (described in chapter 388-02 WAC).
- (5) What other rules apply specifically to subsidized or on-the-job training positions?

If you are in a subsidized or on-the-job training position:

- (a) WorkFirst state agencies must stop paying your wage or on-the-job training subsidy to your employer if your employer's worksite or operation becomes involved in a strike, lockout or bona fide labor dispute.
- (b) If your wage subsidy or on-the-job training agreement is ended (and we stop paying any subsidies to your employer) because you were used to displace another employee, it will be up to you and the employer to decide whether you can (or want to) keep working there.

AMENDATORY SECTION (Amending WSR 10-22-012, filed 10/21/10, effective 2/1/11)

WAC 388-450-0050 How does your participation in the community jobs (CJ) program affect your cash assistance and Basic Food benefits? (1) There are two different types of income in the community jobs program. They are:

- (a) Subsidized, where your wages are paid from TANF or SFA funds; and
- (b) Unsubsidized, where your wages are paid entirely by your employer.
- (2) We figure your total monthly subsidized or unsubsidized income by:
- (a) Estimating the number of hours you, your case manager, and the CJ contractor expect you to work for the month; and
- (b) Multiplying the number of hours by the federal, ((or)) state, or local minimum wage, whichever is higher.
- (3) Because you are expected to participate and meet the requirements of CJ, once we determine what your total monthly income is expected to be, we do not change your TANF grant if your actual hours are more or less than antici-
- (4) We treat the total income we expect you to get each month from your CJ position as:
- (a) Earned income for cash assistance, except we do not count any of the CJ income for the first month you receive your paycheck.
 - (b) Earned income for Basic Food for all months.
- (5) If your anticipated subsidized income is more than your grant amount, your cash grant is suspended. This means that you are still considered a TANF/SFA recipient, but you do not get a grant.
- (a) Your grant can be suspended up to a maximum of nine months.

- (b) You can keep participating in CJ even though your grant is suspended, as long as you would be eligible for a grant if we did not count your subsidized income.
- (c) The months your grant is suspended do not count toward your sixty-month lifetime limit.
- (6) If your unsubsidized income, after we subtract half of what you have earned is greater than your grant, your TANF/ SFA case will close. This happens because your income is over the maximum you are allowed. You will still be able to participate in the CJ program for up to a total of nine months.
- (7) If your income from other sources alone, not counting CJ income makes you ineligible for a cash grant, we terminate your grant and end your participation in CJ.

WSR 15-17-092 PERMANENT RULES **DEPARTMENT OF** SOCIAL AND HEALTH SERVICES

(Operations Support and Services Division) [Filed August 18, 2015, 10:45 a.m., effective September 18, 2015]

Effective Date of Rule: Thirty-one days after filing. Purpose: The department is updating chapter 388-03 WAC with the following changes:

- 1. Add the definition of "language specialist" to WAC 388-03-030;
- 2. Delete "per the nature of services LAPL provide to department clients, they are treated as department position cluster 5 employees and are certified as such." from the definition of "licensed agency personnel (LAPL)" in WAC 388-03-030;
- 3. Delete the second occurrence of the word "employees" in WAC 388-03-060(2); and
 - 4. Repeal WAC 388-03-124.

Citation of Existing Rules Affected by this Order: Repealing WAC 388-03-124; and amending WAC 388-03-030 and 388-03-060.

Statutory Authority for Adoption: RCW 74.04.025, 74.08.090, 45 C.F.R. Section 80.3 (b)(2), Title VI of the Civil Rights Act of 1964.

Other Authority: Reyes vs. Thompson Consent Order.

Adopted under notice filed as WSR 15-12-067 on May 29, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 2, Repealed 1.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify. Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making:

[51] Permanent New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 2, Repealed 1.

Date Adopted: August 5, 2015.

Katherine I. Vasquez Rules Coordinator

AMENDATORY SECTION (Amending WSR 15-07-008, filed 3/6/15, effective 4/6/15)

WAC 388-03-030 What definitions are important to understanding these rules? The following definitions are important to this chapter:

"Authorized interpreter" means a person who has met the training and language examination requirements for screened languages.

"Certified/authorized bilingual employee" means a department employee who has passed a department bilingual employee examination in either a certified or a screened language.

"Certified interpreter" means a person who has met the training requirements and has passed one or both of the following examinations:

- (1) The department's social services interpreter certification examination in a certified language; or
- (2) The department's medical interpreter certification examination in a certified language.

"Certified languages for interpreters" means any of the languages listed under certified languages on the official LTC web site and in the official LTC examination manual.

"Certified languages for translators" means any of the languages listed under certified languages on the official LTC web site and in the official LTC examination manual.

"Certified translator" means a person who has met the training requirements and has passed the department's translator certification examination in a certified language.

"Department" means the department of social and health services (DSHS).

"Employee" means a department bilingual employee whose position requires the use of bilingual skills as part of the job functions.

"Examination manual" means the language testing and certification section's professional language certification examination manual. To obtain a copy of this manual, visit the LTC web site.

"Interpretation" means the process of transferring a message orally from one language into another.

"Language access provider" means, pursuant to RCW 41.56.030(10) and solely for the purpose of public employees' collective bargaining, any independent contractor who provides spoken language interpreter services for department of social and health services appointments or medicaid enrollee appointments.

"Language specialist" means a high school or above language instructor who possesses a BA or higher academic degree majoring in language/linguistics studies of any language.

"Language testing and certification (LTC)" means the section within the department that is responsible for managing the bilingual skills testing and certification of employees, LAPL, and contracted interpreters and translators. "Licensed agency personnel (LAPL)" means an employee of a county government agency/program that contracts with the department to provide services to department clients. ((Per the nature of services LAPL provide to department clients, they are treated as department position cluster 5 employees and are certified as such.))

"Limited English proficient (LEP) client" means a person applying for or receiving department services, either directly or indirectly, who, because of a non-English speaking cultural background, cannot readily speak or understand the English language.

"Medical interpreter" means an interpreter who renders language interpretation services in a health care setting.

"Position cluster" means a group of DSHS jobs/positions that share the same or similar nature of job functions or responsibilities.

"Recognized interpreter" for spoken languages means a person who is certified by:

- (1) The Washington state administrative office of the courts (AOC) as a court interpreter; or
- (2) The Administrative Office of the United States Courts as a federal court interpreter; or
- (3) A national interpreter certification body as a health care interpreter and is recognized by the department; or
- (4) A nonprofit organization that uses a credible certification program to certify professional interpreters and is recognized by the department; or
- (5) Another state or U.S. territory or another country whose certification program is comparable to DSHS certification and based upon similar requirements.

"Recognized translator" for spoken languages means a person who is certified by:

- (1) The American Translators Association (ATA); or
- (2) A nonprofit organization that uses a credible certification program to certify professional translators and is recognized by the department; or
- (3) Another state or U.S. territory or another country whose certification program is comparable to DSHS certification and based upon similar requirements.

"Screened language" means any spoken language or any dialect within a spoken language that is not one of the certified languages.

"Social service interpreter" means an interpreter who renders language interpretation services in settings where human services programs are provided.

"Source language" means the language from which an interpretation and/or translation is rendered.

"Target language" means the language into which an interpretation and/or translation is rendered.

"Translation" means the process of transferring a written message from one language into another.

AMENDATORY SECTION (Amending WSR 15-07-008, filed 3/6/15, effective 4/6/15)

WAC 388-03-060 What is the responsibility of the language testing and certification (LTC) section in certifying and authorizing interpreters, translators, employees, and LAPL? Language testing and certification (LTC) is the section within DSHS responsible for:

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- (1) Establishing and publishing systems, methods, and procedures for certifying, screening and/or evaluating the interpretation and/or translation skills of employees, LAPL, interpreters and translators who work with department clients, employees, and service providers;
- (2) Ensuring that certified/authorized interpreters, translators, employees, and LAPL are aware of DSHS's code of professional conduct for interpreters, translators, ((employees,)) and LAPL;
- (3) Overseeing that the test development process is empirically sound, the test instruments are valid and reliable, and the test administration procedures and test evaluation criteria are consistent with the standards established by the department;
- (4) Coordinating and managing precertification/authorization training requirements, postcertification/authorization continuing education requirements, and coordinating the decertification process for interpreters/translators; and
- (5) Maintaining the online interpreter data base for public access.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 388-03-124

How do I register for a certification or screening examination if I am a department employee or an applicant for a bilingual position with the department?

WSR 15-17-094 PERMANENT RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Developmental Disabilities Administration) [Filed August 18, 2015, 11:43 a.m., effective September 18, 2015]

Effective Date of Rule: Thirty-one days after filing.
Purpose: The department is updating chapter 388-825
WAC to provide the latest information and verbiage related to processes, policies, and information on eligibility.

Citation of Existing Rules Affected by this Order: Repealing WAC 388-825-061, 388-825-062, 388-825-063, 388-825-066, 388-825-069, 388-825-071 and 388-825-088; and amending WAC 388-825-058, 388-825-072, 388-825-074, 388-825-081, 388-825-084, 388-825-0871, 388-825-089, 388-825-091, 388-825-093, 388-825-094, 388-825-097, 388-825-098, 388-825-100, 388-825-101, 388-825-102, 388-825-103, 388-825-104, 388-825-105, 388-825-120, 388-825-125, 388-825-130, 388-825-135, 388-825-150, 388-825-165, 388-825-201, 388-825-206, 388-825-211, 388-825-300, and 388-825-360.

Statutory Authority for Adoption: RCW 71A.10.015, 71A.18.020, 71A.12.030, and Title 71A RCW.

Adopted under notice filed as WSR 15-12-073 on May 29, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 1, Amended 29, Repealed 7.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 1, Amended 29, Repealed 7.

Date Adopted: August 7, 2015.

Katherine I. Vasquez Rules Coordinator

Reviser's note: The material contained in this filing exceeded the page-count limitations of WAC 1-21-040 for appearance in this issue of the Register. It will appear in the 15-18 issue of the Register.

WSR 15-17-104 PERMANENT RULES DEPARTMENT OF LABOR AND INDUSTRIES

[Filed August 18, 2015, 2:48 p.m., effective October 1, 2015]

Effective Date of Rule: Rule changes will be effective October 1, 2015.

Purpose: The purpose of the changes is to ensure the agency is current in its use of the federally adopted diagnosis code set. The anticipated effect of this rule change is to decrease administrative burden on the provider community if and when the federal government adopts a new diagnostic code set by eliminating the need for dual billing systems to process both ICD-9 and ICD-10 codes for different payers.

Citation of Existing Rules Affected by this Order: Amending WAC 296-20-125 Billing procedures, 296-20-01002 Definitions, 296-20-025 Initiating treatment and submitting a claim for benefits, 296-20-03001 Treatment requiring authorization, and 296-20-06101 What reports are health care providers required to submit to the insurer?

Statutory Authority for Adoption: RCW 51.04.020, 51.04.030.

Adopted under notice filed as WSR 15-13-098 on June 16, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 5, Repealed 0.

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Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 18, 2015.

Joel Sacks Director

AMENDATORY SECTION (Amending WSR 08-24-047, filed 11/25/08, effective 12/26/08)

WAC 296-20-01002 Definitions. Acceptance, accepted condition: Determination by a qualified representative of the department or self-insurer that reimbursement for the diagnosis and curative or rehabilitative treatment of a claimant's medical condition is the responsibility of the department or self-insurer. The condition being accepted must be specified by one or more diagnosis codes from the current edition of the International Classification of Diseases, Clinically Modified (ICD-CM).

Appointing authority: For the evidence-based prescription drug program of the participating agencies in the state purchased health care programs, appointing authority shall mean the following persons acting jointly: The administrator of the health care authority, the secretary of the department of social and health services, and the director of the department of labor and industries.

Attendant care: Those proper and necessary personal care services provided to maintain the worker in his or her residence. Refer to WAC 296-23-246 for more information.

Attending provider report: This type of report may also be referred to as a "60 day" or "special" report. The following information must be included in this type of report. Also, additional information may be requested by the department as needed.

- (1) The condition(s) diagnosed including ((ICD-9-CM)) the current federally adopted ICD-CM codes and the objective and subjective findings.
- (2) Their relationship, if any, to the industrial injury or exposure.
- (3) Outline of proposed treatment program, its length, components, and expected prognosis including an estimate of when treatment should be concluded and condition(s) stable. An estimated return to work date should be included. The probability, if any, of permanent partial disability resulting from industrial conditions should be noted.
- (4) If the worker has not returned to work, the attending doctor should indicate whether a vocational assessment will be necessary to evaluate the worker's ability to return to work and why.
- (5) If the worker has not returned to work, a doctor's estimate of physical capacities should be included with the report. If further information regarding physical capacities is needed or required, a performance-based physical capacities evaluation can be requested. Performance-based physical capacities evaluations should be conducted by a licensed occupational therapist or a licensed physical therapist. Per-

formance-based physical capacities evaluations may also be conducted by other qualified professionals who provided performance-based physical capacities evaluations to the department prior to May 20, 1987, and who have received written approval to continue supplying this service based on formal department review of their qualifications.

Attending provider: For these rules, means a person licensed to independently practice one or more of the following professions: Medicine and surgery; osteopathic medicine and surgery; chiropractic; naturopathic physician; podiatry; dentistry; optometry; and advanced registered nurse practitioner. An attending provider actively treats an injured or ill worker.

Authorization: Notification by a qualified representative of the department or self-insurer that specific proper and necessary treatment, services, or equipment provided for the diagnosis and curative or rehabilitative treatment of an accepted condition will be reimbursed by the department or self-insurer.

Average wholesale price (AWP): A pharmacy reimbursement formula by which the pharmacist is reimbursed for the cost of the product plus a mark-up. The AWP is an industry benchmark which is developed independently by companies that specifically monitor drug pricing.

Baseline price (BLP): Is derived by calculating the mean average for all NDC's (National Drug Code) in a specific product group, determining the standard deviation, and calculating a new mean average using all prices within one standard deviation of the original mean average. "Baseline price" is a drug pricing mechanism developed and updated by First Data Bank.

Bundled codes: When a bundled code is covered, payment for them is subsumed by the payment for the codes or services to which they are incident. (An example is a telephone call from a hospital nurse regarding care of a patient. This service is not separately payable because it is included in the payment for other services such as hospital visits.) Bundled codes and services are identified in the fee schedules.

By report: BR (by report) in the value column of the fee schedules indicates that the value of this service is to be determined by report (BR) because the service is too unusual, variable or new to be assigned a unit value. The report shall provide an adequate definition or description of the services or procedures that explain why the services or procedures (e.g., operative, medical, radiological, laboratory, pathology, or other similar service report) are too unusual, variable, or complex to be assigned a relative value unit, using any of the following as indicated:

- (1) Diagnosis;
- (2) Size, location and number of lesion(s) or procedure(s) where appropriate;
- (3) Surgical procedure(s) and supplementary procedure(s);
- (4) Whenever possible, list the nearest similar procedure by number according to the fee schedules;
 - (5) Estimated follow-up;
 - (6) Operative time;
- (7) Describe in detail any service rendered and billed using an "unlisted" procedure code.

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The department or self-insurer may adjust BR procedures when such action is indicated.

Chart notes: This type of documentation may also be referred to as "office" or "progress" notes. Providers must maintain charts and records in order to support and justify the services provided. "Chart" means a compendium of medical records on an individual patient. "Record" means dated reports supporting bills submitted to the department or self-insurer for medical services provided in an office, nursing facility, hospital, outpatient, emergency room, or other place of service. Records of service shall be entered in a chronological order by the practitioner who rendered the service. For reimbursement purposes, such records shall be legible, and shall include, but are not limited to:

- (1) Date(s) of service;
- (2) Patient's name and date of birth;
- (3) Claim number;
- (4) Name and title of the person performing the service;
- (5) Chief complaint or reason for each visit;
- (6) Pertinent medical history;
- (7) Pertinent findings on examination;
- (8) Medications and/or equipment/supplies prescribed or provided;
 - (9) Description of treatment (when applicable);
- (10) Recommendations for additional treatments, procedures, or consultations;
 - (11) X rays, tests, and results; and
 - (12) Plan of treatment/care/outcome.

Consultation examination report: The following information must be included in this type of report. Additional information may be requested by the department as needed.

- (1) A detailed history to establish:
- (a) The type and severity of the industrial injury or occupational disease.
 - (b) The patient's previous physical and mental health.
- (c) Any social and emotional factors which may effect recovery.
- (2) A comparison history between history provided by attending doctor and injured worker, must be provided with
- (3) A detailed physical examination concerning all systems affected by the industrial accident.
- (4) A general physical examination sufficient to demonstrate any preexisting impairments of function or concurrent condition.
- (5) A complete diagnosis of all pathological conditions including ((ICD-9-CM)) the current federally adopted ICD-CM codes found to be listed:
 - (a) Due solely to injury.
- (b) Preexisting condition aggravated by the injury and the extent of aggravation.
- (c) Other medical conditions neither related to nor aggravated by the injury but which may retard recovery.
- (d) Coexisting disease (arthritis, congenital deformities, heart disease, etc.).
 - (6) Conclusions must include:
- (a) Type of treatment recommended for each pathological condition and the probable duration of treatment.

- (b) Expected degree of recovery from the industrial condition
- (c) Probability, if any, of permanent disability resulting from the industrial condition.
 - (d) Probability of returning to work.
- (7) Reports of necessary, reasonable X-ray and laboratory studies to establish or confirm the diagnosis when indicated.

Doctor or attending doctor: For these rules, means a person licensed to independently practice one or more of the following professions: Medicine and surgery; osteopathic medicine and surgery; chiropractic; naturopathic physician; podiatry; dentistry; optometry. An attending doctor is a treating doctor.

Only those persons so licensed may sign report of accident forms, the provider's initial report, and certify time loss compensation; however, physician assistants (PAs) also may sign these forms pursuant to WAC 296-20-01501 (PAs may be "treating providers" pursuant to the definition contained in WAC 296-20-01002); and ARNPs may also sign these forms pursuant to WAC 296-23-241 (ARNPs may be "attending providers" consistent with the definition contained in WAC 296-20-01002).

Emergent hospital admission: Placement of the worker in an acute care hospital for treatment of a work related medical condition of an unforeseen or rapidly progressing nature which if not treated in an inpatient setting, is likely to jeopardize the workers health or treatment outcome.

Endorsing practitioner: A practitioner who has reviewed the preferred drug list and has notified the health care authority that he or she has agreed to allow therapeutic interchange of a preferred drug for any nonpreferred drug in a given therapeutic class.

Fatal: When the attending doctor has reason to believe a worker has died as a result of an industrial injury or exposure, the doctor should notify the nearest department service location or the self-insurer immediately. Often an autopsy is required by the department or self-insurer. If so, it will be authorized by the service location manager or the self-insurer. Benefits payable include burial stipend and monthly payments to the surviving spouse and/or dependents.

Fee schedules or maximum fee schedule(s): The fee schedules consist of, but are not limited to, the following:

- (((a))) <u>(1)</u> Health Care Common Procedure Coding System Level I and II Codes, descriptions and modifiers that describe medical and other services, supplies and materials.
- $((\frac{(b)}{(b)}))$ (2) Codes, descriptions and modifiers developed by the department.
- (((e))) (3) Relative value units (RVUs), calculated or assigned dollar values, percent-of-allowed-charges (POAC), or diagnostic related groups (DRGs), that set the maximum allowable fee for services rendered.
- ((((d))) (<u>4</u>) Billing instructions or policies relating to the submission of bills by providers and the payment of bills by the department or self-insurer.
- $((\frac{(e)}{(e)}))$ (5) Average wholesale price (AWP), baseline price (BLP), and policies related to the purchase of medications.

Health services provider or provider: For these rules means any person, firm, corporation, partnership, associa-

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tion, agency, institution, or other legal entity providing any kind of services related to the treatment of an industrially injured worker. It includes, but is not limited to, hospitals, medical doctors, dentists, chiropractors, vocational rehabilitation counselors, osteopathic physicians, pharmacists, podiatrists, physical therapists, occupational therapists, massage therapists, psychologists, naturopathic physicians, and durable medical equipment dealers.

Home nursing: Those nursing services that are proper and necessary to maintain the worker in his or her residence. These services must be provided through an agency licensed, certified or registered to provide home care, home health or hospice services. Refer to WAC 296-20-091 for more information.

Independent or separate procedure: Certain of the fee schedule's listed procedures are commonly carried out as an integral part of a total service, and as such do not warrant a separate charge. When such a procedure is carried out as a separate entity, not immediately related to other services, the indicated value for "independent procedure" is applicable.

Initial prescription drugs: Any drug prescribed for an alleged industrial injury or occupational disease during the initial visit.

Initial visit: The first visit to a health care provider during which the *Report of Industrial Injury or Occupational Disease* is completed and the worker files a claim for workers compensation.

Medical aid rules: The Washington Administrative Codes (WACs) that contain the administrative rules for medical and other services rendered to workers.

Modified work status: The worker is not able to return to their previous work, but is physically capable of carrying out work of a lighter nature. Workers should be urged to return to modified work as soon as reasonable as such work is frequently beneficial for body conditioning and regaining self confidence.

Under RCW 51.32.090, when the employer has modified work available for the worker, the employer must furnish the doctor and the worker with a statement describing the available work in terms that will enable the doctor to relate the physical activities of the job to the worker's physical limitations and capabilities. The doctor shall then determine whether the worker is physically able to perform the work described. The employer may not increase the physical requirements of the job without requesting the opinion of the doctor as to the worker's ability to perform such additional work. If after a trial period of reemployment the worker is unable to continue with such work, the worker's time loss compensation will be resumed upon certification by the attending doctor.

If the employer has no modified work available, the department should be notified immediately, so vocational assessment can be conducted to determine whether the worker will require assistance in returning to work.

Nonemergent (elective) hospital admission: Placement of the worker in an acute care hospital for medical treatment of an accepted condition which may be safely scheduled in advance without jeopardizing the worker's health or treatment outcome.

Physician or attending physician (AP): For these rules, means any person licensed to perform one or more of the following professions: Medicine and surgery; or osteopathic medicine and surgery. An AP is a treating physician.

Practitioner or licensed health care provider: For these rules, means any person defined as a "doctor" under these rules, or licensed to practice one or more of the following professions: Audiology; physical therapy; occupational therapy; pharmacy; prosthetics; orthotics; psychology; nursing; advanced registered nurse practitioners (ARNPs); certified medical physician assistants or osteopathic physician assistants; and massage therapy.

Preferred drug list: The list of drugs selected by the appointing authority to be used by applicable state agencies as the basis for the purchase of drugs in state purchased health care programs.

Proper and necessary:

- (1) The department or self-insurer pays for proper and necessary health care services that are related to the diagnosis and treatment of an accepted condition.
- (2) Under the Industrial Insurance Act, "proper and necessary" refers to those health care services which are:
- (a) Reflective of accepted standards of good practice, within the scope of practice of the provider's license or certification:
- (b) Curative or rehabilitative. Care must be of a type to cure the effects of a work-related injury or illness, or it must be rehabilitative. Curative treatment produces permanent changes, which eliminate or lessen the clinical effects of an accepted condition. Rehabilitative treatment allows an injured or ill worker to regain functional activity in the presence of an interfering accepted condition. Curative and rehabilitative care produce long-term changes;
- (c) Not delivered primarily for the convenience of the claimant, the claimant's attending doctor, or any other provider; and
- (d) Provided at the least cost and in the least intensive setting of care consistent with the other provisions of this definition.
- (3) The department or self-insurer stops payment for health care services once a worker reaches a state of maximum medical improvement. Maximum medical improvement occurs when no fundamental or marked change in an accepted condition can be expected, with or without treatment. Maximum medical improvement may be present though there may be fluctuations in levels of pain and function. A worker's condition may have reached maximum medical improvement though it might be expected to improve or deteriorate with the passage of time. Once a worker's condition has reached maximum medical improvement, treatment that results only in temporary or transient changes is not proper and necessary. "Maximum medical improvement" is equivalent to "fixed and stable."
- (4) In no case shall services which are inappropriate to the accepted condition or which present hazards in excess of the expected medical benefits be considered proper and necessary. Services that are controversial, obsolete, investigational or experimental are presumed not to be proper and necessary, and shall be authorized only as provided in WAC 296-20-03002(6) and 296-20-02850.

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Refill: The continuation of therapy with the same drug (including the renewal of a previous prescription or adjustments in dosage) when a prescription is for an antipsychotic, antidepressant, chemotherapy, antiretroviral or immunosuppressive drug, or for the refill of an immunomodulator/antiviral treatment for hepatitis C for which an established, fixed duration of therapy is prescribed for at least twenty-four weeks but no more than forty-eight weeks.

Regular work status: The injured worker is physically capable of returning to his/her regular work. It is the duty of the attending doctor to notify the worker and the department or self-insurer, as the case may be, of the specific date of release to return to regular work. Compensation will be terminated on the release date. Further treatment can be allowed as requested by the attending doctor if the condition is not stationary and such treatment is needed and otherwise in order.

Temporary partial disability: Partial time loss compensation may be paid when the worker can return to work on a limited basis or return to a lesser paying job is necessitated by the accepted injury or condition. The worker must have a reduction in wages of more than five percent before consideration of partial time loss can be made. No partial time loss compensation can be paid after the worker's condition is stationary. All time loss compensation must be certified by the attending doctor based on objective findings.

Termination of treatment: When treatment is no longer required and/or the industrial condition is stabilized, a report indicating the date of stabilization should be submitted to the department or self-insurer. This is necessary to initiate closure of the industrial claim. The patient may require continued treatment for conditions not related to the industrial condition; however, financial responsibility for such care must be the patient's.

Therapeutic alternative: Drug products of different chemical structure within the same pharmacologic or therapeutic class and that are expected to have similar therapeutic effects and safety profiles when administered in therapeutically equivalent doses.

Therapeutic interchange: To dispense with the endorsing practitioner's authorization, a therapeutic alternative to the prescribed drug.

Total permanent disability: Loss of both legs or arms, or one leg and one arm, total loss of eyesight, paralysis or other condition permanently incapacitating the worker from performing any work at any gainful employment. When the attending doctor feels a worker may be totally and permanently disabled, the attending doctor should communicate this information immediately to the department or self-insurer. A vocational evaluation and an independent rating of disability may be arranged by the department prior to a determination as to total permanent disability. Coverage for treatment does not usually continue after the date an injured worker is placed on pension.

Total temporary disability: Full-time loss compensation will be paid when the worker is unable to return to any type of reasonably continuous gainful employment as a direct result of an accepted industrial injury or exposure.

Treating provider: For these rules, means a person licensed to practice one or more of the following professions:

Medicine and surgery; osteopathic medicine and surgery; chiropractic; naturopathic physician; podiatry; dentistry; optometry; advanced registered nurse practitioner (ARNP); and certified medical physician assistants or osteopathic physician assistants. A treating provider actively treats an injured or ill worker.

Unusual or unlisted procedure: Value of unlisted services or procedures should be substantiated "by report" (BR).

Utilization review: The assessment of a claimant's medical care to assure that it is proper and necessary and of good quality. This assessment typically considers the appropriateness of the place of care, level of care, and the duration, frequency or quantity of services provided in relation to the accepted condition being treated.

AMENDATORY SECTION (Amending WSR 12-06-066, filed 3/6/12, effective 4/6/12)

WAC 296-20-025 Initiating treatment and submitting a claim for benefits. (1) Worker's responsibility: The worker must notify the provider when the worker has reason to believe his/her injury or illness is work related. If treatment beyond the initial office or emergency room visit is needed, the worker must seek treatment from a network provider.

(2) Provider's responsibility: The provider must notify the worker if he/she identifies an injury, illness, or condition which he/she has reason to believe is work related.

Once such determination is made by either the worker or the attending provider, a report of the injury or illness must be filed with the department or self-insurer.

Failure to comply with this responsibility can result in penalties as outlined in RCW 51.48.060.

(3) Additional provider responsibilities: The provider must ascertain whether he/she is the first attending provider and give emergency treatment.

The first attending provider must immediately complete and forward a report of the injury or illness to the department or self-insurer and instruct and assist the injured worker in completing his/her portion of the report of the injury or illness. In filing a claim, the following information is necessary so there is no delay in adjudication of the claim or payment of compensation.

- (a) Complete history of the work related accident or exposure.
 - (b) Complete listing of positive physical findings.
- (c) Specific diagnosis with ((ICD-9-CM, or most current version as updated,)) the current federally adopted ICD-CM code(s) and narrative definition relating to the injury.
 - (d) Type of treatment rendered.
- (e) Known medical, emotional or social conditions which may influence recovery or cause complications.
 - (f) Estimate time-loss due to the injury or illness.
- (4) Initial office and emergency room visit services may be performed by a network or nonnetwork provider. Services that are bundled with those performed during the initial visit (as defined in WAC 296-20-01002), with no additional payment being due, are part of the initial visit.
- (5) When the worker needs treatment beyond the initial office or emergency room visit, the network provider continues with necessary treatment in accordance with medical aid

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rules. If the provider is not enrolled in the provider network and the injured worker requires additional treatment, the provider will either:

- (a) Apply for the provider network (if eligible) at the time he/she files the worker's report of accident; or
- (b) Refer the injured worker to a network provider of the worker's choice.
- (6) If the provider is *not* the original attending provider, he/she should question the injured worker to determine whether a report of accident has been filed for the injury or condition. If no report of accident has been filed, it should be completed immediately and forwarded to the department or self-insurer, as the case may be, with information as to the name and address of original provider if known, so that he/she may be contacted for information if necessary. A worker must complete a request for transfer as outlined in WAC 296-20-065 if a report of accident has previously been filed and the provider is not enrolled in the provider network or the worker and provider agree that a change in attending provider is desirable.

AMENDATORY SECTION (Amending WSR 12-12-059, filed 6/5/12, effective 7/6/12)

WAC 296-20-03001 Treatment requiring authorization. Certain treatment procedures require authorization by the department or self-insurer. Requests for authorization must include a statement of: The condition(s) diagnosed; ((ICD-9-CM)) the current federally adopted ICD-CM codes; their relationship, if any, to the industrial injury/exposure; an outline of the proposed treatment program, its length and components, procedure codes, and expected prognosis; and an estimate of when treatment would be concluded and condition stable.

- (1) Office calls in excess of the first twenty visits or sixty days whichever occurs first.
- (2) The department may designate those inpatient hospital admissions that require prior authorization.
 - (3) X ray and radium therapy.
- (4) Diagnostic studies other than routine X-ray and blood or urinalysis laboratory studies.
 - (5) Myelogram in nonemergent cases.
- (6) Physical therapy treatment beyond initial twelve treatments as outlined in chapters 296-21, 296-23, and 296-23A WAC.
- (7) Diagnostic or therapeutic injections that include, but are not limited to:
- (a) Therapeutic subarachnoid, epidural, or caudal injections for chronic pain;
 - (b) Diagnostic facet injections;
 - (c) Sacroiliac joint injections for chronic pain;
- (d) Intra-muscular and trigger point injections of steroids and other nonscheduled medications are limited to three injections per patient. The attending doctor must submit justification for an additional three injections if indicated with a maximum of six injections to be authorized for any one patient.

Refer to fee schedule payment policies and coverage decisions for authorization criteria.

- (8) Home nursing, attendant services or convalescent center care must be authorized per provisions outlined in WAC 296-20-091 or 296-23-246.
- (9) Provision of prosthetics, orthotics, surgical appliances, special equipment for home or transportation vehicle; custom made shoes for ankle/foot injuries resulting in permanent deformity or malfunction of a foot; masking devices; hearing aids; etc., must be authorized in advance as per WAC 296-20-1101 and 296-20-1102.
- (10) Biofeedback program; structured intensive multidisciplinary pain programs (SIMPs); pain clinic; weight loss program; psychotherapy; rehabilitation programs; and other programs designed to treat special problems must be authorized in advance. Refer to the department's medical aid rules and fee schedules for details.
- (11) Prescription or injection of vitamins for specific therapeutic treatment of the industrial condition(s) when the attending doctor can demonstrate that published clinical studies indicate vitamin therapy is the treatment of choice for the condition. Authorization for this treatment will require presentation of facts to and review by department medical consultant.
- (12) The long term prescription of medication under the specific conditions and circumstances in (a) and (b) of this subsection are considered corrective therapy rather than palliative treatment and approval in advance must be obtained.
- (a) Nonsteroidal anti-inflammatory agents for the treatment of degenerative joint conditions aggravated by occupational injury.
- (b) Anticonvulsive agents for the treatment of seizure disorders caused by trauma.
- (13) The department may designate those diagnostic and surgical procedures which can be performed in other than a hospital inpatient setting. Where a worker has a medical condition which necessitates a hospital admission, prior approval of the department or self-insurer must be obtained.

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AMENDATORY SECTION (Amending WSR 13-12-024, filed 5/28/13, effective 7/1/13)

WAC 296-20-06101 What reports are health care providers required to submit to the insurer? The department or self-insurer requires different kinds of information at various stages of a claim in order to approve treatment, time loss compensation, and treatment bills. The information provided in these reports is needed to adequately manage industrial insurance claims.

Report	Due/Needed by Insurer	What Information Should Be Included In the Report?	Special Notes
Report of Industrial Injury or Occupational Disease (form)	Immediately - Within five days of first visit.	See form	Only MD, DO, DC, ND, DPM, DDS, ARNP, PA, and OD may sign and be paid for completion of this form.
Self-Insurance: Provider's Initial Report (form)		If additional space is needed, please attach the information to the application. The claim number should be at the top of the page.	
Sixty Day (narrative) Purpose: Support and document the need for continued care when conservative (nonsurgical) treatment is to continue beyond sixty days	Every sixty days when only conservative (nonsurgical) care has been provided.	(1) The conditions diagnosed, including ((ICD-9-CM)) the current federally adopted ICD-CM codes and the subjective complaints and objective findings.	Providers may submit legible comprehensive chart notes in lieu of sixty day reports PRO-VIDED the chart notes include all the information required as noted in the "What Information Should Be Included?" column.
		(2) The relationship of diagnoses , if any, to the industrial injury or exposure.	However, office notes are not acceptable in lieu of requested narrative reports and providers may not bill for the report if chart notes are submitted in place of the report.
		(3) Outline of proposed treatment program, its length, components and expected prognosis including an estimate of when treatment should be concluded and condition(s) stable. An estimated return to work date and the probability, if any, of permanent partial disability resulting from the industrial condition.	
		(4) Current medications, including dosage and amount prescribed. With repeated prescriptions, include the plan and need for continuing medication.	Providers must include their name, address and date on all chart notes submitted.

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Report	Due/Needed by Insurer	What Information Should Be Included In the Report?	Special Notes
		(5) If the worker has not returned to work, indicate whether a vocational assessment will be necessary to evaluate the worker's ability to return to work and why.	
		(6) If the worker has not returned to work, a doctor's estimate of physical capacities should be included.	
		(7) Response to any specific questions asked by the insurer or vocational counselor.	
Opioid Authorization Requirement	Opioids in subacute phase - Six weeks from the date of injury or surgery. Opioids in chronic phase - Twelve weeks from the date of injury or surgery.	Please see WAC 296-20-03056 through 296-20-03059 for documentation requirements for those workers receiving opioids.	
	Opioids for ongoing chronic therapy - Every ninety days.		
Special Reports/Follow-up Reports (narrative)	As soon as possible following request by the department/insurer.	Response to any specific questions asked by the insurer or vocational counselor.	"Special reports" are payable only when requested by the insurer.
Consultation Examination Reports (narrative)	At one hundred twenty days if only conservative (nonsurgical) care has been provided.	(1) Detailed history.	If the injured/ill worker had been seen by the consulting doctor within the past three years for the same condition, the consultation will be considered a follow-up office visit, not consultation.
Purpose: Obtain an objective evaluation of the need for ongoing conservative medical management of the worker.		(2) Comparative history between the history provided by the attending or treating provider and injured worker.	
		(3) Detailed physical examination.	
The attending or treating provider may choose the consultant.		(4) Condition(s) diagnosed including ((ICD-9-CM)) the current federally adopted ICD-CM codes, subjective complaints and objective findings.	A copy of the consultation report must be submitted to both the attending or treating provider and the department/insurer.

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Report	Due/Needed by Insurer	What Information Should Be Included In the Report?	Special Notes
		(5) Outline of proposed treatment program: Its	
		length, components, expected prognosis including when	
		treatment should be con-	
		cluded and condition(s) stable.	
		(6) Expected degree of	
		recovery from the industrial condition.	
		(7) Probability of returning to regular work or modified work and an estimated return to work date.	
		(8) Probability , if any, of permanent partial disability resulting from the industrial condition.	
		(9) A doctor's estimate of physical capacities should be included if the worker has not returned to work.	
		(10) Reports of necessary, reasonable X ray and laboratory studies to establish or confirm diagnosis when indicated.	
Attending Provider Review of IME Report (form) Purpose: Obtain the attending provider's opinion about the accuracy of the diagnoses and information provided based on the IME.	As soon as possible following request by the department/insurer.	Agreement or disagreement with IME findings. If you disagree, provide objective/subjective findings to support your opinion.	Payable only to the attending provider upon request of the department/insurer. PAs can concur with treatment recommendations but not PPD ratings.
Loss of Earning Power (form)	As soon as possible after receipt of the form.	See form	Payable only to the attending or treating provider.
Purpose: Certify the loss of earning power is due to the industrial injury/occupational disease.	receipt of the form.		or availing provider.
Application to Reopen Claim Due to Worsening of Condition (form)	Immediately following identification of worsening after a claim has been closed for sixty days.	See form	Only MD, DO, DC, ND, DPM, DDS, ARNP, PA, and OD may sign and be paid for completion of this form.
Purpose: Document worsening of the accepted condition and need to reopen claim for additional treatment.	Crime Victims: Following identification of worsening after a claim has been closed for ninety days.		

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What documentation is required for initial and follow up visits?

Legible copies of office or progress notes are required for the initial and all follow-up visits.

What documentation are ancillary providers required to submit to the insurer?

Ancillary providers are required to submit the following documentation to the department or self-insurer:

Provider	Chart Notes	Reports
Audiology	X	X
Biofeedback	X	X
Dietician		X
Drug & Alcohol Treatment	X	X
Free Standing Surgery	X	X
Free Standing Emergency Room	X	X
Head Injury Program	X	X
Home Health Care		X
Infusion Treatment, Professional Services		X
Hospitals	X	X
Laboratories		X
Licensed Massage Therapy	X	X
Medical Transportation		X
Nurse Case Managers		X
Nursing Home	X	X
Occupational Therapist	X	X
Optometrist	X	X
Pain Clinics	X	X
Panel Examinations		X
Physical Therapist	X	X
Prosthetist/Orthotist	X	X
Radiology		X
Skilled Nursing Facility	X	X
Speech Therapist	X	X

AMENDATORY SECTION (Amending WSR 07-08-088, filed 4/3/07, effective 5/23/07)

WAC 296-20-125 Billing procedures. All services rendered must be in accordance with the medical aid rules, fee schedules, and department policy. The department or self-insurer may reject bills for services rendered in violation of these rules. Workers may not be billed for services rendered in violation of these rules.

(1) Bills must be itemized on department or self-insurer forms or other forms which have been approved by the department or self-insurer. Bills may also be transmitted elec-

tronically using department file format specifications. Providers using any of the electronic transfer options must follow department instructions for electronic billing. Physicians, osteopaths, advanced registered nurse practitioners, chiropractors, naturopaths, podiatrists, psychologists, and registered physical therapists use the current national standard Health Insurance Claim Form (as defined by the National Uniform Claim Committee) with the bar code placed 2/10 of an inch from the top and 1 1/2 inches from the left side of the form. Hospitals use the current National Uniform Billing Form (as defined by the National Uniform Billing Committee) for institution services and the current national standard Health Insurance Claim Form (as defined by the National Uniform Claim Committee) with the bar code placed 2/10 of an inch from the top and 1 1/2 inches from the left side of the form for professional services. Hospitals should refer to chapter 296-23A WAC for billing rules pertaining to institution, or facilities, charges. Pharmacies use the department's statement for pharmacy services. Dentists, equipment suppliers, transportation services, vocational services, and massage therapists use the department's statement for miscellaneous services. When billing the department for home health services, providers should use the "statement for home nursing services." Providers may obtain billing forms from the department's local service locations.

- (2) Bills must specify the date and type of service, the appropriate procedure code, the condition treated, and the charges for each service.
- (3) Bills submitted to the department must be completed to include the following:
 - (a) Worker's name and address;
 - (b) Worker's claim number;
 - (c) Date of injury;
- (d) Referring doctor's name and L & I provider account number;
- (e) Area of body treated, including ((ICD-9-CM)) the current federally adopted ICD-CM code(s), identification of right or left, as appropriate;
 - (f) Dates of service;
 - (g) Place of service;
 - (h) Type of service;
- (i) Appropriate procedure code, hospital revenue code, or national drug code;
 - (i) Description of service;
 - (k) Charge;
 - (1) Units of service;
 - (m) Tooth number(s);
 - (n) Total bill charge:
- (o) The name and address of the practitioner rendering the services and the provider account number assigned by the department;
 - (p) Date of billing;
- (q) Submission of supporting documentation required under subsection (6) of this section.
- (4) Responsibility for the completeness and accuracy of the description of services and charges billed rests with the practitioner rendering the service, regardless of who actually completes the bill form;

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- (5) Vendors are urged to bill on a monthly basis. Bills must be received within one year of the date of service to be considered for payment.
- (6) The following supporting documentation is required when billing for services:
 - (a) Laboratory and pathology reports;
 - (b) X-ray findings;
 - (c) Operative reports;
 - (d) Office notes;
 - (e) Consultation reports;
 - (f) Special diagnostic study reports;
- (g) For BR procedures See chapter 296-20 WAC for requirements; and
 - (h) Special or closing exam reports.
- (7) The claim number must be placed on each bill and on each page of reports and other correspondence in the upper right-hand corner.
 - (8) The following considerations apply to rebills.
- (a) If you do not receive payment or notification from the department within one hundred twenty days, services may be rebilled.
- (b) Rebills must be submitted for services denied if a claim is closed or rejected and subsequently reopened or allowed. In these instances, the rebills must be received within one year of the date the final order is issued which subsequently reopens or allows the claim.
- (c) Rebills should be identical to the original bill: Same charges, codes, and billing date.
- (d) In cases where vendors rebill, please indicate "REBILL" on the bill.
- (9) The department or self-insurer will adjust payment of charges when appropriate. The department or self-insurer must provide the health care provider or supplier with a written explanation as to why a billing or line item of a bill was adjusted at the time the adjustment is made. A written explanation is not required if the adjustment was made solely to conform with the maximum allowable fees as set by the department. Any inquiries regarding adjustment of charges must be received in the required format within ninety days from the date of payment to be considered. Refer to the medical aid rules for additional information.

WSR 15-17-130 PERMANENT RULES DEPARTMENT OF EARLY LEARNING

[Filed August 19, 2015, 10:54 a.m., effective September 19, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: To update health and safety standards relating to safe sleep practices for infants napping or sleeping in licensed child care settings.

Citation of Existing Rules Affected by this Order: Amending WAC 170-296A-1800, 170-296A-1975, 170-296A-2075, 170-296A-2375, 170-296A-2425, 170-296A-7075, and 170-296A-7100.

Statutory Authority for Adoption: RCW 43.215.060 and 43.215.070, chapter 43.215 RCW.

Adopted under notice filed as WSR 15-14-104 on June 30, 2015.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 7, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 18, 2015.

Elizabeth M. Hyde Director

AMENDATORY SECTION (Amending WSR 11-23-068, filed 11/14/11, effective 3/31/12)

- WAC 170-296A-1800 Ongoing training. (1) The licensee and each primary staff person must complete ten hours of department approved ongoing training each year. The training may include:
 - (a) Licensee's or primary staff person's choice; and
- (b) Department directed training to include infant safe sleep training when licensee is licensed to care for infants.
- (2) The licensee must complete the ongoing training requirement each year prior to continuing a nonexpiring full license.
- (3) A primary staff person must complete the ongoing training requirement each year beginning from the date of initial employment.
- (4) A licensee who exceeds the ten-hour ongoing training requirement in any year may carry over up to five hours of ongoing training toward meeting the next year's requirement. This does not include the required infant safe sleep training.

<u>AMENDATORY SECTION</u> (Amending WSR 15-01-045, filed 12/9/14, effective 1/9/15)

WAC 170-296A-1975 Licensee/staff qualifications and requirements table. The following table summarizes the licensee and staff qualifications and requirements found in WAC 170-296A-1700 through 170-296A-1950, and 170-296A-7675. An "X" indicates a requirement.

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Licensee and Staff Qualifications Table

Position	Minimum age	High school diploma or equivalent	Back- ground check	TB test	DEL ori- entation	Basic STARS	Ongoing training 10-hours per year To include infant safe sleep if applicable	1	First aid/ CPR		Food handler permit
Licensee	18	X	X	X	X	X	X	X	X	X	X
Primary staff person	18		X	X		X	X	X	X	X	See WAC 170-296A-7675(3) regarding when other staff must have a food handler permit
Assistant/ volunteer	14		X Noncriminal background check only age 14-15	X				X	X	X	See WAC 170-296A-7675(3) regarding when other staff must have a food handler permit

AMENDATORY SECTION (Amending WSR 15-01-045, filed 12/9/14, effective 1/9/15)

WAC 170-296A-2075 Licensee and staff records. Records on file for the licensee and each staff person must include documentation of:

- (1) Current first aid and infant, child and adult CPR training certification;
 - (2) HIV/AIDS training certification;
- (3) TB test results or documentation as required under WAC 170-296A-1750;
- (4) Current state food handler permit for the licensee, and for other staff if required under WAC 170-296A-7675(3);
- (5) Completed background check form, or noncriminal background check form if applicable under WAC 170-296A-1225, and copy of the department-issued authorization;
- (6) Copy of a current government issued picture identification;
 - (7) Emergency contact information;
- (8) Completed application form or resume for staff when hired:
- (9) Documentation for the licensee's and primary staff person only of:
 - (a) Basic STARS training;
- (b) Ongoing training completed that includes department approved infant safe sleep if applicable; and
 - (c) Registration in MERIT.
- (10) Record of training provided by the licensee to staff and volunteers <u>that includes infant safe sleep if applicable</u>; and
 - (11) Resume for the licensee only.

AMENDATORY SECTION (Amending WSR 11-23-068, filed 11/14/11, effective 3/31/12)

WAC 170-296A-2375 Parent/guardian policies (handbook). The licensee's written parent/guardian policies (handbook) must include:

(1) Hours of operation including closures and vacations;

- (2) Information on how children's records are kept current, including immunization records;
 - (3) Enrollment and disenrollment process;
- (4) Parent/guardian access to their child during child care hours;
- (5) Program philosophy (the licensee's view of child learning and development);
- (6) Typical daily schedule, including food and rest periods. See WAC 170-296A-6550;
- (7) Communication plan with parents/guardians including:
- (a) How the parent or guardian may contact the licensee with questions or concerns; and
- (b) How the licensee will communicate the child's progress with the parent or guardian at least twice a year;
- (c) How the licensee will support parents regarding parenting;
- (8) Written plan for any child's specific needs if applicable. See WAC 170-296A-0050;
 - (9) Fees and payment plans;
- (10) Religious activities and how the parent's or guardian's specific religious preferences are addressed;
 - (11) How holidays are recognized in the program;
- (12) Confidentiality policy including when information may be shared. See WAC 170-296A-2025;
- (13) Items that the licensee requires the parent or guardian to provide;
- (14) Guidance and discipline policy. See WAC 170-296A-6050;
- (15) If applicable, infant/toddler care including ((SIDS prevention)) infant safe sleep practices, feeding, diapering and toilet training;
- (16) Reporting suspected child abuse or neglect. See WAC 170-296A-6275;
- (17) Food service practices. See WAC 170-296A-7125 through 170-296A-7200, and 170-296A-7500 through 170-296A-7650;
- (18) Off-site field trips requirements. See WAC 170-296A-2450;

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- (19) Transportation requirements. See WAC 170-296A-6475:
- (20) Staffing plan. See WAC 170-296A-5600 and 170-296A-5775;
- (21) Access to licensee's and staff training and professional development records;
 - (22) Pet policies. See WAC 170-296A-4800;
- (23) Health care and emergency preparedness policies including:
- (a) Emergency preparedness and evacuation plans. See WAC 170-296A-2825;
- (b) Injury or medical emergency response and reporting. See WAC 170-296A-3575, 170-296A-3600, and 170-296A-2275:
- (c) Medication management including storage and giving medications. See WAC 170-296A-3325;
- (d) Exclusion/removal policy of ill persons. See WAC 170-296A-3210;
 - (e) Reporting of notifiable conditions to public health;
- (f) Immunization tracking. See WAC 170-296A-3250;and
 - (g) Infection control methods, including:
- (i) Handwashing (WAC 170-296A-3625) and, if applicable, hand sanitizers (WAC 170-296A-3650); and
- (ii) Cleaning and sanitizing, or cleaning and disinfecting procedures including the methods and products used. See WAC 170-296A-3850 through 170-296A-3925 and definitions in WAC 170-296A-0010;
 - (24) Napping/sleeping;
- (25) No smoking policy consistent with WAC 170-296A-4050;
- (26) Drug and alcohol policy consistent with WAC 170-296A-4025;
- (27) If applicable, guns and weapons storage. See WAC 170-296A-4725; and
- (28) If applicable, overnight care requirements. See WAC 170-296A-6850.

AMENDATORY SECTION (Amending WSR 11-23-068, filed 11/14/11, effective 3/31/12)

- WAC 170-296A-2425 Staff policies. If the licensee hires staff or uses volunteers, the licensee must have written staff policies and provide training on the policies to all staff and volunteers. Staff policies must include:
- (1) All the information in the parent/guardian handbook under WAC 170-296A-2375, except fees;
 - (2) Plan for keeping staff records current including:
- (a) Completed background check forms and department clearances;
 - (b) First aid and CPR certification;
 - (c) TB test results;
- (d) Required training and professional development for primary staff persons; and
- (e) Training that the licensee must provide to staff that includes infant safe sleep if applicable:
 - (3) Job description;
 - (4) Staff responsibilities for:
 - (a) Child supervision requirements;
 - (b) Guidance/discipline techniques;

- (c) Food service practices;
- (d) Off-site field trips;
- (e) Transporting children;
- (f) Preventing children's access to unlicensed space;
- (g) Health, safety and sanitization procedures;
- (h) Medical emergencies, fire, disaster and evacuations;
- (i) Mandatory reporting of suspected child abuse and neglect;
 - (j) Overnight care, if applicable; and
- (k) Staff responsibilities if the licensee is absent from the child care operation.
- (5) The licensee must keep documentation of all staff training on policies.

AMENDATORY SECTION (Amending WSR 12-21-050, filed 10/12/12, effective 11/12/12)

WAC 170-296A-7075 Infant and toddler sleeping or napping equipment. (1) The licensee must:

- (a) Provide and use a single level crib, toddler bed, playpen or other sleeping equipment for each infant or toddler in care that is safe and not subject to tipping. The equipment must be of a design approved for infants or toddlers by the U.S. Consumer Product Safety Commission (see WAC 170-296A-7085 regarding approved cribs);
- (b) Provide sleeping or napping equipment with clean, firm, and snug-fitting ((mattresses that do)) mattress designed specifically for the particular equipment and that does not have tears or holes or is repaired with tape;
- (c) Provide mattresses covered with waterproof material that is easily cleaned and sanitized as provided in WAC 170-296A-0010;
- (d) Provide the appropriate fitted sheet for the sleeping equipment;
- (e) Arrange sleeping equipment to allow staff access to children:
- $((\frac{(e)}{e}))$ (f) Remove sleeping children from car seats, swings or similar equipment; and
- $((\frac{f}{f}))$ (g) Consult with a child's parent or guardian before the child is transitioned from infant sleeping equipment to other approved sleeping equipment.
- (2) Children able to climb out of their sleeping equipment must be transitioned to an alternate sleeping surface.

AMENDATORY SECTION (Amending WSR 11-23-068, filed 11/14/11, effective 3/31/12)

WAC 170-296A-7100 Infant ((eare—Procedures to reduce the risk of sudden infant death syndrome (SIDS))) safe sleep practices. ((To reduce the risk of sudden infant death syndrome (SIDS), the licensee or staff must:))

- (1) <u>Infant safe sleep practices must be followed when infants are napping or sleeping. The licensee or staff must:</u>
- (a) Place an infant to sleep on his or her back. If the infant has turned over while sleeping, the infant does not need to be returned to his or her back;
- (((2))) (b) Place an infant in sleeping equipment ((that has a clean, firm, and snug-fitting mattress and a tight-fitting sheet:
- (3))) consistent with WAC 170-296A-7075 and 170-296A-7085;

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- (c) Not allow ((soft fluffy bedding)) blankets, stuffed toys, pillows, crib bumpers and similar items in the infant sleeping equipment, or allow a blanket to cover or drape over the sleeping equipment;
- (((4))) (d) Not cover an infant's head and face during sleep;
- (((5))) (e) Take steps so infants do not get too warm during sleep((. If a blanket is used, it must be lightweight and be placed no higher than the infant's ehest)) with the infant's arms free; and
- $((\frac{(6)}{)})$ (f) Not place the infant in another sleeping position other than on their backs, or use a sleep positioning device unless required by a written directive or medical order from the infant's health care provider. This directive or medical order must be in the infant's file.
 - (2) The licensee must:
- (a) Complete annual infant safe sleep training as required in WAC 170-296A-1800; and
- (b) Provide and document annual infant safe sleep training for all staff and volunteers as required in WAC 170-296A-2075.
- (3) When the department finds the licensee in violation of infant safe sleep practices, the licensee must:
- (a) Post the notice of violation in the licensed space as required by RCW 43.215.525 (1)(c); and
- (b) Within five working days of receiving notice of the violation, provide the parents and guardians of enrolled children with:
 - (i) A letter describing the safe sleep violation; and
- (ii) Written information on safe sleep practices for infants.

WSR 15-17-131 PERMANENT RULES DEPARTMENT OF EARLY LEARNING

[Filed August 19, 2015, 10:54 a.m., effective September 19, 2015]

Effective Date of Rule: Thirty-one days after filing.

Purpose: To update health and safety standards relating to safe sleep practices for infants napping or sleeping in licensed child care settings.

Citation of Existing Rules Affected by this Order: Amending WAC 170-295-1070, 170-295-1080, 170-295-1090, 170-295-3010, 170-295-4100, 170-295-4110, and 170-295-7050.

Statutory Authority for Adoption: RCW 43.215.060 and 43.215.070, chapter 43.215 RCW.

Adopted under notice filed as WSR 15-14-105 on June 30, 2015.

Changes Other than Editing from Proposed to Adopted Version: Subsection (5)(b) was removed from WAC 170-295-4100 to end the rule conflict with WAC 170-295-4110 (1)(c). This was an oversight during the drafting and editing stage.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or

Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 7, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: August 18, 2015.

Elizabeth M. Hyde Director

<u>AMENDATORY SECTION</u> (Amending WSR 13-15-155, filed 7/23/13, effective 8/23/13)

WAC 170-295-1070 What continuing state training and registry system (STARS) training is required for child care center staff? (1) The director, program supervisor and lead teachers must complete ten clock hours or one college credit of continuing education yearly after completing the initial training required in WAC 170-295-1010.

- (2) The director and program supervisor must have five of the ten hours in program management and administration for the first two years in their respective positions. Each additional year, three of the ten hours required must be in program management and administration.
- (3) The continuing education must include department approved annual infant safe sleep training when licensed to care for infants.
- (4) The continuing education must be delivered by a state-approved trainer, or consist of training that has been department-approved through MERIT.

<u>AMENDATORY SECTION</u> (Amending WSR 13-21-109, filed 10/22/13, effective 11/22/13)

WAC 170-295-1080 What topics must my new staff orientation include? You must have an orientation system in place to train each new employee and volunteer about program policies, practices, philosophies and goals. This training must include, but is not limited to, the program policies and practices listed in this chapter such as:

- (1) Minimum licensing requirements;
- (2) Planned daily activities and routines;
- (3) Child guidance and behavior management methods;
- (4) Child abuse and neglect prevention, detection, and reporting policies and procedures;
 - (5) Health policies and procedures;
 - (6) Contagious disease recognition and prevention;
 - (7) Bloodborne pathogens;
 - (8) Fire prevention, disaster plan and safety procedures;
- (9) Special health and developmental needs of the individual child;
- (10) <u>Infant safe sleep practices when licensed to care for infants</u>;

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- (11) Personnel policies, when applicable;
- (((11))) <u>(12)</u> Limited restraint techniques;
- (((12))) (13) Cultural relevancy; and
- (((13))) (14) Age and developmentally appropriate practices and expectations for the age group the staff will work with.

AMENDATORY SECTION (Amending WSR 06-15-075, filed 7/13/06, effective 7/13/06)

- WAC 170-295-1090 What kind of meetings or ongoing training must I provide my staff? (1) You must provide or arrange for staff meetings and training opportunities for the child care staff at least quarterly; and
- (2) At a minimum, your staff and volunteers must have ongoing training when there are changes:
 - (a) In your policies and procedures;
 - (b) In the equipment that you use;
 - (c) In the types of services you provide; or
 - (d) To health care plans for specific children.
- (3) Annual infant safe sleep training approved by the department must be provided when licensed to care for infants.

AMENDATORY SECTION (Amending WSR 13-21-109, filed 10/22/13, effective 11/22/13)

- WAC 170-295-3010 What kind of health policies and procedures must I have? (1) You must have written health policies and procedures that are:
 - (a) Written in a clear and easily understood manner;
 - (b) Shared with all new staff during orientation;
 - (c) Posted for staff and families to review; and
- (d) Reviewed, signed and dated by a physician, a physician's assistant or registered nurse when you change your policies and procedures or type of care that you provide, or at least every three years when you are due for relicensing. (For example, if you go from caring for children from twelve months and older to caring for infants, you must update your health policies and procedures and have them reviewed and signed.)
- (2) Your health policies and procedures must have information on how you plan to:
- (a) Provide general cleaning of areas including but not limited to bathrooms, floors, walls, and doorknobs;
- (b) Clean and sanitize areas including, but not limited to, food contact surfaces, kitchen equipment, diapering areas, toys, toileting equipment and areas, equipment that might be shared with several children such as sleep mats, cribs or high chairs:
 - (c) Prevent, manage and report contagious diseases;
- (d) Handle minor injuries such as nosebleeds, scrapes and bruises;
 - (e) Provide first aid;
 - (f) Screen children daily for illnesses;
- (g) Notify parents that children have been exposed to infectious diseases and parasites;
 - (h) Handle minor illnesses;
- (i) Handle major injuries and medical emergencies that require emergency medical treatment or hospitalization;
 - (j) Manage medication;

- (k) Assist with handwashing and general hygiene including diapering and toileting;
 - (1) Handle food;
 - (m) Provide nutritious meals and snacks;
 - (n) Respond during any disasters;
 - (o) Care for children that may have special needs;
- (p) Care for infants and obtain infant nurse consultation (if licensed for four or more infants); and
- (q) ((Place infants to sleep on their backs to reduce the risk of sudden infant death syndrome (SIDS).)) Follow the infant safe sleep practices in WAC 170-295-4110.
- (3) Your health policies and procedures must have information on when you plan to:
 - (a) Require ill children to stay home and for how long;
 - (b) Allow the ill child to return; and
- (c) Call a parent to pick up their child and how you will care for the child until the parent arrives.

AMENDATORY SECTION (Amending WSR 12-22-023, filed 10/30/12, effective 11/30/12)

WAC 170-295-4100 What sleep equipment do I need for infants? (1) You must not put infants to sleep in infant $((\frac{cr}{r}))$ swings, car seats, or similar equipment.

- (2) You must provide each infant with a single-level crib (stacking cribs must not be used), infant bed, bassinet or playpen for napping until you and the parent agree that the child can safely use a mat, cot or other approved sleeping equipment.
- (3) ((Effective December 28, 2012, each crib in use in licensed child care must meet U.S. Consumer Product Safety Commission (CPSC) requirements for full size cribs as defined in 16 Code of Federal Regulations (C.F.R.) 1219, or nonfull size cribs as defined in 16 C.F.R. 1220.
- (a) A crib meets the requirements of this subsection if the erib is labeled by the manufacturer as made on or after June 28, 2011.
- (b) A crib labeled as made from July 1, 2010, through June 27, 2011, may meet the requirements of this subsection if the licensee has obtained a certificate of compliance from the crib manufacturer or importer, or the licensee has other documentation from the manufacturer that the crib is certified as meeting the CPSC regulations.
- (c) Any crib that does not meet the requirements of subsection (a) or (b) of this subsection must be removed from the child care facility not later than December 28, 2012.
- (d) The licensee must keep in the licensed space a log documenting that each crib in use meets the requirements of this section.
- (4))) You must provide a crib, infant bed, playpen or bassinet mattress that is:
- (a) Snug fitting and touches each side of the crib to prevent the infant from becoming entrapped between the mattress and crib side rails;
 - (b) Waterproof; and
 - (c) Easily cleaned and sanitized, without tears or tape.
- $((\frac{5}{)}))$ (4) To allow walking room between cribs and reduce the spread of germs you must:
- (a) Space cribs a minimum of thirty inches apart. You may place cribs end to end if you provide a barrier. If you use

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barriers, staff must be able to observe and have immediate access to each child.

- (b) Provide a moisture resistant and easily cleanable solid barrier on the side or end adjacent to another crib.
 - (((6))) (5) You must provide((÷
- $\frac{a}{a}$)) an appropriate fitting sheet or cover for the sleeping surface((; and
- (b) A clean light weight blanket or suitable cover for the child)).
- (((7))) (<u>6)</u> You must launder bedding at least weekly and more often if it becomes soiled.
- (7) Effective December 28, 2012, each crib in use in licensed child care must meet U.S. Consumer Product Safety Commission (CPSC) requirements for full size cribs as defined in 16 Code of Federal Regulations (C.F.R.) 1219, or nonfull size cribs as defined in 16 C.F.R. 1220.
- (a) A crib meets the requirements of this subsection if the crib is labeled by the manufacturer as made on or after June 28, 2011.
- (b) A crib labeled as made from July 1, 2010 through June 27, 2011, may meet the requirements of this subsection if the licensee has obtained a certificate of compliance from the crib manufacturer or importer, or the licensee has other documentation from the manufacturer that the crib is certified as meeting the CPSC regulations.
- (c) Any crib that does not meet the requirements of (a) or (b) of this subsection must be removed from the child care facility not later than December 28, 2012.
- (d) The licensee must keep in the licensed space a log documenting that each crib in use meets the requirements of this section.

AMENDATORY SECTION (Amending WSR 06-15-075, filed 7/13/06, effective 7/13/06)

WAC 170-295-4110 What ((additional sleeping arrangements must I make to reduce the risk of sudden infant death syndrome (SIDS))) are infant safe sleep practices? (((1) You must put infants to sleep on their backs to reduce the risk of SIDS unless you have a written note in the infant's file from both the parent and the infant's health care provider requesting another sleeping position.

- (2) Once infants are able to turn over, continue to place them on their back to sleep. You do not need to wake the infants to return them to their back while sleeping.)) (1) Infant safe sleep practices must be followed when infants are napping or sleeping. The staff must:
- (a) Place an infant to sleep on his or her back. If the infant has turned over while sleeping, the infant does not need to be returned to his or her back;
- (b) Place an infant in sleeping equipment consistent with WAC 170-295-4100;
- (c) Not allow blankets, stuffed toys, pillows, crib bumpers and similar items in the infant sleeping equipment, or allow a blanket to cover or drape over the sleeping equipment;
 - (d) Not cover an infant's head and face during sleep;
- (e) Take steps so infants do not get too warm during sleep with the infant's arms free; and

- (f) Not place the infant in another sleeping position other than on their back, or use a sleep positioning device unless required by a written directive or medical order from the infant's health care provider. This directive or medical order must be in the infant's file.
 - (2) The staff must:
- (a) Complete annual infant safe sleep training as required in WAC 170-295-1090; and
- (b) Document annual infant safe sleep training for all staff and volunteers as required in WAC 170-295-7050.
- (3) When the department finds the licensee in violation of infant safe sleep practices, the licensee must:
- (a) Post the notice of violation in the licensed space as required by RCW 43.215.525 (1)(c); and
- (b) Within five working days of receiving notice of the violation, provide the parents and guardians of enrolled children with:
 - (i) A letter describing the safe sleep violation; and
- (ii) Written information on safe sleep practices for infants.

AMENDATORY SECTION (Amending WSR 08-10-041, filed 4/30/08, effective 5/31/08)

- WAC 170-295-7050 What personnel records and policies must I have? (1) Each employee and volunteer who has unsupervised access to a child in care must complete the following forms on or before their date of hire:
- (a) An application for employment on a form prescribed by us, or on a comparable form approved by the department; and
 - (b) A background check form.
- (2) You must submit the background check form to us within seven calendar days of the employee's first day of work. The form authorizes a criminal history background inquiry for that person.
- (3) Until the background check results are returned and show the employee to not be disqualified, you must not leave the employee unsupervised with the children.
- (4) We discuss the information on the background check form with you, the director, or other person responsible for the operation of the center, such as a human resources professional, if applicable.
- (5) If you employ five or more people you must have written personnel policies. These policies must describe staff benefits, if any, and duties and qualifications of staff.
- (6) You must maintain a system of record keeping for personnel. In addition to the other requirements in this chapter, you must keep the following information on file on the premises for yourself, each staff person and volunteer:
- (a) An employment application, including work and education history;
- (b) Documentation that a background check form was submitted;
- (c) A copy of the department notification of background clearance authorization;
- (d) Written documentation of trainings and meetings such as but not limited to:
 - (i) Orientation;

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- (ii) ((On-going)) Ongoing trainings to include infant safe sleep training when licensed to care for infants;
- (iii) Bloodborne pathogen training (including HIV/AIDS);
 - (iv) CPR/first aid;
 - (v) Food handler's cards (if applicable);
 - (vi) STARS;
 - (vii) Staff meetings; and
 - (viii) Child abuse and neglect.
- (e) Documentation of the results of tuberculosis (TB) testing by the Mantoux skin test prior to starting work.
- (7) You must keep the following information on file for the owner of the facility:
 - (a) If the center is solely owned by you:
- (i) A photocopy of your Social Security card that is valid for employment or verification of your employer identification number (EIN); and
- (ii) A photocopy of your photo identification issued by a government entity.
- (b) If the center is owned by a corporation, verification of the corporation's EIN.
- (8) Training documentation must include a certificate, card, or form with a copy placed in each individual employees file that contains the:
 - (a) Topic presented;
 - (b) Number of clock hours;
 - (c) Date and names of persons attending; and
- (d) Signature and organization of the person conducting the training.

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