

WSR 26-05-038

EMERGENCY RULES

DEPARTMENT OF

SOCIAL AND HEALTH SERVICES

(Home and Community Living Administration)

[Filed February 11, 2026, 2:55 p.m., effective February 11, 2026, 2:55 p.m.]

Effective Date of Rule: Immediately upon filing.

Purpose: The department of social and health services (DSHS) has developed chapter 388-106H WAC, Health-related social needs (HRSN) program, which implements HRSN program services provided through the Washington state section 1115 medicaid demonstration waiver and ESSB 5187, the 2023-2025 Washington biennial operating budget. This emergency rule making will temporarily add subchapters to chapter 388-106H WAC for rent/temporary housing, community transition services, nutrition supports, caregiver respite services, and environmental accessibility and remediation adaptations to allow DSHS home and community services and developmental disabilities community services to begin administering these crucial services while permanent rules are filed. DSHS is proceeding with permanent rule making. A CR-101 was filed under WSR 25-13-107. DSHS is working collaboratively with the health care authority on HRSN rule making.

Citation of Rules Affected by this Order: New WAC 388-106H-0005, 388-106H-0010, 388-106H-0020, 388-106H-0030, 388-106H-1000, 388-106H-1010, 388-106H-1020, 388-106H-1030, 388-106H-2000, 388-106H-2010, 388-106H-2020, 388-106H-2030, 388-106H-2040, 388-106H-3000, 388-106H-3010, 388-106H-3020, 388-106H-3030, 388-106H-3040, 388-106H-4000, 388-106H-4010, 388-106H-4020, 388-106H-4030, 388-106H-4040, 388-106H-4050, and 388-106H-4060.

Statutory Authority for Adoption: RCW 74.08.090, 74.08.283, and 74.09.520.

Other Authority: Section 211(44), chapter 475, Laws of 2023 (ESSB 5187).

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest; and that state or federal law or federal rule or a federal deadline for state receipt of federal funds requires immediate adoption of a rule.

Reasons for this Finding: Enacting these rules on an emergency basis is both necessary for preserving the health, safety, and general welfare of clients and required for state receipt of federal funds. Washington must establish emergency rules to administer HRSN services in compliance with the Washington Administrative Procedure Act and the 1115 waiver contract requirements specified in 42 C.F.R. 431.420 to continue receiving federal funds.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 25, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the 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 25, Amended 0, Repealed 0.

Date Adopted: February 11, 2026.

Katherine I. Vasquez
Rules Coordinator

SHS-5110.6

Chapter 388-106H WAC HEALTH-RELATED SOCIAL NEEDS (HRSN) PROGRAM

NEW SECTION

WAC 388-106H-0005 What is the purpose of this chapter? (1) This chapter applies to individuals who are eligible to receive HRSN program services administered by DSHS.

(2) Allowable expenditures are covered up to the medicaid agency's financial limit and in accordance with the health care authority's billing guide.

(3) The Washington state HRSN program allows qualifying Washington apple health (medicaid) individuals to receive limited, evidence-based, nonmedical services to address an individual's unmet, adverse social conditions that contribute to poor health. HRSN program services include:

(a) Rent/temporary housing (WAC 388-106H-1000 through 388-106H-1030);

(b) Nutrition supports (WAC 388-106H-2000 through 388-106H-2040;

(c) Caregiver respite services (WAC 388-106H-3000 through 388-106H-3040; and

(d) Home accessibility, remediation, and adaptation devices (WAC 388-106H-4000 through 388-106H-4060).

(4) Additional rules for HRSN program services administered by the health care authority can be found under chapter 182-565 WAC.

Reviser's note: The typographical errors in the above section occurred in the copy filed by the agency and appear in the Register pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 388-106H-0010 What are the limits to the scope of the HRSN program services? The limits to the scope of HRSN program services are outlined in WAC 182-565-0160, apply to all subsections of this chapter, and are subject to available funds.

NEW SECTION

WAC 388-106H-0020 What definitions apply to this chapter? "**Accessibility modifications**" means the elimination of known home-based health and safety risks to ensure the individuals' health and safety in the living environment.

"**Activities of daily living**" has the same meaning as defined in 24 C.F.R. § 700.105 and WAC 388-106-0010.

"**Adaptation devices**" means the provision, service delivery, and installation of a home device for an individual as a component of treatment or prevention for specific medical indication. Adaptation devices are inclusive of an air conditioner, air filtration device, air filter replacement, portable power supply, heater, and mini refrigerator.

"**Adverse benefit determination**" means one or more of the following:

(a) The denial or limited authorization of a requested health-related social needs service, including determinations based on the type of service, requirements for medical necessity, appropriateness, setting, or effectiveness of a service;

(b) The reduction, suspension, or termination of a previously authorized service;

(c) The denial, in whole or in part, of payment for a service;

(d) The failure to provide services in a timely manner, as defined by the state; or

(e) The failure of the third-party administrator (TPA) to act within the time frames provided in WAC 388-106-1305 for standard resolution of grievances and appeals.

"**At risk of homelessness**" has the same meaning as defined in 24 C.F.R. § 91.5.

"**Behavioral health need**" means:

(a) A mental health need, where there is a need for improvement, stabilization, or prevention of deterioration of functioning (including ability to live independently without support) resulting from the presence of a mental illness; or

(b) A substance use need, where an assessment using the American society of addiction medicine (ASAM) criteria indicates that the person meets at least ASAM level 1.0, indicating the need for outpatient substance use disorder treatment.

"**Chronic condition**" means any medical or behavioral health condition that persists over time, does not quickly resolve itself, or requires continued management. Chronic conditions include, but are not limited to, diabetes, cardiovascular disorders, chronic infectious diseases such as human immunodeficiency virus (HIV), cancer, chronic gastrointestinal disorders, respiratory conditions such as cystic fibrosis, eating disorders, and chronic behavioral health conditions.

"**Community health worker**" or "**CHW**" has the same meaning as defined in WAC 182-562-0100.

"**Complex physical health need**" means a long continuing or indefinite physical condition requiring improvement, stabilization, or prevention of deterioration of functioning (including the ability to live independently without support).

"**DSHS**" means the Washington state department of social and health services.

"**Food security**" refers to both low food security and very low food security.

(a) **"Low food security"** means reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake.

(b) **"Very low food security"** means reports of multiple indications of disrupted eating patterns and reduced food intake.

"Foundational community supports" or **"FCS"** is described under WAC 182-559-100.

"Fruits and vegetable provisions" means an individual may purchase fruits and vegetables from participating food retailers and farms. Fruits and vegetables available for purchase through this service may be fresh, frozen, or canned. Individuals may pick up food from food retailers or have food delivered to where the individual resides if delivery service is available.

"Health-related social needs" or **"HRSN"** means an individual's unmet, adverse social conditions that contribute to poor health. Under the terms of Washington state's section 1115 medicaid demonstration waiver, CMS approved payment for HRSN services.

"Home and community-based services" or **"HCBS"** has the same meaning as defined in WAC 182-513-1100.

"Homeless" has the same meaning as defined in 24 C.F.R. § 91.5.

"Institution" has the same meaning as defined in WAC 182-500-0050.

"Long-term services and supports" or **"LTSS"** means the services provided by DSHS under chapter WAC 388-106-0015.

"Medicaid agency" means the Washington state health care authority (HCA).

"Medically tailored meals" means meals tailored to support individuals with health-related condition(s) for which nutrition supports would improve health outcomes.

"Nutrition counseling and education" means any combination of educational strategies designed to motivate and facilitate voluntary adoption of food choices and other food and nutrition-related behaviors conducive to health and wellbeing.

"Pantry stocking" means an individual may purchase an assortment of foods aimed at promoting improved nutrition for the individual. Individuals may pick up food from food retailers or have food delivered to the individual's home or private residence if delivery service is available. This service must be consistent with the nutrition care plan.

"Postpartum" means the 12-month period beginning on the last day of the pregnancy.

"Remediation services" means the provision of home remediation services to eliminate known home-based health and safety risks and ensure the individual's health and safety in the living environment.

"Rent" means an eligible individual's monthly housing payment and includes past due and forward rent payments as allowed under the HRSN program.

"Residential facility" has the same meaning as defined in WAC 388-106-0010.

"Short-term grocery provision" means an individual may purchase an assortment of foods aimed at promoting improved nutrition for the individual. Individuals may pick up food from food retailers or have food delivered to the individual's home or private residence if delivery service is available. This service must be consistent with the nutrition care plan.

"Unpaid caregiver" means an unpaid family member, relative, or friend age 18 and over who has responsibility for the care or supervision of an individual who meets eligibility criteria.

"Washington apple health" means the public health insurance programs for eligible Washington residents defined in WAC 182-500-0120. Washington apple health or apple health is the name used in Washington state for medicaid, the children's health insurance program (CHIP), and state-only funded health care programs.

NEW SECTION

WAC 388-106H-0030 Do I have the right to an administrative hearing while receiving HRSN services? (1) Individuals may request an administrative hearing based on the rules outlined in WAC 388-106-1305 to contest eligibility decisions made by DSHS for all HRSN services described in this chapter.

(2) Once the short-term payments have been fulfilled, notwithstanding WAC 388-106-1305 and 388-825-120, a recipient may not appeal a termination of service or denial of an extension of service.

(3) Developmental Disabilities Community Services' individuals should refer to chapter 388-825 WAC for their administrative hearing rights.

SUBCHAPTER I - RENT/TEMPORARY HOUSING

NEW SECTION

WAC 388-106H-1000 Who is eligible to receive services through HRSN rent/temporary housing? To be eligible for HRSN rent/temporary housing services, a person must be:

(1) Found eligible for long-term care services as defined in WAC 388-106-0045;

(2) Determined to be eligible for apple health (medicaid) services with active coverage; and

(3) Determined to have met criteria for at least one of the following:

(a) A behavioral health need;

(b) A need for hands-on assistance with one or more activities of daily living;

(c) A complex physical health need; or

(d) Homeless or at risk of homelessness, with the exception of the annual income requirement in 24 C.F.R. § 91.5 (1)(i).

NEW SECTION

WAC 388-106H-1010 What HRSN rent/temporary services are available? Subject to the limitations in chapter 388-106H WAC, the medicaid agency may pay for rent/temporary housing costs necessary to establish an individual's home. These costs are limited in coverage to:

- (1) Retrospective and prospective HRSN rent/temporary housing payments capped at six months with a global HRSN rent/temporary housing cap of a combined six-months per rolling 12-month period. This provides short-term funding for an individual to rent:
 - (a) Apartments, single room occupancy units, single-family homes, multifamily homes, in mobile home communities, accessory dwelling units, co-housing communities, trailers, recreational vehicles (RVs), manufactured homes; or
 - (b) Manufactured home lots, motel room, or hotel room when it is serving as the individual's primary residence; or
 - (c) Transitional and recovery housing including bridge, site-based, population-specific, and community living programs that may or may not offer supportive services and programming.
- (2) This chapter excludes housing locations as described in WAC 182-565-0250.
- (3) The short-term rent/temporary housing includes payments limited to the payment and time lines for:
 - (a) Storage fees and mover's fees limited to \$3,000;
 - (b) Renter's insurance, if required by the lease;
 - (c) Landlord paid utilities that are part of the rent payment and not duplicative of other health related social needs utility payments;
 - (d) Recurring utilities not duplicative of other health related social needs utility payments; and
 - (e) Nonrefundable, nonrecurring utility set-up costs.

NEW SECTION

WAC 388-106H-1020 Who can provide HRSN rent/temporary housing services? HRSN rent/temporary housing services may be provided by:

- (1) A service provider as described in WAC 388-106-0040.
- (2) Other contracted models may be considered within other contracting structures as negotiated by the medicaid agency, DSHS, or its designee.

NEW SECTION

WAC 388-106H-1030 What is the duration of services? (1) The services described in WAC 388-106H-0030 are short-term and limited to a maximum of six months including both prospective and retrospective payments per payment.

- (2) The medicaid agency, DSHS, or its designee may authorize payment for approved housing/home environment services for as long as it has funding through the HRSN program.

SUBCHAPTER II - NUTRITION SUPPORTS

NEW SECTION

WAC 388-106H-2000 What is the purpose of this subchapter? (1)

The purpose of this subchapter is to identify:

- (a) Benefits included in HRSN nutrition supports (WAC 388-106H-2000);
 - (b) Eligibility criteria (WAC 388-106H-2010 and WAC 388-106H-2020);
 - (c) Service limitations (WAC 388-106H-2020 and WAC 388-106H-2030); and
 - (d) Provider qualifications (WAC 388-106H-2040).
- (2) The HRSN nutrition supports includes the following services:
- (a) Nutrition counseling and education;
 - (b) Medically tailored meals;
 - (c) Pantry stocking;
 - (d) Fruits and vegetable provisions; and
 - (e) Short-term grocery provision.

Reviser's note: The typographical error in the above section occurred in the copy filed by the agency and appears in the Register pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 388-106H-2010 Who is eligible to receive services through HRSN nutritional supports? To be eligible for HRSN nutrition supports an individual must:

- (1) Be enrolled in apple health (medicaid); and
- (2) Meet the social and clinical risk factors in both columns B and C specific to each service type in column A of this section:

Service type (Column A)	Social risk criteria (Column B)	Clinical risk criteria (Column C)
Nutrition counseling and education.	Meets the USDA definition of low or very low food insecurity.	Clients with a chronic condition(s).
Medically tailored meals.	Meets the USDA definition of low or very low food insecurity.	(1) Individuals with a chronic condition(s); and (2) Individuals who have been discharged from institutional care, a hospital, or congregate setting within six months; or are at high risk of hospitalization or nursing facility placement.
Pantry stocking.	Meets the USDA definition of low or very low food insecurity.	Individuals with a chronic condition(s).
Fruit or vegetable provisions.	Meets the USDA definition of low or very low food insecurity.	Individuals with a chronic condition(s).
Short-term grocery provisions.	Meets the USDA definition of low or very low food insecurity.	(1) Individuals enrolled in long-term services and supports; and (2) Individuals who have been discharged from the hospital or skilled nursing facilities; or individuals who are at high risk of hospitalization or nursing facility placement.

NEW SECTION

WAC 388-106H-2020 What are the service limitations for nutrition supports? (1) Eligible individuals may receive ongoing nutrition counseling and education services as needed.

(2) The following nutritional support services are limited as follows:

(a) Medically tailored meals may provide:

(i) Up to three meals a day for six months; and

(ii) If the individual is pregnant, postpartum, or there is an individual under 21 years old in the household, three additional meals per day may be authorized.

(b) Pantry stocking services may be authorized once per six-month time frame and DSHS may renew this service for an additional six months if the agency determines the individual still meets all eligibility requirements.

(c) Fruit and vegetable provisions may be provided for up to six months and DSHS may renew this service for an additional six months if DSHS determines the individual still meets all eligibility requirements.

(d) Short-term grocery provisions may be provided for 30 days, once per calendar year, and the cost of groceries for each instance of the service must not exceed 200% of the U.S. department of agriculture supplemental nutrition assistance program (SNAP) allowance for one month.

(3) Individuals may not receive medically tailored meals, pantry stocking, or short-term grocery provisions at the same time.

NEW SECTION

WAC 388-106H-2030 Are there any service location limitations for nutrition supports? Nutrition supports are not provided in a residential facility or in an institution.

NEW SECTION

WAC 388-106H-2040 Who can provide nutrition support services?

(1) Providers who furnish nutrition support must meet minimum qualifications for contracting as defined by the state or its designee.

(2) Only a registered dietitian nutritionist (RDN), a qualified health care professional, or, if neither of those providers are available, a community health worker may provide nutrition education and counseling services.

(3) Only an RDN, or, if an RDN is not available, a primary care provider may develop a medically appropriate nutrition care plan through initial assessment and reassessment for medically tailored meals.

SUBCHAPTER III - CAREGIVER RESPITE SERVICES

NEW SECTION

WAC 388-106H-3000 What is the purpose of this subchapter? (1)

The purpose of this subchapter is to identify:

- (a) What benefits are included in caregiver respite services;
- (b) Eligibility criteria (WAC 388-106H-3010);
- (c) Duration of services (WAC 388-106H-3020);
- (d) Service location limitations (WAC 388-106H-3030); and
- (e) Provider qualifications (WAC 388-106H-3040).

(2) Caregiver respite services provide intermittent temporary supervision of an individual on a short-term basis.

(3) Caregiver respite services are available when it is useful and necessary to care for an individual in their own home and to prevent a primary unpaid caregiver's burnout.

(4) Caregiver respite services include, but are not limited to:

- (a) Assistance with yard and household maintenance;
- (b) Daily housework;
- (c) General companionship;
- (d) Grocery shopping;
- (e) Help with activities of daily living;
- (f) Preparing meals;
- (g) Social emotional skill building; and
- (h) Transportation to appointments.

NEW SECTION

WAC 388-106H-3010 Who is eligible to receive services through HRSN caregiver respite? (1) To be eligible for HRSN caregiver respite services an individual must:

- (a) Be enrolled in apple health (medicaid); and
- (b) Have a primary unpaid caregiver.

(2) The individual and their primary unpaid caregiver must meet the following social and clinical risk factors:

Social risk criteria (Column A)	Clinical risk criteria (Column B)
(1) The primary unpaid caregiver requires relief to avoid the individual being placed in an institution; and (2) The primary unpaid caregiver has self-identified: (a) Stress, fatigue, or competing time commitments or vacations; and (b) Challenges in finding or affording alternative care.	(1) The individual must meet one of the following: (a) The individual lives in the community and is compromised in their activities of daily living or has a behavioral health need that requires supervision; (b) Have a clinical or physical decline that increases medical or physical needs; (c) Have a complex clinical or behavioral need or placement on hospice; (d) Be pregnant or recently postpartum; or (e) Have repeated emergency department use or multiple crisis encounters. (2) The primary unpaid caregiver must meet one of the following: (a) Have medical needs, such as medical appointments or a contagious condition; (b) Needs additional rest to recover from a medical condition; (c) Requires services provided on an hour-by-hour basis due to absence; or (d) Requires services provided during the day or overnight on a short-term basis due to absence.

NEW SECTION

WAC 388-106H-3020 What is the duration of caregiver respite services? Eligible individuals may:

(1) Receive up to 336 hours of caregiver respite services in a calendar year, which includes all in-home and in-facility services; and

(2) Be approved for additional hours if the unpaid caregiver experiences an event that leaves the individual without their unpaid caregiver, including, but not limited to, the unpaid caregiver's need for medical treatment or hospitalization.

NEW SECTION

WAC 388-106H-3030 Are there any service location limitations for caregiver respite services? (1) Yes, individuals can only receive caregiver respite services in the individual's home, another location being used as the home, a residential setting that is appropriately licensed and contracted with DSHS or its designee, or an adult day center.

(2) Caregiver respite services cannot be provided virtually or through telehealth.

NEW SECTION

WAC 388-106H-3040 What qualifications must a caregiver respite services provider meet? Caregiver respite services providers must have appropriate registration, licensure, or credentials from the appropriate Washington state agency and meet minimum qualifications for contracting as defined by DSHS or its designee.

SUBCHAPTER IV - HOME ACCESSIBILITY, REMEDIATION, AND ADAPTATION DEVICES

NEW SECTION

WAC 388-106H-4000 What is the purpose of this subchapter? (1) The purpose of this subchapter is to identify the requirements for home accessibility, remediation, and adaptation devices, including:

- (a) Eligibility criteria (WAC 388-106H-4010);
- (b) Service locations (WAC 388-106H-4020);
- (c) Provider qualifications (WAC 388-106H-4030 and WAC 388-106H-4040);
- (d) Home visit criteria (WAC 388-106H-4050); and
- (e) Service limitations (WAC 388-106H-4060).

(2) Home accessibility, remediation, and adaptation devices provide physical changes to a home that are necessary to ensure the health, welfare, and safety of the individual or to enable the individual to function with greater independence in the home.

NEW SECTION

WAC 388-106H-4010 Who is eligible to receive services through HRSN home accessibility, remediation, and adaptation devices? (1) To be eligible for HRSN home accessibility, remediation, and adaptation devices an individual must be enrolled in apple health (medicaid); and

(2) An eligible individual must meet the social and clinical risk factors in both columns B and C specific to each service type in column A of this section:

Service type (Column A)	Social risk criteria (Column B)	Clinical risk criteria (Column C)
Accessibility modifications.	(1) Requires a clinically appropriate home modification or remediation service; (2) Lives in housing that is physically inaccessible or unsafe due to a disability or medical condition; or (3) Lives in housing that negatively impacts their health.	Has a chronic condition(s) causing physical limitations with inaccessible living environments.
Remediation services.	(1) Requires a clinically appropriate home modification or remediation service; (2) Living in housing that is physically inaccessible or unsafe due to a disability or medical condition; or (3) Living in housing that negatively impacts their health.	Has a chronic condition(s) for which remediation may be reasonably expected to improve health outcomes such as: (1) Poorly controlled asthma; (2) Chronic obstructive pulmonary disease (COPD); (3) Cystic fibrosis; or (4) Interstitial lung disease.
Adaptation devices.	At risk for institutionalization due to inaccessible living environments.	Has a chronic condition(s) for which devices may be expected to improve health outcomes, including: (1) Air filtration devices for people at health risk due to compromised air quality; (2) Refrigeration units for adequate medication storage needs; or (3) Portable power supplies for people who need access to electricity-dependent equipment (e.g., ventilators, dialysis machines, intravenous equipment, chair lifts, mobility devices, communication issues, etc.).

NEW SECTION

WAC 388-106H-4020 Where can services be provided? (1) Services are available to a individual residing in a home that is owned, rented, leased, or occupied by the individual or their caregiver.

(2) For a home that is not owned by the individual, the individual must provide written consent from the owner for physical adaptations to the home or for equipment that is physically installed in the home.

(3) The landlord must not require the individual to be financially responsible for removing the home modifications as a condition of the landlord approving the home modifications to the individual's home.

NEW SECTION

WAC 388-106H-4030 What qualifications must a provider meet? A qualified provider must be acting within the scope of their license

and meet minimum qualifications for contracting as defined by DSHS or its designee.

NEW SECTION

WAC 388-106H-4040 What types of providers can deliver services?

Providers may include:

- (1) Medical equipment and supplies providers;
- (2) Area agencies on aging;
- (3) Registered contractor per chapter 18.27 RCW; and
- (4) Others as approved by DSHS.

NEW SECTION

WAC 388-106H-4050 Are home visits required to receive these benefits? (1) For accessibility modifications and remediation services, the contracted provider must conduct a home visit at the individual's home and the DSHS or area agency on aging case manager may support the individual through their choice and construction of services.

- (2) Home visits are not required for adaptation devices.

NEW SECTION

WAC 388-106H-4060 Are there any service limitations? (1) Home accessibility modifications and remediation service limitations include:

- (a) Home accessibility modifications and remediation services must be performed in accordance with applicable state and local laws, including building codes;
 - (b) Home accessibility modifications and remediation services are limited to \$5,000 per instance; and
 - (c) Cannot exceed a lifetime maximum of \$7,500 per individual.
- (2) Adaptation home devices are limited by device including sales tax and delivery as follows:
- (a) Air conditioners up to \$880;
 - (b) Air filtration devices up to \$500;
 - (c) Air filter replacements up to \$80;
 - (d) Portable power supplies up to \$1,400;
 - (e) Heaters up to \$220 per device; and
 - (f) Mini refrigerators up to \$300.
- (3) Within available resources, DSHS, in its sole discretion, can make an adjustment to increase the individual's per instance maximum in (1)(b) and lifetime maximum in (1)(c) if DSHS finds that:
- (a) The individual's physical condition or living situation has changed so significantly that additional modifications are necessary to support their health, welfare, or independence; or
 - (b) Because of the individual's particular circumstances, the home accessibility modifications and remediation services cannot be reasonably purchased within the maximum.
- (4) The exception to rule (ETR) process in chapter 388-440 WAC is not available for benefits under this chapter.