



PROPOSED RULE MAKING

CR-102 (June 2024)
(Implements RCW 34.05.320)
Do **NOT** use for expedited rule making

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OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: July 17, 2025

TIME: 4:03 PM

WSR 25-15-109

Agency: Health Care Authority

☒ **Original Notice**

☐ **Supplemental Notice to WSR** _____

☐ **Continuance of WSR** _____

☒ **Preproposal Statement of Inquiry was filed as WSR 25-06-042 ; or**

☐ **Expedited Rule Making--Proposed notice was filed as WSR** _____; or

☐ **Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1); or**

☐ **Proposal is exempt under RCW** _____.

Title of rule and other identifying information: (describe subject) Chapter 182-565 WAC, new Subchapter III, Medical Respite Program which includes: 182-565-0300 General; 182-565-0310 Definitions; 182-565-0320 Eligibility; 182-565-0330 Admission; 182-565-0340 Discharge; 182-565-0350 Program requirements; 182-565-0360 Coordination and services; 182-565-0370 Duration of services; 182-565-0380 Provider requirements; 182-565-0390 Grievance and appeals

Hearing location(s):

Date:	Time:	Location: (be specific)	Comment:
August 26, 2025	10:00 AM	The Health Care Authority holds public hearings virtually without a physical meeting place	To attend the virtual public hearing, you must register in advance: https://us02web.zoom.us/webinar/register/WN_8Nt1PNm-Tf-leJnRVSYXPg#/registration If the link above opens with an error message, please try using a different browser. After registering, you will receive a confirmation email containing information about joining the public hearing

Date of intended adoption: Not sooner than August 27, 2025 (Note: This is **NOT** the **effective** date)

Submit written comments to:

Name HCA Rules Coordinator

Address PO Box 42716, Olympia WA 98504-2716

Email arc@hca.wa.gov

Fax 360-586-9727

Other

Beginning (date and time) July 18, 2025, 8:00 AM

By (date and time) August 26, 2025, by 11:59 PM

Assistance for persons with disabilities:

Contact HCA Rules Coordinator

Phone 360-725-1306

Fax 360-586-9727

TTY Telecommunication Relay Service (TRS): 711

Email arc@hca.wa.gov

Other

By (date) August 8, 2025

Purpose of the proposal and its anticipated effects, including any changes in existing rules: The agency is proposing to add a new subchapter III, titled Medical Respite Program, under Chapter 182-565 WAC Health-Related Social Needs (HRSN) program.

Reasons supporting proposal: This program is intended to provide medical respite care for individuals with significant behavioral health needs. The program is intended to serve individuals with significant behavioral health needs and medical issues who do not require hospitalization but are unable to provide adequate self-care for their medical conditions. The program prioritizes services to individuals with complex medical and behavioral health issues who are homeless or who were recently discharged from a hospital setting.

Statutory authority for adoption: RCW 41.05.021, 41.05.160, [ESSB 5187, 68th Legislature, 2023, Regular Session, Section 215, \(64\).](#)

Statute being implemented: RCW 41.05.021, 41.05.160, [ESSB 5187, 68th Legislature, 2023, Regular Session, Section 215, \(64\).](#)

Is rule necessary because of a:			
Federal Law?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Federal Court Decision?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
State Court Decision?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, CITATION:			
Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters: None			
Name of proponent: (person or organization) Health Care Authority			
Type of proponent: <input type="checkbox"/> Private. <input type="checkbox"/> Public. <input checked="" type="checkbox"/> Governmental.			
Name of agency personnel responsible for:			
	Name	Office Location	Phone
Drafting	Valerie Freudenstein	PO Box 42716, Olympia, WA 98504-2716	360-725-1344
Implementation	Rob McDonough	PO Box 42716, Olympia, WA 98504-2716	360-725-5135
Enforcement	Rob McDonough	PO Box 42716, Olympia, WA 98504-2716	360-725-5135
Is a school district fiscal impact statement required under RCW 28A.305.135?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, insert statement here:			
<p>The public may obtain a copy of the school district fiscal impact statement by contacting:</p> <p>Name</p> <p>Address</p> <p>Phone</p> <p>Fax</p> <p>TTY</p> <p>Email</p> <p>Other</p>			
Is a cost-benefit analysis required under RCW 34.05.328?			
<input type="checkbox"/> Yes: A preliminary cost-benefit analysis may be obtained by contacting: <p>Name</p> <p>Address</p> <p>Phone</p> <p>Fax</p> <p>TTY</p> <p>Email</p> <p>Other</p>			
<input checked="" type="checkbox"/> 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.			
Regulatory Fairness Act and Small Business Economic Impact Statement			
Note: The Governor's Office for Regulatory Innovation and Assistance (ORIA) provides support in completing this part.			
(1) Identification of exemptions:			
This rule proposal, or portions of the proposal, may be exempt from requirements of the Regulatory Fairness Act (see chapter 19.85 RCW). For additional information on exemptions, consult the exemption guide published by ORIA . Please check the box for any applicable exemption(s):			
<input type="checkbox"/> 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. Citation and description:			
<input type="checkbox"/> 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.			
<input type="checkbox"/> This rule proposal, or portions of the proposal, is exempt under the provisions of RCW 15.65.570(2) because it was adopted by a referendum.			

- ☐ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.025\(3\)](#). Check all that apply:
- | | |
|---|--|
| <input type="checkbox"/> RCW 34.05.310 (4)(b)
(Internal government operations) | <input type="checkbox"/> RCW 34.05.310 (4)(e)
(Dictated by statute) |
| <input type="checkbox"/> RCW 34.05.310 (4)(c)
(Incorporation by reference) | <input type="checkbox"/> RCW 34.05.310 (4)(f)
(Set or adjust fees) |
| <input type="checkbox"/> RCW 34.05.310 (4)(d)
(Correct or clarify language) | <input type="checkbox"/> RCW 34.05.310 (4)(g)
((i) Relating to agency hearings; or (ii) process requirements for applying to an agency for a license or permit) |
- ☐ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.025\(4\)](#). (Does not affect small businesses).
- ☐ This rule proposal, or portions of the proposal, is exempt under RCW _____.
Explanation of how the above exemption(s) applies to the proposed rule:

(2) Scope of exemptions: *Check one.*

- ☐ The rule proposal: Is fully exempt. (*Skip section 3.*) Exemptions identified above apply to all portions of the rule proposal.
- ☐ The rule proposal: Is partially exempt. (*Complete section 3.*) The exemptions identified above apply to portions of the rule proposal, but less than the entire rule proposal. Provide details here (consider using [this template from ORIA](#)):
- ☒ The rule proposal: Is not exempt. (*Complete section 3.*) No exemptions were identified above.

(3) Small business economic impact statement: *Complete this section if any portion is not exempt.*

If any portion of the proposed rule is **not exempt**, does it impose more-than-minor costs (as defined by RCW 19.85.020(2)) on businesses?

- ☒ No Briefly summarize the agency's minor cost analysis and how the agency determined the proposed rule did not impose more-than-minor costs. The proposed rule establishes coverage of medical respite services for Apple Health (Medicaid) clients. With the help of HRSN infrastructure funding, the rule does not impose more-than-minor costs on small businesses.
- ☐ Yes Calculations show the rule proposal likely imposes more-than-minor cost to businesses and a small business economic impact statement is required. Insert the required small business economic impact statement here:

The public may obtain a copy of the small business economic impact statement or the detailed cost calculations by contacting:

Name
Address
Phone
Fax
TTY
Email
Other

Date: July 17, 2025

Name: Wendy Barcus

Title: HCA Rules Coordinator

Signature:



SUBCHAPTER III - MEDICAL RESPITE PROGRAM

NEW SECTION

WAC 182-565-0300 General. Medical respite programs offer a lower-intensity care setting for patients who are homeless or at risk of homelessness and who would otherwise require a hospital stay or lack a safe option for discharge and recovery. Medical respite programs must meet the minimum operating standards and meet the required medical respite standards of the facility through the national institute for medical respite care (NIMRC), offer required services, meet local codes and ordinances for licensing, safety, and occupancy.

NEW SECTION

WAC 182-565-0310 Definitions. The following definitions and those found in chapter 182-500 WAC apply to this chapter:

"**Behavioral health need**" - See WAC 182-565-0110.

"**Demonstration period**" - See WAC 182-565-0110.

"**Facility**" - The physical location where the medical respite program provides medical respite care services to clients.

"**Homelessness**" or "**at risk of homelessness**" - See WAC 182-565-0110.

"**Medical respite care services**" - Temporary, short-term room and board, health care services and supports.

"**Medical respite program (a.k.a., recuperative care and short-term post-hospitalization housing)**" - A not-for-profit organization that serves clients whose medical and behavioral health need medical respite care services.

NEW SECTION

WAC 182-565-0320 Eligibility. (1) A person must have or be eligible for apple health coverage before entering a medical respite program. If a person does not have coverage and wants to participate in the medical respite program, the program can help them register for coverage.

(2) To receive medical respite care services, a client must have a qualifying acute medical condition that requires treatment and/or care, does not require a hospital inpatient stay, and is too ill or frail to recover from a physical illness or injury while living on the street and is at risk of being homeless or experiencing homelessness.

NEW SECTION

WAC 182-565-0330 Admission. A client is eligible for admission to a medical respite program when the client:

- (1) Is experiencing homelessness or is at risk of becoming homeless;
- (2) Is experiencing medical and behavioral health needs and meets one of the following:
 - (a) Has recently been discharged from a hospital setting including emergency room visits; or
 - (b) Is referred from a medical clinic (e.g., a primary care clinic, federally qualified health center, urgent care facility, mobile medical clinic, street medicine) and both of the following are true:
 - (i) The client has an acute medical condition that can be safely managed in a sheltered outpatient setting; and
 - (ii) Medical respite care is appropriate to provide the conditions to support recovery from the acute medical condition;
- (3) Can perform activities of daily living (ADLs) with minimal or no assistance; and
- (4) Has signed an admission agreement.

NEW SECTION

WAC 182-565-0340 Discharge. (1) The medical respite program will discharge the client when the client meets one of the following:

- (a) No longer benefits from medical respite care services;
 - (b) Reaches the 90-day utilization limit for their current admission or the six-month utilization during the demonstration period; or
 - (c) An appropriate alternative service becomes available.
- (2) The six-month utilization period limit is shared amongst other housing support services including, but not limited to, housing transition navigation services, and rent/temporary housing.
- (3) The medical respite program must begin discharge planning upon the client's admission and maintain discharge planning throughout the client's stay at the facility.
- (4) To discharge a client, the program must provide a referral tailored to client needs, to include:
- (a) Potential housing options;
 - (b) Referrals to appropriate health care providers;
 - (c) Supportive services; and
 - (d) Provide advance and written notice of discharge to the client, and as applicable, the client's health care provider, managed care organization, and caregivers.
- (5) Upon admission and discharge, the program must provide an admission or discharge summary to the client, the health care provider, the managed care organization if applicable, and other persons or entities requested by the client. The admission or discharge summary must include the following:
- (a) Written medication list and medication refill information;
 - (b) Admitting primary diagnosis following discharge from the hospital or referral from a medical clinic;
 - (c) Estimated or documented length of stay in the medical respite program;

- (d) Ongoing medical needs or conditions;
 - (e) Instructions for accessing relevant resources within the community including shelters or other housing options;
 - (f) A list of follow-up appointments and contact information for treating providers;
 - (g) Special medical instructions (e.g., weight-bearing limitations, dietary precautions, allergies, wound orders);
 - (h) Pain management plan; and
 - (i) A point of contact for the client.
- (6) The medical respite program must ensure adequate protocols are in place for the transfer of client information and access to electronic records to appropriate providers and, if applicable, the client's managed care organization.

NEW SECTION

WAC 182-565-0350 Program requirements. (1) Medical respite programs must provide or arrange for the provision of the following services:

- (a) Room and board which must include, at a minimum:
 - (i) A dedicated bed that is available to the client 24 hours a day, seven days a week;
 - (ii) Three meals a day in accordance with medical respite standards;
 - (iii) Laundry services;
 - (iv) Secured storage for personal belongings and medications;
 - (v) Compliance with standards set by NIMRC; and
 - (vi) Compliance with local codes and ordinances for licensing, safety, and occupancy.
 - (b) The medical respite provider must notify the agency if they no longer meet the requirements to provide medical respite care.
- (2) The agency may conduct a post pay review to ensure medical respite care requirements are met. If requirements are not met at the time services are provided, the agency may recoup payment.

NEW SECTION

WAC 182-565-0360 Coordination and services. The medical respite program must provide coordination such that the client can access the following services:

- (1) Clinical assessments;
- (2) Behavioral health screenings for psychosocial needs;
- (3) Medical case management;
- (4) Case management support in accessing benefits and housing;
- (5) Twenty-four hour wellness checks;
- (6) Medical oversight to include:
 - (a) Medication monitoring; and
 - (b) Ongoing assessments to determine effectiveness of care plan and/or treatments;
- (7) Minor clinical interventions (e.g., wound care, infection control, nonpharmacological pain management);

(8) Arrangement for transportation for the client to and from appointments that are not covered by nonemergency transportation as defined in WAC 182-546-5500; and

(9) Access to equipment for telehealth services and communication related to medical needs or care.

NEW SECTION

WAC 182-565-0370 Duration of services. Medical respite care services are short-term, limited to 90 consecutive days and no more than six months (180 days) during the demonstration period. See WAC 182-565-0340.

NEW SECTION

WAC 182-565-0380 Provider requirements. A medical respite program may provide medical respite care services when the medical respite program:

(1) Is enrolled as a Washington apple health medicaid provider for claims to be paid and be able to provide documentation of proof of service;

(2) Meets the standards for medical respite care programs set by NIMRC;

(3) Completes all necessary agency forms and attestation and receives agency approval; and

(4) Meets local codes and ordinances for licensing, safety, and occupancy.

NEW SECTION

WAC 182-565-0390 Grievance and appeals. Grievance and appeals related to medical respite care services follow the process described in chapter 182-526 WAC.