



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: May 08, 2025

TIME: 11:06 AM

WSR 25-11-007

Agency: Health Care Authority

Effective date of rule:

Permanent Rules

- ☐ 31 days after filing.
☒ Other (specify) July 1, 2025 (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: Under Washington's Medicaid Transformation Project 2.0 in accordance with Section 1115(a) of the Social Security Act, HCA is amending these sections to allow eligibility for reentry services before the beneficiary's expected date of release.

Citation of rules affected by this order:

New:
Repealed:
Amended: 182-503-0010, 182-503-0070, 182-503-0505
Suspended:

Statutory authority for adoption: RCW 41.05.021, 41.05.160, and 71.24.715

Other authority: N/A

PERMANENT RULE (Including Expedited Rule Making)

Adopted under notice filed as WSR 25-08-065 on April 1, 2025 (date).

Describe any changes other than editing from proposed to adopted version:

Proposed/Adopted	WAC Subsection	Reason
WAC 182-503-0070(4)		
Proposed	Your Washington apple health coverage may not begin on the first day of the month if: (a) Subsection (3) of this section applies to you. In that case, your coverage would start on: (i) The first day of your hospital stay; or (ii) When you are determined to be eligible for prerelease reentry services; (b) You must meet a medically needy spenddown liability (see WAC 182-519-0110). In that case, your coverage would start on the day your spenddown is met; or (c) You are eligible under the Washington apple health alien emergency medical program (see WAC 182-507-0115). In that case, your coverage would start on the day your emergent hospital stay begins.	The word "Washington" in front of "apple health" in the intro of subsection (4) and in subsection (4)(c) is unnecessary.
Adopted	Your apple health coverage may not begin on the first day of the month if: (a) Subsection (3) of this section applies to you. In that case, your coverage would start on: (i) The first day of your hospital stay; or (ii) When you are determined to be eligible for prerelease reentry services;	

(b) You must meet a medically needy spenddown liability (see WAC 182-519-0110). In that case, your coverage would start on the day your spenddown is met; or
(c) You are eligible under the apple health alien emergency medical program (see WAC 182-507-0115). In that case, your coverage would start on the day your emergent hospital stay begins.

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	<u>3</u>	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>3</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>3</u>	Repealed	_____

Date Adopted: May 8, 2025

Name: Wendy Barcus

Title: HCA Rules Coordinator

Signature:



AMENDATORY SECTION (Amending WSR 20-01-117, filed 12/16/19, effective 1/16/20)

WAC 182-503-0010 Washington apple health—Who may apply. (1)

You may apply for Washington apple health for yourself.

(2) You may apply for apple health for another person if you are:

(a) A legal guardian;

(b) An authorized representative (as described in WAC 182-503-0130);

(c) A parent or caretaker relative of a child age 18 or younger;

(d) A tax filer applying for a tax dependent;

(e) A spouse; or

(f) A person applying for someone who is unable to apply on their own due to a ~~((medical))~~ health condition and who ~~((is in need of))~~ needs long-term care services.

(3) If you reside in an institution of mental diseases (as defined in WAC 182-500-0050(1)) or a public institution (as defined in WAC 182-500-0050(4)), including a Washington state department of corrections facility, city~~((, tribal))~~ or county jail, tribal jail, juvenile confinement facility, or secure community transition ~~((facility))~~ or total confinement facility (as defined in RCW 71.09.020), you, your representative, or the facility may apply for you to get the apple health coverage for which you are determined eligible.

(4) You are automatically enrolled in apple health and do not need to ~~((submit an application))~~ apply if you are a:

(a) Supplemental security income (SSI) recipient;

(b) Person deemed to be an SSI recipient under 1619(b) of the SSA;

(c) Newborn as described in WAC 182-505-0210; or

(d) Child in foster care placement as described in WAC 182-505-0211.

(5) You are the primary applicant on an application if you complete and sign the application on behalf of your household.

(6) If you are an SSI recipient, then you, your authorized representative as defined in WAC 182-500-0010, or another person applying on your behalf as described in subsection (2) of this section, must turn in a signed application to apply for long-term care services as described in WAC 182-513-1315.

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

WAC 182-503-0070 Washington apple health ~~((WAH))~~—When coverage begins. (1)

Your Washington apple health ~~((WAH))~~ coverage starts on the first day of the month you applied for and we decided you are eligible to receive coverage, unless one of the exceptions in subsection (4) of this section applies to you.

(2) Sometimes we can start your coverage up to three months before the month you applied (see WAC 182-504-0005).

(3) If you are confined or incarcerated as described in WAC 182-503-0010, your coverage cannot start before the day you are discharged, except when:

(a) You are hospitalized during your confinement(~~(+)~~) and (~~(b)~~) the hospital requires you to stay overnight; or

(b) You are determined to be eligible for prerelease reentry services.

(4) Your (~~(WAH)~~) apple health coverage may not begin on the first day of the month if:

(a) Subsection (3) of this section applies to you. In that case, your coverage would start on:

(i) The first day of your hospital stay; or

(ii) When you are determined to be eligible for prerelease reentry services;

(b) You must meet a medically needy spenddown liability (see WAC 182-519-0110). In that case, your coverage would start on the day your spenddown is met; or

(c) You are eligible under the (~~(WAH)~~) apple health alien emergency medical program (see WAC 182-507-0115). In that case, your coverage would start on the day your emergent hospital stay begins.

(5) For long-term care, the date your services start is described in WAC 388-106-0045.

AMENDATORY SECTION (Amending WSR 19-08-029, filed 3/27/19, effective 4/27/19)

WAC 182-503-0505 Washington apple health—General eligibility requirements. (1) When you apply for Washington apple health programs established under chapter 74.09 RCW, you must meet the eligibility criteria in chapters 182-500 through 182-527 WAC.

(2) When you apply for apple health, we first consider you for federally funded or federally matched programs. We consider you for state-funded programs after we have determined that you are ineligible for federally funded and federally matched programs.

(3) Unless otherwise specified in a program-specific WAC, the eligibility criteria for each program are as follows:

(a) Age (WAC 182-503-0050);

(b) Residence in Washington state (WAC 182-503-0520 and 182-503-0525);

(c) Citizenship or immigration status in the United States (WAC 182-503-0535);

(d) Possession of a valid Social Security account number (WAC 182-503-0515);

(e) Assignment of medical support rights to the state of Washington (WAC 182-503-0540);

(f) Application for medicare and enrollment into medicare's prescription drug program if:

(i) You are likely entitled to medicare; and

(ii) We have authority to pay medicare cost sharing as described in chapter 182-517 WAC.

(g) If your eligibility is not based on modified adjusted gross income (MAGI) methodology, your countable resources must be within specific program limits (chapters 182-512, 182-513, 182-515, 182-517, and 182-519 WAC); and

(h) Countable income within program limits:

(i) For MAGI-based programs, see WAC 182-505-0100;

(ii) For the refugee program, see WAC 182-507-0130;

(iii) For the medical care services program, see WAC 182-508-0005;

(iv) For the health care for workers with disabilities (HWD) program, see WAC 182-511-1000;

(v) For the SSI-related program, see WAC 182-512-0010;

(vi) For long-term care programs, see chapters 182-513 and 182-515 WAC;

(vii) For medicare savings programs, see WAC 182-517-0100; and

(viii) For the medically needy program, see WAC 182-519-0050.

(4) In addition to the general eligibility requirements in subsection (3) of this section, each program has specific eligibility requirements as described in applicable WAC.

(5) If you are in a public institution, including a correctional facility, you are not eligible for full scope apple health coverage, except in the following situations:

(a) If you are age 21 or younger or age 65 or older and are a patient in an institution for mental disease (see WAC 182-513-1317(5)); or

(b) You receive inpatient hospital services outside of the public institution or correctional facility.

(6) We limit coverage for people who become residents in a public institution, under subsection (5) of this section, until they are determined to be eligible for prerelease reentry services or released.

(7) If you are terminated from SSI or lose eligibility for categorically needy (CN) or alternative benefits plan (ABP) coverage, you receive coverage under the apple health program with the highest scope of care for which you may be eligible while we determine your eligibility for other health care programs. See WAC 182-504-0125.