



# PREPROPOSAL STATEMENT OF INQUIRY

## CR-101 (August 2017) (Implements RCW 34.05.310) Do NOT use for expedited rule making

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STATE OF WASHINGTON  
FILED

DATE: December 20, 2017

TIME: 8:06 AM

WSR 18-01-133

**Agency:** Health Care Authority

**Subject of possible rule making:** Chapter 182-559 WAC, Foundational community supports

**Statutes authorizing the agency to adopt rules on this subject:** RCW 41.05.021, 41.05.160

**Reasons why rules on this subject may be needed and what they might accomplish:** The agency is amending chapter 182-559 WAC, Foundational community supports, to align with changes to the Foundational Community Supports program protocol that was recently approved by the Centers for Medicare & Medicaid Services (CMS). The agency is adding new WAC sections to provide more detailed information as required by the protocol. The agency is adding a new WAC section to clarify the grievance and appeals process for clients receiving services through the Foundational Community Supports program. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.

**Identify other federal and state agencies that regulate this subject and the process coordinating the rule with these agencies:** Centers for Medicare & Medicaid Services (CMS) and Washington State Department of Social and Health Services (DSHS)

**Process for developing new rule (check all that apply):**

- Negotiated rule making
- Pilot rule making
- Agency study

Other (describe) The agency welcomes the public to take part in developing this rule. If interested, contact the person identified below to receive an early rule draft to review. After the early review, the agency will send a notice of proposed rulemaking (CR-102) to everyone receiving this notice and anyone who requests a copy.

**Interested parties can participate in the decision to adopt the new rule and formulation of the proposed rule before publication by contacting:**

Name: Katie Pounds  
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 Other:

(If necessary)

Name:  
 Address:  
 Phone:  
 Fax:  
 TTY:  
 Email:  
 Web site:  
 Other:

Additional comments:

**Date:** December 20, 2017

**Name:** Wendy Barcus

**Title:** HCA Rules Coordinator

**Signature:**