



# EXPEDITED RULE MAKING

## CR-105 (December 2017) (Implements RCW 34.05.353)

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STATE OF WASHINGTON  
FILED

DATE: October 07, 2019

TIME: 2:46 PM

WSR 19-21-030

**Agency:** Health Care Authority

**Title of rule and other identifying information:** (describe subject)  
WAC 182-533-0600—Planned home births and births in birthing centers

**Purpose of the proposal and its anticipated effects, including any changes in existing rules:**

The agency is revising this section to correct a cross-reference in subsection (3)(a)(i).  
The reference to the Department of Health (DOH) Chapter 246-349 WAC does not exist.  
This subsection should reference DOH Chapter 246-329 WAC.

**Reasons supporting proposal:** See purpose

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

**Statute being implemented:** RCW 41.05.021, 41.05.160

**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:

**Name of proponent:** (person or organization) Health Care Authority

Private  
 Public  
 Governmental

**Name of agency personnel responsible for:**

	Name	Office Location	Phone
Drafting:	Michael Williams	PO Box 42716 Olympia WA, 98504-2716	(360) 725-1346
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**Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:** N/A

**Expedited Adoption - Which of the following criteria was used by the agency to file this notice:**

- Relates only to internal governmental operations that are not subject to violation by a person;
- Adopts or incorporates by reference without material change federal statutes or regulations, Washington state statutes, rules of other Washington state agencies, shoreline master programs other than those programs governing shorelines of statewide significance, or, as referenced by Washington state law, national consensus codes that generally establish industry standards, if the material adopted or incorporated regulates the same subject matter and conduct as the adopting or incorporating rule;
- Corrects typographical errors, make address or name changes, or clarify language of a rule without changing its effect;
- Content is explicitly and specifically dictated by statute;
- Have been the subject of negotiated rule making, pilot rule making, or some other process that involved substantial participation by interested parties before the development of the proposed rule; or
- Is being amended after a review under RCW 34.05.328.

**Expedited Repeal - Which of the following criteria was used by the agency to file notice:**

- The statute on which the rule is based has been repealed and has not been replaced by another statute providing statutory authority for the rule;
- The statute on which the rule is based has been declared unconstitutional by a court with jurisdiction, there is a final judgment, and no statute has been enacted to replace the unconstitutional statute;
- The rule is no longer necessary because of changed circumstances; or
- Other rules of the agency or of another agency govern the same activity as the rule, making the rule redundant.

**Explanation of the reason the agency believes the expedited rule-making process is appropriate pursuant to RCW 34.05.353(4):** Corrects typographical error

**NOTICE**

**THIS RULE IS BEING PROPOSED UNDER AN EXPEDITED RULE-MAKING PROCESS THAT WILL ELIMINATE THE NEED FOR THE AGENCY TO HOLD PUBLIC HEARINGS, PREPARE A SMALL BUSINESS ECONOMIC IMPACT STATEMENT, OR PROVIDE RESPONSES TO THE CRITERIA FOR A SIGNIFICANT LEGISLATIVE RULE. IF YOU OBJECT TO THIS USE OF THE EXPEDITED RULE-MAKING PROCESS, YOU MUST EXPRESS YOUR OBJECTIONS IN WRITING AND THEY MUST BE SENT TO**

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**AND RECEIVED BY** (date) December 24, 2019\_

**Date:** October 7, 2019

**Name:** Wendy Barcus

**Title:** Rules Coordinator

**Signature:**



**WAC 182-533-0600 Planned home births and births in birthing centers.** (1) **Client eligibility.** The medicaid agency covers planned home births and births in birthing centers for clients who choose to give birth at home or in an agency-approved birthing center and:

(a) Are eligible for the alternative benefit package under WAC 182-501-0060, categorically needy or medically needy scope of care under WAC 182-533-0400(2);

(b) Have an agency-approved medical provider who has accepted responsibility for the planned home birth or birth in birthing center under this section;

(c) Are expected to deliver the child vaginally and without complication (i.e., with a low risk of adverse birth outcome); and

(d) Pass the agency's risk screening criteria. The agency provides these risk-screening criteria to qualified medical services providers.

(2) **Qualified providers.** Only the following provider types may be reimbursed for planned home births and births in birthing centers:

(a) Physicians licensed under chapters 18.57 or 18.71 RCW;

(b) Nurse midwives licensed under chapter 18.79 RCW; and

(c) Midwives licensed under chapter 18.50 RCW.

(3) **Birthing center requirements.**

(a) Each participating birthing center must:

(i) Be licensed as a childbirth center by the department of health (DOH) under chapter ((~~246-349~~) 246-329 WAC;

(ii) Be specifically approved by the agency to provide birthing center services;

(iii) Have a valid core provider agreement with the agency; and

(iv) Maintain standards of care required by DOH for licensure.

(b) The agency suspends or terminates the core provider agreement of a birthing center if it fails to maintain DOH standards cited in (a) of this subsection.

(4) **Home birth or birthing center providers.** Home birth or birthing center providers must:

(a) Obtain from the client a signed consent form in advance of the birth;

(b) Follow the agency's risk screening criteria and consult with, or refer the client or newborn to, a physician or hospital when medically appropriate;

(c) Have current, written, and appropriate plans for consultation, emergency transfer and transport of a client or newborn to a hospital;

(d) Make appropriate referral of the newborn for pediatric care and medically necessary follow-up care;

(e) Inform parents of required prophylactic eye ointment and newborn screening tests for heritable or metabolic disorders, and congenital heart defects, and send the newborn's blood sample to the DOH for testing. Parents may refuse these services for religious reasons under RCW 70.83.020. The provider must obtain the signature from the parent(s) on:

(i) The reverse side of the screening card to document refusal of screenings for heritable or metabolic disorders; and

(ii) A waiver form to document refusal of prophylactic eye ointment or a screening for congenital heart defects;

- (f) Inform parents of the benefits and risks of Vitamin K injections for newborns; and
- (g) Have evidence of current cardiopulmonary resuscitation (CPR) training for:
  - (i) Adult CPR; and
  - (ii) Neonatal resuscitation.
- (5) **Planned home birth providers.** Planned home birth providers must:
  - (a) Provide medically necessary equipment, supplies, and medications for each client;
  - (b) Have arrangements for twenty-four hour per day coverage;
  - (c) Have documentation of contact with local area emergency medical services to determine the level of response capability in the area; and
  - (d) Participate in a formal, state-sanctioned, quality assurance improvement program or professional liability review process.
- (6) **Limitations.** The agency does not cover planned home births or births in birthing centers for women identified with any of the following conditions:
  - (a) Previous cesarean section;
  - (b) Current alcohol or drug addiction or abuse;
  - (c) Significant hematological disorders or coagulopathies;
  - (d) History of deep venous thrombosis or pulmonary embolism;
  - (e) Cardiovascular disease causing functional impairment;
  - (f) Chronic hypertension;
  - (g) Significant endocrine disorders including preexisting diabetes (type I or type II);
  - (h) Hepatic disorders including uncontrolled intrahepatic cholestasis of pregnancy or abnormal liver function tests;
  - (i) Isoimmunization, including evidence of Rh sensitization or platelet sensitization;
  - (j) Neurologic disorders or active seizure disorders;
  - (k) Pulmonary disease;
  - (l) Renal disease;
  - (m) Collagen-vascular diseases;
  - (n) Current severe psychiatric illness;
  - (o) Cancer affecting the female reproductive system;
  - (p) Multiple gestation;
  - (q) Breech presentation in labor with delivery not imminent; or
  - (r) Other significant deviations from normal as assessed by the provider.