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RULE-MAKING ORDER PERMANENT RULE ONLY

CR-103P (December 2017) (Implements RCW 34.05.360)

OFFICE OF THE CODE REVISER STATE OF WASHINGTON FILED

DATE: April 23, 2018 TIME: 8:27 AM

WSR 18-10-014

Agency: Health Care Au	ithority						
Effective date of rule:							
Permanent Rules							
🛛 31 days after fili	ng.						
□ Other (specify)	(If less than 31 days after filing, a specific finding under RCV	V 34.05.380(3) is required and should					
be stated below)							
Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?							
□ Yes □ No If `	Yes, explain:						
Burnese: This section is	being revised to:						
Purpose: This section is	Social Security Number (SSN) or proof of application for an SSN is	s not required to be provided to be					
(1) Clarify when a value C	or Tailored Supports for Older Adults (TSOA)	s not required to be provided to be					
	for exceptions to not providing an SNN						
		n SSN still applies					
 (3) Clarify the requirement for confirming with the agency that the exception to providing an SSN still applies (4) Clarify what must be provided if an SSN is not known or has not been issued 							
(5) Clarify that if a household member is required to provide an SSN and fails to do so, it may result in denial or termination							
Citation of rules affecte							
New:							
Repealed:							
Amended: 182-503-0515							
Suspended:							
	adoption: RCW 41.05.021, 41.05.160						
Other authority:	· · · · ·						
	eluding Eurodited Dule Meking)						
	cluding Expedited Rule Making)						
	filed as <u>WSR 18-04-065</u> on <u>February 1, 2018</u> (date). s other than editing from proposed to adopted version:						
		Deesen					
Proposed/Adopted	WAC Subsection	Reason					
Original WAC # 192.5	03-0515 Washington apple health – Social Security number re	auiromonte					
Proposed	(7) If you are a household member required under subsection	In response to stakeholder					
	(2)(b) of this section to provide an SSN (such as a spouse,	comments, the agency revised					
	community spouse, parent, or sponsor), and you do not meet	subsection (7).					
	any other exception under subsection (2) of this section, failure to provide your SSN may result in denial or termination						
	because we cannot verify your household's resource eligibility.						
	because we cannot verify your nousehold's resource engibility.						
Adopted	(7) If you are required to provide an SSN under this section,						
Adopted	and you do not meet an exception under subsection (2) of this						
	section, failure to provide your SSN may result in:						
	(a) Denial of your application or termination of your coverage						
	because we cannot determine your household's eligibility; or						
	(b) Inability to apply the community spouse resource allocation						
	(CSRA) or monthly maintenance needs allowance (MMNA) for						
	a client of long-term services and supports (LTSS).						
If a preliminary cost-b	enefit analysis was prepared under RCW 34.05.328, a final cost-	benefit analysis is available by					
contacting:							

Name:

Address:

Phone:

Fax: TTY: Email: Web site: Other:

Note: If any category is lo No descriptive text	-	ill be calc	ulated	l as zero.	
Count by whole WAC sections onl A section may be c				story note.	
The number of sections adopted in order to comply	y 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	a nongovernmenta	l entity:			
	New	Amended		Repealed	
The number of sections adopted on the agency's o	wn initiative:				
	New	Amended		Repealed	
The number of sections adopted in order to clarify,	streamline, or ref	orm agency p	rocedure	es:	
	New	Amended	<u>1</u>	Repealed	
The number of sections adopted using:					
Negotiated rule making:	New	Amended		Repealed	
Pilot rule making:	New	Amended	<u> </u>	Repealed	
Other alternative rule making:	New	Amended	<u>1</u>	Repealed	
Date Adopted: April 23, 2018	Signature:	\			
Name: Wendy Barcus		Ma	A Jubi	Souches	
Title: HCA Rules Coordinator		, 50	S		

AMENDATORY SECTION (Amending WSR 14-16-052, filed 7/29/14, effective 8/29/14)

WAC 182-503-0515 Washington apple health—Social Security number requirements. (1) To be eligible for Washington apple health $((\frac{WAH}))$ (medicaid), or tailored supports for older adults (TSOA) described in WAC 182-513-1610, you (the applicant or recipient) must provide your valid Social Security number (SSN) or proof of application for an SSN to the medicaid agency or the agency's designee, except as provided in subsections $((\frac{(5)}{2}))$ (2) and (6) of this section.

(2) ((If you are not able to provide your SSN, either because you do not know it or it has not been issued, you must provide:

(a) Proof from the Social Security Administration (SSA) that you turned in an application for an SSN; and

(b) The SSN when you receive it.

(3) Your WAH coverage will not be delayed, denied or terminated while waiting for SSA to send you your SSN.

(4) If you do not provide your SSN, then you will not receive WAH coverage except if you:

(a) Refused to apply for or provide your SSN for religious reasons;

(b) Claim good cause for not providing your SSN because of domestic violence;

(c) Have a newborn as described in WAC 182-505-0210(1). A newborn is eligible for WAH coverage until the baby's first birthday.

(5) There is no SSN requirement for the following:

(a) WAH refugee medical;

(b) WAH alien emergency medical;

(c) WAH programs for children and pregnant women who do not meet citizenship criteria described in WAC 182-503-0535;

(d) A household member who is not applying for WAH coverage.

(6) If you are a "qualified" or "nonqualified" alien as defined in WAC 182-503-0530 who is not authorized to work in the U.S., you do not have to apply for a nonwork SSN.)) An SSN is not required if you are:

(a) Not eligible to receive an SSN or may only be issued an SSN for a valid nonwork reason described in 20 C.F.R. 422.104;

(b) A household member who is not applying for apple health coverage, unless verification of that household member's resources is reguired to determine the eligibility of the client;

(c) Refusing to obtain an SSN for well-established religious objections as defined in 42 C.F.R. 435.910(h) (3); or

(d) Not able to obtain or provide an SSN because you are a victim of domestic violence.

(3) If you are receiving coverage because you meet an exception under either subsection (2)(c) or (d) of this section, we (the agency) will confirm with you at your apple health renewal, consistent with WAC 182-503-0050, that you still meet the exception.

(4) If we ask for confirmation that you continue to meet an exception in subsection (2) of this section and you do not respond in accordance with subsection (3) of this section, or if you no longer meet an exception and do not provide your SSN, we will terminate your apple health coverage according to WAC 182-518-0025.

(5) If you are not able to provide your SSN, either because you do not know it or it has not been issued, you must provide:

(a) Proof from the Social Security Administration (SSA) that you turned in an application for an SSN; and

(b) The SSN when you receive it.

(i) Your apple health coverage will not be delayed, denied, or terminated while waiting for SSA to send you your SSN. If you need help applying for an SSN, assistance will be provided to you.

(ii) We will ask you every ninety days if your SSN has been issued.

(6) An SSN is not required for the following apple health programs:

(a) Refugee medical assistance program described in WAC 182-507-0130;

(b) Alien medical programs described in WAC 182-507-0115, 182-507-0120, and 182-507-0125;

(c) Newborn medical program described in WAC 182-505-0210 (2)(a); (d) Foster care program for a child age eighteen and younger as described in WAC 182-505-0211(1); or

(e) Medical programs for children and pregnant women who do not meet citizenship or immigration status described in WAC 182-503-0535 (2)(e)(ii) and (iii).

(7) If you are required to provide an SSN under this section, and you do not meet an exception under subsection (2) of this section, failure to provide your SSN may result in:

(a) Denial of your application or termination of your coverage because we cannot determine your household's eligibility; or

(b) Inability to apply the community spouse resource allocation (CSRA) or monthly maintenance needs allowance (MMNA) for a client of long-term services and supports (LTSS).