



# RULE-MAKING ORDER PERMANENT RULE ONLY

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

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER  
STATE OF WASHINGTON  
FILED

DATE: February 28, 2019

TIME: 10:51 AM

WSR 19-06-026

**Agency:** Health Care Authority

**Effective date of rule:**

**Permanent Rules**

- 31 days after filing.  
 Other (specify) April 1, 2019 (If less than 31 days after filing, a specific finding under RCW 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:

**Purpose:** The agency is revising WAC 182-533-0370 to remove subsection (3) to allow the infant and infant's parents to receive infant case management and maternity support services (MSS) if a parent becomes pregnant. The agency is also revising WAC 182-533-0390 to reduce the minimum hours of childbirth education (CBE) instruction required from eight to six.

**Citation of rules affected by this order:**

New:  
Repealed:  
Amended: 182-533-0370, 182-533-0390  
Suspended:

**Statutory authority for adoption:** RCW 41.05.021, 41.05.160

**Other authority:**

**PERMANENT RULE (Including Expedited Rule Making)**

Adopted under notice filed as WSR 19-03-051 on January 9, 2019 (date).  
Describe any changes other than editing from proposed to adopted version: N/A

If a preliminary cost-benefit 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 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Federal statute:	New	___	Amended	___	Repealed	___
Federal rules or standards:	New	___	Amended	___	Repealed	___
Recently enacted state statutes:	New	___	Amended	___	Repealed	___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New	___	Amended	___	Repealed	___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New	___	Amended	___	Repealed	___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>2</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>2</u>	Repealed	___

**Date Adopted:** February 28, 2019

**Name:** Wendy Barcus

**Title:** HCA Rules Coordinator

**Signature:**



AMENDATORY SECTION (Amending WSR 14-09-061, filed 4/16/14, effective 5/17/14)

**WAC 182-533-0370 Infant case management—Client eligibility.**

(1) To be eligible to receive infant case management (ICM), an infant must meet all the following criteria:

(a) Be covered under categorically needy, medically needy, or state-funded medical programs under Washington apple health.

(b) Meet the age requirement for ICM, which is the day after the maternity cycle (defined in WAC 182-533-0315) ends, through the last day of the month of the infant's first birthday.

(c) Reside with at least one parent who provides the infant's day-to-day care and is:

(i) The infant's natural or adoptive parent(s);

(ii) A person other than a foster parent who has been granted legal custody of the infant; or

(iii) A person who is legally obligated to support the infant.

(d) Have a parent(s) who needs assistance in accessing medical, social, educational and/or other services to meet the infant's basic health and safety needs.

(e) Not be receiving any case management services funded through Title XIX medicaid that duplicate ICM services.

(2) Clients who meet the eligibility criteria and are enrolled in a medicaid agency-contracted managed care organization (MCO) are eligible for ICM services outside their plan.

~~(3) ((If the infant's mother becomes pregnant during the ICM eligibility period and she is eligible for maternity support services (MSS), the infant and the infant's mother are no longer eligible to receive ICM services.~~

~~(4))~~ Clients who do not agree with an eligibility decision by the medicaid agency for ICM have a right to a fair hearing under chapter 182-526 WAC.

AMENDATORY SECTION (Amending WSR 12-01-097, filed 12/20/11, effective 1/20/12)

**WAC 182-533-0390 Childbirth education (CBE) classes.**

(1) Purpose. The purpose of childbirth education (CBE) classes is to help prepare the client and ~~((her))~~ the client's support person(s):

(a) For the physiological, emotional, and psychological changes experienced during and after pregnancy;

(b) To develop self-advocacy skills;

(c) To increase knowledge about and access to local community resources;

(d) To improve parenting skills; and

(e) To improve the likelihood of positive birth outcomes.

(2) Definitions. The definitions in chapter 182-500 WAC, ~~((medi- al))~~ medical assistance definitions, and WAC 182-533-0315, maternity support services definitions, also apply to this section.

(3) Client eligibility. To be eligible for CBE classes, a client must be:

(a) Pregnant; and

(b) Covered under one of the medical assistance programs described in WAC 182-533-0320 (1)(a)(i) and (iv).

(4) Provider requirements. To be paid for providing CBE classes to eligible clients, an approved instructor must:

(a) Have a core provider agreement on file with the health care authority (the agency);

(b) Ensure that individuals providing CBE classes have credentials and/or certification as outlined in the agency's current published billing instructions;

(c) Deliver CBE classes in a series of group sessions; and

(d) Provide curriculum containing topics outlined in the agency's CBE curriculum checklist found in the agency's current published billing instructions. Topics include, but are not limited to:

(i) Pregnancy;

(ii) Labor and birth;

(iii) Newborns; and

(iv) Family adjustment.

(5) Documentation. Providers must:

(a) Follow the health care record requirements found in WAC 182-502-0020; and

(b) Maintain the following additional documentation:

(i) An original signed copy of each client's Freedom of Choice/Consent for Services form;

(ii) A client sign-in sheet for each class; and

(iii) Names and ProviderOne Client ID numbers of eligible clients attending CBE classes and the date(s) they participated in each CBE class.

(6) Coverage.

(a) The agency covers one CBE class series per client, per pregnancy. The client must attend at least one CBE session for the provider to be paid.

(b) CBE classes must include a minimum of (~~eight~~) six hours of instruction and are subject to the restrictions and limitations in this section and other applicable WAC.

(7) Payment. The agency pays for the CBE classes described in subsection (6) of this section on a fee-for-service basis subject to the following:

(a) CBE must:

(i) Include all classes, core materials, publications, and educational materials provided throughout the class series. Clients must receive the same materials as are offered to other attendees; and

(ii) Be billed according to the agency's current published billing instructions.

(b) The provider must accept the agency's fee as payment in full for classes provided to a client in accordance with 42 C.F.R. § 447.15.