WSR 26-10-026
PERMANENT RULES
HEALTH CARE AUTHORITY

[Filed April 29, 2026, 8:46 a.m., effective June 1, 2026]

Effective Date of Rule: June 1, 2026.

Purpose: The health care authority is amending the mobile rapid response crisis team endorsement standards chapter to include rules related to funding, application submission periods, training requirements, and new provider types.

Citation of Rules Affected by this Order: Amending WAC 182-140-0010, 182-140-0020, 182-140-0030, 182-140-0050, 182-140-0060, 182-140-0070, 182-140-0080, 182-140-0090, 182-140-0100, 182-140-0110, 182-140-0120, and 182-140-0130.

Statutory Authority for Adoption: RCW 41.05.021 and 41.05.160.

Adopted under notice filed as WSR 26-07-064 on March 17, 2026.

Changes Other than Editing from Proposed to Adopted Version:

<table>
<tr><th>Proposed/Adopted</th><th>WAC Subsection</th><th>Reason</th></tr>
<tr><td colspan="3">WAC 182-140-0080 (3)(d)</td></tr>
<tr><td>Proposed</td><td>(d) Be composed of the following behavioral health clinical staff who are appropriately credentialed or licensed within their scope of practice and meet the criteria below:
(((~~(i) A mental health professional (MHP);~~
~~(ii) A mental health care provider (MHCP);~~
~~(iii) A certified peer counselor who meets the criteria in WAC 182-115-0100; or~~
~~(iv) Another behavioral health or medical professional working within their scope of practice under an approved staffing plan, as needed, to meet staffing requirements; and~~
~~(v)~~)))
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• A behavioral health support specialist (BHSS)</u></td><td><u>(A) A response team must include at least one behavioral health clinical staff.
(B) If another provider type identified in subsections (ii) or (iii) of this table is unavailable, the response team must include two behavioral health clinical staff, as clinically appropriate.</u></td></tr><tr><td><u>(ii) Certified peers who meet the criteria of chapter 182-115 or 182-116 WAC, as applicable:
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• Certified peer support specialist trainee (CPSST)</u></td><td><u>A response team must include a certified peer, when available, or a provider from subsection (iii) of this table.</u></td></tr><tr><td><u>(iii) Other: A behavioral health or medical professional working within their scope of practice under an approved staffing plan</u></td><td><u>A response team must include a behavioral health or medical professional, as needed, to meet staffing requirements or a provider from subsection (ii) of this table.</u></td></tr></table></td><td>Further clarified the provider types that make up the composition of a response team.</td></tr>
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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 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 12, 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 12, Repealed 0.

Date Adopted: April 29, 2026.

Wendy Barcus
Rules Coordinator

RDS-6866.5

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0010 General. (1) This chapter establishes standards for issuing endorsements to mobile rapid response crisis teams (MRRCTs) and community-based crisis teams (CBCTs) according to RCW 71.24.903 and the authority's best practice guide. MRRCTs and CBCTs provide on-site interventions for people experiencing behavioral health emergencies.

(2) Subject to available funding, eligible MRRCTs and CBCTs may receive an endorsement from the authority that allows a team under contract with a behavioral health administrative services organization (BH-ASO) to receive enhanced rates and supplemental performance payments.

(3) Tribal governments may seek an endorsement using the attestation process described in WAC 182-140-0060.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0020 Definitions. The following definitions apply to this chapter:

"Authority" means the Washington state health care authority.

"Behavioral health administrative services organization (BH-ASO)" means the same as in WAC 182-538-050.

"Behavioral health emergency" means a person is experiencing a significant behavioral health crisis that requires an immediate in-person response due to level of risk or lack of means for safety planning.

"Behavioral health support specialist" means the same as in WAC 182-538D-0200.

"Calendar days" means all days, including Saturdays, Sundays, and designated holidays under WAC 357-31-005.

"Community-based crisis team (CBCT)" means a team that is part of an emergency medical services agency, a fire service agency, a public health agency, a medical facility, a nonprofit crisis response provider, or a city or county government entity, other than a law enforcement agency, that provides the on-site, community-based interventions of a mobile rapid response crisis team (MRRCT) for people who are experiencing behavioral health emergencies.

"Eligible organization" means an entity serving as a mobile rapid response crisis team (MRRCT) or a community-based crisis team (CBCT) that is seeking an endorsement. An eligible organization must be one of the following:

- Any entity below operated by a tribal government;
- City or county government entity, other than a law enforcement agency;
- Emergency medical service agency;
- Fire department;
- Fire service agency;
- Licensed or certified behavioral health agency;
- Medical facility;
- Nonprofit crisis response provider;
- Nonprofit organization; or
- Public health agency.

"Endorsed team" means a mobile rapid response crisis team (MRRCT) or a community-based crisis team (CBCT) that meets the endorsements standards in this chapter.

"Endorsement" or **"certificate of endorsement"** means a voluntary credential issued by the authority to a mobile rapid response crisis team (MRRCT) or a community-based crisis team (CBCT), which allows the team to become eligible for supplemental performance payments.

"Enhanced rate" means the increased rate paid to endorsed mobile rapid response crisis teams (MRRCT) and community-based crisis teams (CBCT) as described in RCW 71.24.903.

"Exempt community-based crisis team" means a team comprised solely of an emergency medical services agency, whether part of a fire service agency or a private entity, located in a rural county in eastern Washington with a population of less than 60,000 residents. Under RCW 71.24.903, minimum personnel standards do not apply in exempt eastern Washington counties.

"Exempt eastern Washington counties" means the following counties: Adams, Asotin, Columbia, Douglas, Ferry, Garfield, Kittitas, Klickitat, Lincoln, Okanogan, Pend Oreille, Skamania, Stevens, and Whitman.

"Mental health care provider (MHCP)" means a provider recognized by the department of health as a registered, agency-affiliated counselor who has primary responsibility for implementing an individualized plan for mental health rehabilitation services.

"Mental health professional (MHP)" means the same as in RCW 71.05.020.

"Mobile rapid response crisis team (MRRCT)" means a team that provides professional, on-site, community-based interventions such as outreach, de-escalation, stabilization, resource connection, and follow-up support for people who are experiencing a behavioral health emergency. A MRRCT must:

• Include certified peer ((~~counselors~~)) support specialists as a best practice to the extent practical based on workforce availability; and

• Meet standards for response times established by the authority's contracted BH-ASO.

"Regional dispatch protocols" means the protocols adopted by the regional BH-ASO to establish guidelines for dispatching necessary crisis services.

"Rural area" means a zip code with a population of less than 500 residents per square mile, an Indian reservation, and any location that requires travel by ferry or international travel to reach.

"Suburban area" means a zip code with a population of more than 500 residents per square mile but less than 3,000 residents per square mile.

"Supplemental performance payment" means an optional, additional payment described in RCW 71.24.903(10) that is greater than the enhanced rate. Endorsed teams are eligible for the supplemental performance payment if they demonstrate that they meet the required standards in this chapter.

"Urban area" means a zip code with a population of more than 3,000 residents per square mile.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0030 Application process. (1) **Application.** To apply for an endorsement, an eligible organization must submit an application for endorsement to the authority and all documentation required in subsection (3) of this section. Eligible organizations may apply:

(a) Online through the authority's website; or

(b) By completing the Crisis Team Endorsement Application form (HCA 82-0588) and mailing it to the authority.

(2) **Submission periods for applications.**

(a) A team must submit its completed application by ((~~January 1st to be eligible for a contract effective in July of the same year~~)) the deadline published on the authority's endorsement web page. (See https://www.hca.wa.gov/billers-providers-partners/program-information-providers/mobile-crisis-response-endorsement-program).

(b) ((~~A team must submit its completed application by July 1st to be eligible for a contract effective in January of the following year~~)) Providers must meet all application deadlines and endorsement criteria to be eligible for endorsement.

(c) The authority defers submissions received after the deadlines in (a) ((~~and (b)~~)) of this subsection until the next contract cycle.

(3) **Required documentation.** An eligible organization applying for an endorsement must also submit:

(a) A current contract with the behavioral health administrative services organization (BH-ASO) serving the region where the eligible organization will operate or a letter of intent to contract once the team is endorsed;

(b) The eligible organization's policies and procedures ((~~that~~)) and the authority's training verification tool, which outlines how ((~~it will comply or how it~~)) the eligible organization currently complies with the training requirements in WAC 182-140-0090;

(c) A copy of the transportation plan outlined in WAC 182-140-0100; ((~~and~~))

(d) A copy of the eligible organization's Endorsement Staffing Plan form (HCA 82-0624) described in WAC 182-140-0080; and

(e) A mobile crisis response information template (MCRIT) supplied by the authority.

(4) **Community-based crisis teams (CBCT).** A CBCT that intends to contract with a licensed and certified behavioral health agency (BHA) to provide staff must also submit:

(a) The contracting BHA's active contract with the BH-ASO located in the region where the CBCT will operate; or

(b) A letter of intent from the BH-ASO to establish a contractual relationship with the contracting BHA upon the CBCT receiving an endorsement; and

(c) A letter of intent from the contracting BHA to establish a contractual relationship with the CBCT upon the CBCT receiving an endorsement.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0050 Endorsement renewal. An endorsed team((~~s~~)) seeking renewal must ((~~submit the application and all current documentation described in WAC 182-140-0030.~~)):

(1) ((~~An endorsed team must~~)) Renew its endorsement every three years.

(2) Submit its renewal application ((~~and current documentation every three years. For a contract cycle from:~~

~~(a) January 1st through June 30th, the endorsed team's submission is due by July 1st of the previous year.~~

~~(b) July 1st through December 31st, the endorsed team's submission is due by January 1st of the current year~~)) by the deadline established on the authority's endorsement web page. (See https://www.hca.wa.gov/billers-providers-partners/program-information-providers/mobile-crisis-response-endorsement-program).

((~~(2)~~)) (3) Meet all renewal application deadlines and endorsement criteria established on the authority's endorsement web page to remain eligible for endorsement.

(4) Failure to timely complete this requirement may result in suspension or revocation of the team's endorsement and denial of any enhanced rates or supplemental payments.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0060 Tribal endorsement process. (1) Tribal eligible organizations may seek endorsement through the government-to-government process described in this section.

(2) Under this process, a tribal eligible organization must submit:

(a) The endorsement application and materials described in WAC 182-140-0030, as applicable;

(b) A Tribal Endorsement Attestation form (HCA 82-0599), confirming the organization meets the state minimum standards for mobile crisis services as described in WAC 182-140-0080, 182-140-0090, and 182-140-0100;

(c) A copy of its policies and procedures for the endorsement standards identified in (b) of this subsection; and

(d) Photographs showing that the organization's vehicle or vehicles meet the requirements of WAC 182-140-0100 (2), (3), and (4).

(3) After all materials are submitted, the authority and the tribal eligible organization meet to review and finalize all application materials and discuss any technical assistance needed.

(4) Following review and acceptance of the application and related materials, the authority issues the tribal eligible organization a certificate of endorsement and:

(a) Notifies all behavioral health administrative services organizations; and

(b) Negotiates ((~~an Indian~~)) a Sovereign Nation Agreement ((~~(INA)~~)) (SNA) with the tribe that outlines:

(i) Government-to-government monitoring; and

(ii) Denial, suspension, and revocation procedures under the terms of the parties' negotiated ((~~INA~~)) SNA.

(5) The provisions of WAC 182-140-0120 and 182-140-0130 do not apply to tribal eligible organizations.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0070 On-site review process. Eligible organizations must successfully complete and pass an on-site review.

(1) **On-site review.** The authority schedules the on-site review after it receives and approves all documentation required for an endorsement as described in this chapter. The on-site review examines the following:

(a) Employee files;

(b) Training materials and trainer qualifications;

(c) Any vehicle operated by an eligible organization; and

(d) Records of training certificates, if required, and driver licenses for all personnel who operate the vehicle.

(2) **Completion of on-site review.** After completing its on-site review, the authority sends the eligible organization a notice for any items that do not meet endorsement standards.

(a) The eligible organization has ((~~30~~)) 60 calendar days from the date of the notice to resolve any items that do not meet endorsement standards.

(b) If the eligible organization has not resolved all outstanding issues within ((~~30~~)) 60 days, the authority may deny the application.

(3) **Issuance of endorsement.** The authority issues a certificate of endorsement after it has reviewed and approved all required documentation and the eligible organization has satisfactorily completed its on-site review. Once endorsed, the eligible organization receives the enhanced rate.

(4) **Tribal exemption.** Tribal eligible organizations seeking endorsement through the process described in WAC 182-140-0060 are exempt from the on-site review.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0080 Staffing standards. To be endorsed, eligible organizations must meet the staffing standards described in this section.

(1) **Staffing plan.** An eligible organization must have a staffing plan that includes:

(a) How an eligible organization will be staffed 24 hours a day, seven days a week, including when each position is available to respond and where the teams are located;

(b) How peers will be incorporated into the response team;

(c) How peers will be recruited and any anticipated challenges for them;

(d) Policies and procedures for how staff will respond safely and meet the time requirements in the regional dispatch protocols; and

(e) Policies and procedures for ensuring follow-up crisis services occur after an initial response, as clinically and developmentally appropriate.

(2) **Additional staffing documentation for community-based crisis teams (CBCT).** A CBCT that contracts with a licensed and certified behavioral health agency to meet the staffing requirements described in WAC 182-140-0090 must have a staffing plan that includes:

(a) Which staff are involved in the agreement;

(b) The role of each staff member;

(c) How staff will access clinical supervision 24 hours a day, seven days a week, for real-time consultation; and

(d) How frequently clinical supervisors will provide ongoing coaching, case consultation, and clinical debriefing in a trauma informed manner, including how to:

(i) Review charts; and

(ii) Provide clinical quality assurance.

(3) **Mobile rapid response crisis teams and nonexempt CBCTs.** Eligible organizations that are not seeking the personnel exemption in RCW 71.24.903(3) must have sufficient response team staffing to ensure an in-person response is available 24 hours a day, seven days a week, and must:

(a) Meet the required response times identified in the BH-ASO contract;

(b) Provide all outreach in pairs unless it is not clinically appropriate;

(c) Provide follow-up services as clinically appropriate to a person seeking behavioral health assistance and connect the person to ongoing support; and

(d) Be composed of the following behavioral health clinical staff who are appropriately credentialed or licensed within their scope of practice and meet the criteria below:

((~~(i) A mental health professional (MHP);~~

~~(ii) A mental health care provider (MHCP);~~

~~(iii) A certified peer counselor who meets the criteria in WAC 182-115-0100; or~~

~~(iv) Another behavioral health or medical professional working within their scope of practice under an approved staffing plan, as needed, to meet staffing requirements; and~~

~~(v)~~))

Provider type		Criteria: To ensure all outreach is provided in pairs, a response team must include:	
(i)	**Behavioral health clinical staff:** • A mental health professional (MHP) • A mental health care provider (MHCP) • A behavioral health support specialist (BHSS)	(A) (B)	One behavioral health clinical staff; and Another provider type identified in subsection (ii) or (iii) of this table. If a provider type identified in subsection (ii) or (iii) of this table is unavailable, the second team member must be a behavioral health clinical staff, as clinically appropriate.
(ii)	**Certified peers who meet the criteria of chapter 182-115 or 182-116 WAC, as applicable:** • Certified peer counselor (CPC) • Certified peer support specialist (CPSS) • Certified peer support specialist trainee (CPSST)		A certified peer, when available, or a provider from subsection (iii) of this table.
(iii)	**Other:** A behavioral health or medical professional working within their scope of practice under an approved staffing plan		A behavioral health or medical professional, as needed, to meet staffing requirements or a provider from subsection (ii) of this table.

(e) Include at least one:

(i) MHP ((~~or MCHP~~)), MHCP, or BHSS during an initial response; and ((~~a certified peer counselor~~))

(ii) One CPSS, when available; or

(iii) One of the provider types described in subsection (d)(iii) of this section.

((~~(e)~~)) (f) Have an MHP supervise when the responding team staff are in the field; and

((~~(f)~~)) (g) Have access to an MHP 24 hours a day, seven days a week, for consultation. The consulting MHP may be the team supervisor or another MHP.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0090 Training standards. An eligible organization must complete the authority's training verification tool and provide the organization's policies and procedures ((~~must~~)) that meet the training standards in this section to receive endorsement. In addition, the authority may require all staff ((~~must receive training sponsored by the authority, behavioral health administrative services organizations, tribes, or eligible organizations~~)) to complete additional training, as applicable to endorsement.

(1) **Required staff training.** All current staff must receive the training described in this section, as applicable, before an eligible organization submits its application. Staff hired during or after the application process must complete the training described in this section, following the time requirements in subsections (2) and (3) of this section.

(2) **Training required within 90 days.** All staff must receive the following training within 90 calendar days of their hiring date:

(a) Required developmentally appropriate modules ((~~for~~)) developed and provided by the authority, when available, or other authority-approved trainings covering the same subject areas when authority-provided trainings are not available. Required modules include:

(i) Trauma-informed care;

(ii) Harm reduction; and

(iii) Basic de-escalation training.

(b) CPR;

(c) First aid;

(d) Naloxone administration;

(e) Suicide prevention training for health professionals approved by the department of health. Training required for behavioral health clinical staff licensure meets this standard if it is kept up to date; and

(f) Confidentiality standards established in chapters 70.02, 71.34, and 71.05 RCW, and other applicable laws.

(3) **Training required within 180 days.** All staff must complete the following training within 180 calendar days of their hiring date:

(a) Authority-approved ((~~certified~~)) crisis intervention specialist training;

(b) Regional crisis system training approved by the behavioral health administrative services organization (BH-ASO), as available; and

(c) Authority-approved training on the Indian health care delivery system, including the government-to-government relationship between the state of Washington and federally recognized Indian tribes.

(4) **Exception for tribes.** The authority considers the staff of teams operated by or for a tribe to meet the applicable requirements in subsection (3)(b) and (c) of this section.

(5) **Crisis supervision training for supervisors.** Supervisors must complete authority-approved crisis supervision training that includes the following:

(a) Trauma-informed supervision; and

(b) Monitoring for staff burnout.

(6) **Vehicle operation training.** Before operating an eligible organization's vehicle, staff must be trained in the following:

(a) Defensive driving;

(b) Operation of equipment compliant with the Americans with Disabilities Act; and

(c) Any specialized training necessary to operate the vehicle.

(7) **Additional training.** Eligible organizations must also provide any additional training required by the authority.

(8) **Approval of existing training materials.** An eligible organization may apply to have its training materials approved to meet the criteria required in this section. The organization must submit its training materials to the authority for approval as part of the application process described in WAC 182-140-0030.

(9) **Approved trainers.** Trainers must be approved by the authority. An organization may apply to have its own staff become approved trainers when:

(a) The staff member has completed the initial trainer course for specified trainings; and

(b) The organization has reviewed the staff member's credentials to ensure the person is competent to train others about the subject matter.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0100 Transportation, equipment, and communication standards. An eligible organization must meet the transportation, vehicle, and communication standards in this section to receive an endorsement.

(1) **Transportation plan.** An eligible organization must have a transportation plan.

(a) The plan's policies and procedures must explain how the organization will:

(i) Comply with regional transportation procedures;

(ii) Provide timely transportation when a transport need is identified, as clinically and developmentally appropriate;

(iii) Ensure safe transport for passengers and staff;

(iv) Ensure all staff who transport passengers are legally qualified to operate the vehicle;

(v) Arrange for alternative transport when the team is unable to provide transportation;

(vi) Ensure that people experiencing mobility disabilities have safe transport to a facility; and

(vii) Document the reasons for an unsuccessful transport and how to address them in the future.

(b) An eligible organization must follow incident reporting guidelines ((~~and notify the authority of~~)) for any critical incidents

or accidents that occur during transport. ((~~Eligible organizations must use the critical incident reporting system.~~))

(2) **Vehicle requirements.** An eligible organization must have access to an adequate number of vehicles to respond to and transport people experiencing significant behavioral health emergencies to a location that will provide the appropriate level of crisis stabilization services.

(a) Vehicles must:

(i) Be owned or leased by the eligible organization;

(ii) Have proper licensing and registration;

(iii) Be maintained in good working order; and

(iv) Meet all safety requirements.

An automotive service excellence (ASE) certified mechanic must complete a certificate of safety to demonstrate that the vehicle has passed a uniform vehicle safety inspection before the authority issues an endorsement or renewal. If there is concern that a vehicle does not meet all safety requirements after receiving an ASE certification, the authority or the behavioral health administrative services organization (BH-ASO) may require another formal inspection by a qualified professional.

(v) Have vehicle insurance coverage that applies to private, nonprofit transportation providers and meets the minimum limits of WAC 480-31-070;

(vi) Have 24 hour, seven days a week access to vehicles that meet the Americans with Disabilities Act (ADA) requirements for transporting a person experiencing mobility disabilities or be a licensed ambulance or aid vehicle as described in chapter 18.73 RCW.

(b) If an eligible team does not have a vehicle that meets the requirements of (a)(vi) of this subsection, the team must have policies and procedures on how it will transport someone experiencing mobility disabilities.

(3) **Equipment.** All equipment must be maintained in good working order and requires a formal inspection by a qualified professional when requested by the authority or the contracted behavioral health administrative services organization (BH-ASO).

(a) **Vehicle equipment.** Vehicles operated by eligible organizations must have:

(i) The appropriate equipment to ensure the person being transported is unable to interfere with the driver's safe operation of the vehicle;

(ii) Doors and windows that can be secured by the driver <u>to prevent unauthorized entry</u>;

(iii) Appropriate seat belts for the safety of staff and the person being transported, including child safety seats or booster seats as necessary;

(iv) Appropriate or necessary equipment to respond to weather conditions and roadside emergencies; and

(v) The ability to track the location of the vehicle and team.

(b) **Communication equipment.** All vehicles must be equipped with communication equipment that is in good working order.

(i) Equipment must allow for:

(A) Direct two-way communication between the team and its dispatch control point; and

(B) Communication with emergency services.

(ii) All teams must be equipped to access electronic health records (EHR) and referral records through a remote means, where coverage is available, and be able to print records when needed; and

(iii) All equipment must be compatible with authority-designated technology platforms.

(4) **Other equipment.** Eligible organizations must carry Naloxone.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0120 Notice of noncompliance. (1) **Denial of application.** The authority sends a notice of noncompliance that may result in the denial of an eligible organization's initial application or the denial of an endorsed team's renewal application if the eligible organization or endorsed team:

(a) Fails to meet the applicable endorsement standards described in WAC 182-140-0080, 182-140-0090, and 182-140-0100;

(b) Fails to cooperate or disrupts the authority's representatives during an on-site review or during a behavioral health administrative services organization's (BH-ASO) complaint investigation under its contract with the endorsed team;

(c) Knowingly, or with reason to know, makes a false statement of fact or fails to submit required information;

(d) Holds itself out as endorsed when the authority has denied or revoked the organization's endorsement, or the organization has surrendered its endorsement;

(e) Fails to timely provide satisfactory application materials;

(f) Fails to comply with any other requirement for endorsement described in this chapter; or

(g) Fails to meet the terms of its contract with the BH-ASO.

(2) **Endorsement suspension.** The authority sends an endorsed team a notice of noncompliance that may result in an endorsement suspension if the endorsed team fails to:

(a) Submit renewal materials prior to the closing of the application period;

(b) Schedule or timely complete the on-site review;

(c) Meet the endorsement standards outlined in WAC 182-140-0080, 182-140-0090, and 182-140-0100;

(d) Provide the services for which the eligible organization is endorsed; ((~~or~~))

(e) Follow the terms of their BH-ASO contract; or

(f) Comply with all federal and state laws, including federal confidentiality laws under HIPAA and 42 C.F.R. Part 2, as well as state confidentiality laws under chapters 70.02, 71.05, and 71.34 RCW.

(3) **Exception for tribal organizations.** Subsections (1) and (2) of this section and WAC 182-140-0130 do not apply to tribal eligible organizations or tribal endorsed organizations. Tribal organizations follow the process laid out in the organization's ((~~Indian~~)) Sovereign Nation Agreement described in WAC 182-140-0060 regarding any noncompliance with the endorsement standards in this chapter.

AMENDATORY SECTION (Amending WSR 24-18-088, filed 8/30/24, effective 9/30/24)

WAC 182-140-0130 Correction of noncompliance. If an eligible organization or endorsed team receives a notice of noncompliance, the organization or team may demonstrate compliance as follows:

(1) **Correction of application.** For notices of noncompliance for an eligible organization's application:

(a) An eligible organization has ((~~30~~)) 60 calendar days from the date of the notice of noncompliance to submit proof of all corrected deficiencies.

(b) The authority reviews the supplemental information and responds to the eligible organization within 30 calendar days of receipt.

(c) If the organization or team fails to timely submit proof of the corrected deficiency, the authority denies the application.

(2) **Correction of endorsement standards.** An endorsed team has 30 calendar days from the date of the notice of noncompliance to submit proof of all corrected deficiencies.

(a) An endorsed team must submit:

(i) Documentation proving compliance with standards; or

(ii) A plan to be approved by the authority to correct noncompliant compliance procedures within 90 calendar days of the notice of noncompliance, or both.

(b) The endorsed team must provide the authority with evidence of the correction within 90 calendar days of the notice of noncompliance.

(c) The authority reviews the evidence of the correction and, within 30 calendar days of receipt, determines whether the team is compliant.

(d) If the authority's evaluation confirms the endorsed team has satisfied the requirements for compliance, the authority provides written notice confirming the team's compliance.

(e) If an endorsed team fails to satisfy the requirements for compliance within the 30-day period, the authority issues a 90-calendar-day suspension notice. A suspended team is not eligible for supplemental performance payments during its suspension, and the suspension may impact the team's priority response status within the regional dispatch protocols.

(f) If an endorsed team fails to satisfy the requirements for compliance within the suspension period, the authority issues a notice of revocation of endorsement.

(3) **Endorsement revocation.** The authority sends an eligible organization a notice of noncompliance that may result in an endorsement revocation if the eligible organization fails to:

(a) Timely renew its endorsement every three years; or

(b) Remedy the cause of a suspended endorsement.

(4) **Surrender of endorsement.** An endorsed team may surrender its endorsement at any time. A team that surrenders its endorsement may continue to operate, but is no longer eligible to receive enhanced payments or supplemental performance payments.