



RULE-MAKING ORDER EMERGENCY RULE ONLY

CR-103E (December 2017)
(Implements RCW 34.05.350
and 34.05.360)

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: May 08, 2025

TIME: 12:27 PM

WSR 25-11-008

Agency: Health Care Authority

Effective date of rule:

Emergency Rules

- ☒ Immediately upon filing.
☐ Later (specify)

Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?

☐ Yes ☒ No If Yes, explain:

Purpose: The agency is amending this rule to expand eligibility for family planning only (FPO) coverage to people age 26 and younger who are confidentially seeking those services.

Citation of rules affected by this order:

New:
Repealed:
Amended: 182-532-510
Suspended:

Statutory authority for adoption: RCW 41.05.021, RCW 41.05.160

Other authority:

EMERGENCY RULE

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.
- ☐ 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: Family planning only (FPO) services operate under a federal waiver that allows changes in coverage in response to state needs. Under [WSR 23-24-065](#), the agency is amending several rules in Chapter 182-532 WAC to expand screening and preventative services for certain sexually transmitted infections and to include coverage for family planning-related services and supplies in connection with a family planning visit. These changes were approved by the Centers for Medicare & Medicaid Services (CMS) as eligible additions to the state program.

The agency originally filed emergency rules for this coverage on December 29, 2023. The agency has continued the emergency rules with successive filings, most recently on April 18, 2025, while waiting for CMS approval of the renewed FPO waiver application. CMS approved the five-year waiver with an effective date of May 1, 2025.

The renewed waiver authorizes the agency to increase the eligibility age limit for FPO coverage for people seeking these services in confidence. This emergency rulemaking is necessary to amend the age limit in WAC 182-532-510 from 18 to 26 while agency staff begin the permanent rulemaking process for this section of the WAC.

**Note: If any category is left blank, it will be calculated as zero.
No descriptive text.**

**Count by whole WAC sections only, from the WAC number through the history note.
A section may be counted in more than one category.**

The number of sections adopted in order to comply with:

Federal statute:	New	_____	Amended	_____	Repealed	_____
Federal rules or standards:	New	_____	Amended	_____	Repealed	_____
Recently enacted state statutes:	New	_____	Amended	_____	Repealed	_____

The number of sections adopted at the request of a nongovernmental entity:

New	_____	Amended	_____	Repealed	_____
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The number of sections adopted on the agency's own initiative:

New	_____	Amended	_____	Repealed	_____
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The number of sections adopted in order to clarify, streamline, or reform agency procedures:

New	_____	Amended	<u>1</u>	Repealed	_____
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The number of sections adopted using:

Negotiated rule making:	New	_____	Amended	_____	Repealed	_____
Pilot rule making:	New	_____	Amended	_____	Repealed	_____
Other alternative rule making:	New	_____	Amended	<u>1</u>	Repealed	_____

Date Adopted: May 8, 2025

Name: Wendy Barcus

Title: HCA Rules Coordinator

Signature:



WAC 182-532-510 Family planning only program—Eligibility. For the purposes of this section, "full-scope coverage" means coverage under either the categorically needy (CN) program, the broadest, most comprehensive scope of health care services covered or the alternative benefits plan (ABP), the same scope of care as CN, applicable to the apple health for adults program.

(1) To be eligible for family planning only services, as defined in WAC 182-532-001, a client must:

(a) Provide a valid Social Security number (SSN) or proof of application to receive an SSN, be exempt from the requirement to provide an SSN as provided in WAC 182-503-0515, or meet good cause criteria listed in WAC 182-503-0515(2);

(b) Be a Washington state resident, as described under WAC 182-503-0520;

(c) Have an income at or below 260 percent of the federal poverty level, as described under WAC 182-505-0100;

(d) Need family planning services; and

(e) Have been denied apple health coverage within the last 30 days, unless the applicant:

(i) Has made an informed choice to not apply for full-scope coverage as described in WAC 182-500-0035 and 182-501-0060, including family planning;

(ii) Is age ((18)) 26 or younger and seeking services in confidence;

(iii) Is a domestic violence victim who is seeking services in confidence; or

(iv) Has an income of 150 percent to 260 percent of the federal poverty level, as described in WAC 182-505-0100.

(2) A client is not eligible for family planning only medical if the client is:

(a) Pregnant;

(b) Sterilized;

(c) Covered under another apple health program that includes family planning services; or

(d) Covered by concurrent creditable coverage, as defined in RCW 48.66.020, unless they meet criteria in subsection (1)(e) of this section.

(3) The agency does not limit the number of times a client may reapply for coverage.