CODE REVISER USE ONLY

PROPOSED	RULE	MAKING
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## CR-102 (December 2017) (Implements RCW 34.05.320) Do NOT use for expedited rule making

OFFICE OF THE CODE REVISER STATE OF WASHINGTON FILED

DATE: January 19, 2021 TIME: 2:15 PM

WSR 21-03-075

Agency: Health Care	Authority				
☑ Original Notice					
Supplemental Notice to WSR					
Continuance of W	SR				
Preproposal State	ment of Inq	uiry was filed as WSR 20-24-036	; or		
Expedited Rule Ma	akingProp	osed notice was filed as WSR	; or		
Proposal is exempled as a semplement of the second seco	ot under RC	W 34.05.310(4) or 34.05.330(1); or	r		
Proposal is exempled					
		g information: (describe subject) W d interdisciplinary team	VAC 182-533-0327 Maternity support services—		
Hearing location(s):					
Date:	Time:	Location: (be specific)	Comment:		
February 23, 2021 Date of intended ado Submit written comm Name: HCA Rules Con Address: PO Box 427 Email: arc@hca.wa.go Fax: (360) 586-9727 Other:	nents to: ordinator 16, Olympia	progresses, it is yet unknown whether by the date of this public hearing restrictions of meeting in public places will be eased. To continue to be safe, this hearing is being scheduled as a virtual only hearing. This will not be an in-person hearing and there is not a physical location available.	To attend, you must register prior to the virtual public hearing (February 23, 2021, 10:00 AM Pacific Time). Registration URL <u>https://attendee.gotowebinar.com/register/3849005792</u> 212880141 Webinar ID 687-366-971 After registering, you will receive a confirmation email containing the information about joining the webinar. te: This is <b>NOT</b> the <b>effective</b> date)		
By (date) February 24	<u>, 2021</u>				
Assistance for perso	ns with disa	abilities:			
Contact Amber Lough Phone: (360) 725-134 Fax: (360) 586-9727 TTY: Telecommunicat Email: <u>amber.loughee</u> Other: By (date) <u>February 5, 5</u>	9 ion Relay Se <u>d@hca.wa.g</u>				

<b>Purpose of the proposal and its anticipated effects, including any changes in existing rules:</b> The proposed rule replaces "Chemical Dependency Professional" with "Substance Use Disorder Professional". This change aligns with RCW 18.205.020.				
Reasons suppor	ting proposal: See purpo	ose		
Statutory authori	ity for adoption: RCW 18	3.205.020, 41.05.021, 41.05.160		
Statute being im	plemented: RCW 41.05.0	021, 41.05.160		
State Court If yes, CITATION:	w? urt Decision? : Decision?	, if any, as to statutory language, implementation, e	<ul> <li>□ Yes ⊠ No</li> <li>□ Yes ⊠ No</li> <li>□ Yes ⊠ No</li> <li>□ Yes ⊠ No</li> </ul>	
matters: N/A	ent: (person or organizatio		Private	
	N G	, ,	<ul><li>☐ Public</li><li>⊠ Governmental</li></ul>	
Name of agency	personnel responsible f	or:		
	Name	Office Location	Phone	
Drafting:	Michael Williams	PO Box 42716, Olympia WA 98504-2716	(360) 725-1346	
Implementation:	Heather Weiher	PO Box 45530, Olympia WA 98504-2716	(360) 725-1293	
Enforcement:	Heather Weiher	PO Box 45530, Olympia WA 98504-2716	(360) 725-1293	
Is a school district fiscal impact statement required under RCW 28A.305.135? □ Yes ⊠ No If yes, insert statement here:				
The public may Name: Address Phone: Fax: TTY: Email: Other:		ool district fiscal impact statement by contacting:		
Is a cost-benefit analysis required under RCW 34.05.328?				
☐ Yes: A pre Name: Address Phone: Fax:	·	ysis may be obtained by contacting:		

	TTY: Email:						
	Other:						
	☑ No: Please explain: RCW 34.05.328 does not apply to Health Care Authority rules unless requested by the Joint Administrative Rules Review Committee or applied voluntarily.						
Regulator	y Fairness Act Cost Considerations for a Small	Busine	ess Economic Impact Statement:				
	This rule proposal, or portions of the proposal, <b>may be exempt</b> from requirements of the Regulatory Fairness Act (see chapter 19.85 RCW). Please check the box for any applicable exemption(s):						
<ul> <li>This rule proposal, or portions of the proposal, is exempt under RCW 19.85.061 because this rule making is being adopted solely to conform and/or comply with federal statute or regulations. Please cite the specific federal statute or regulation this rule is being adopted to conform or comply with, and describe the consequences to the state if the rule is not adopted.</li> <li>Citation and description:</li> <li>This rule proposal, or portions of the proposal, is exempt because the agency has completed the pilot rule process defined by RCW 34.05.313 before filing the notice of this proposed rule.</li> </ul>							
	e proposal, or portions of the proposal, is exempt a referendum.	under th	e provisions of RCW 15.65.570(2) because it was				
□ This rul	e proposal, or portions of the proposal, is exempt	under R	CW 19.85.025(3). Check all that apply:				
	RCW 34.05.310 (4)(b)		RCW 34.05.310 (4)(e)				
	(Internal government operations)		(Dictated by statute)				
	RCW 34.05.310 (4)(c)		RCW 34.05.310 (4)(f)				
	(Incorporation by reference)		(Set or adjust fees)				
	RCW 34.05.310 (4)(d)		RCW 34.05.310 (4)(g)				
	(Correct or clarify language)		((i) Relating to agency hearings; or (ii) process				
			requirements for applying to an agency for a license or permit)				
	e proposal, or portions of the proposal, is exempt	under R	CW				
Explanatio	n of exemptions, if necessary:						
	COMPLETE THIS SECTION O	NLY IF	NO EXEMPTION APPLIES				
If the propo	osed rule is <b>not exempt</b> , does it impose more-thar	n-minor (	costs (as defined by RCW 19.85.020(2)) on businesses?				
<ul> <li>No Briefly summarize the agency's analysis showing how costs were calculated. <u>These rules do not impose a disproportionate cost impact on small businesses or nonprofits.</u></li> <li>Yes Calculations show the rule proposal likely imposes more-than-minor cost to businesses, and a small business economic impact statement is required. Insert statement here:</li> </ul>							
The public may obtain a copy of the small business economic impact statement or the detailed cost calculations by contacting:							
A F F T E	lame: Address: Phone: Fax: TY: Email: Dther:						
Date: Janu	iary 19, 2021	Signat	$\mathbf{\lambda}$				
Name: We	ndy Barcus		Mende Barcus				
Title: HCA	Rules Coordinator		Lunder y storells				

AMENDATORY SECTION (Amending WSR 16-12-060, filed 5/26/16, effective 6/26/16)

WAC 182-533-0327 Maternity support services—Professional staff qualifications and interdisciplinary team. (1) MSS providers must use qualified professionals, as specified in this section.

(a) Behavioral health specialists who are currently credentialed, <u>certified</u>, or licensed in Washington by the department of health under chapters 246-809, 246-810, <u>246-811</u>, and 246-924 WAC as one of the following:

(i) Licensed mental health counselor.

(ii) Licensed independent clinical social worker.

(iii) Licensed social worker.

(iv) Licensed marriage and family therapist.

(v) Licensed psychologist.

(vi) Associate mental health counselor.

(vii) Associate independent clinical social worker.

(viii) Associate social worker.

(ix) Associate marriage and family therapist.

(x) Certified counselor.

(xi) Certified ((chemical dependency)) <u>substance use disorder</u> professional.

(b) Certified dietitians who are currently registered with the commission on dietetic registration and certified by the Washington state department of health under chapter 246-822 WAC.

(c) Community health nurses who are currently licensed as registered nurses in the state of Washington by the department of health under chapter 246-840 WAC.

(d) Community health workers (CHWs) who have a high school diploma or the equivalent and:

(i) Have a minimum of one year of health care and/or social services experience.

(ii) Carry out all activities under the direction and supervision of a professional member or supervisor of the MSS interdisciplinary team.

(iii) Complete a training plan developed by their provider.

(2) The provider's qualified staff must participate in an MSS interdisciplinary team consisting of at least a community health nurse, a certified registered dietitian, a behavioral health specialist, and, at the discretion of the provider, a community health worker.

(a) The interdisciplinary team must work together to address risk factors identified in a client's care plan.

(b) Each qualified staff member acting within her/his area of expertise must address the variety of client needs identified during the maternity cycle.

(c) An MSS interdisciplinary team case conference is required at least once prenatally for clients who are entering MSS during pregnancy, and are eligible for the maximum level of service. Using clinical judgment and the client's risk factors, the provider may decide which interdisciplinary team members to include in case conferencing.

(3) All Indian health programs, tribes, and any MSS provider within a county with fewer than fifty-five medicaid births per year are required to have at least one MSS interdisciplinary team member, as described in subsection (1) of this section:

(a) A behavioral health specialist;

- (b) A registered dietitian; or(c) A community health nurse.