



RULE-MAKING ORDER

CR-103P (May 2009)
(Implements RCW 34.05.360)

Agency: Health Care Authority, Washington Apple Health

Permanent Rule Only

Effective date of rule:

Permanent Rules

31 days after filing.

Other (specify) _____ (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 amending WAC 182-550-2531 to strike the requirement of an agency facility site visit in order to qualify as an agency-approved acute physical medicine and rehabilitation (PM&R) hospital. The agency is amending WAC 182-550-2551 as follows: reorganizing the section to clarify that acute PM&R services may be authorized when all criteria in the section are met; adding acute inflammatory demyelinating polyneuropathy (AIDP) to the list of conditions that qualifies clients for acute PM&R services; and adding language that says the agency will evaluate requests per WAC 182-501-0165 for acute PM&R services that do not meet the criteria in the section. The agency also made housekeeping changes.

Citation of existing rules affected by this order:

Repealed:

Amended: 182-550-2531, 182-550-2551

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 17-07-031 on March 8, 2017.

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

Added "for medical necessity" to WAC 182-550-2551(2) as follows:

(2) If the client does not meet the clinical criteria set forth in this section, the agency will evaluate the request for medical necessity according to the process in WAC 182-501-0165.

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

Name: _____ phone () _____
Address: _____ fax () _____
e-mail _____

Date adopted: May 2, 2017

NAME (TYPE OR PRINT)
Wendy Barcus

SIGNATURE

TITLE
HCA Rules Coordinator

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: May 02, 2017

TIME: 10:07 AM

WSR 17-10-058

(COMPLETE REVERSE SIDE)

**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 in 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	_____

WAC 182-550-2531 Requirements for becoming an acute PM&R provider. (1) Before August 1, 2007, only an in-state or bordering city hospital may apply to become a medicaid agency-approved acute PM&R hospital. After July 31, 2007, an in-state, bordering city or critical border hospital may apply to become an agency-approved acute PM&R hospital. To apply, the agency requires the hospital provider to submit a letter of request to:

Acute PM&R Program Manager
(~~Division of Health Care Services~~
~~Health and Recovery Services Administration~~)
Clinical Quality and Care Transformation (COCT)
Medical and Dental Services
P.O. Box 45506
Olympia, WA 98504-5506

(2) A hospital that applies to become an agency-approved acute PM&R facility must provide the agency with documentation that confirms the facility is all the following:

(a) A medicare-certified hospital;
(b) Accredited by the joint commission on accreditation of health care organizations (JCAHO);

(c) Licensed by the department of health (DOH) as an acute care hospital as defined under WAC 246-310-010;

(d) Commission on accreditation of rehabilitation facilities (CARF) accredited as a comprehensive integrated inpatient rehabilitation program or as a pediatric family centered rehabilitation program, unless subsection (3) of this section applies;

(e) For dates of admission before July 1, 2007, contracted under the agency's selective contracting program, if in a selective contracting area, unless exempted from the requirements by the agency; and

(f) Operating per the standards set by DOH (excluding the certified rehabilitation registered nurse (CRRN) requirement) in either:

(i) WAC 246-976-800 Level I trauma rehabilitation designation; or
(ii) WAC 246-976-800 Level II trauma rehabilitation designation.

(3) A hospital not yet accredited by CARF:

(a) May apply for or be awarded a twelve-month conditional written approval by the agency if the facility:

(i) Provides the agency with documentation that it has started the process of obtaining full CARF accreditation; and

(ii) Is actively operating under CARF standards.

(b) Must obtain full CARF accreditation within twelve months of the agency's conditional approval date. If this requirement is not met, the agency sends a letter of notification to revoke the conditional approval.

(4) A hospital qualifies as an agency-approved acute PM&R hospital when:

(a) The hospital meets all the applicable requirements in this section; and

(b) ~~((The agency's clinical staff has conducted a facility site visit; and~~

(e)) The agency provides written notification that the hospital qualifies to be paid for providing acute PM&R services to eligible Washington apple health clients.

(5) The agency-approved acute PM&R hospitals must meet the general requirements in chapter 182-502 WAC Administration of medical programs—Providers.

WAC 182-550-2551 ((How a client qualifies for)) When the medic-aid agency authorizes acute PM&R services. (1) ~~((To qualify for)) Acute PM&R services((, a client must meet one of the conditions in subsection (2) of this section and have))~~ may be authorized when all of the following are met:

~~(a) ((Extensive or complex medical needs, nursing needs, and therapy needs; and~~

~~(b) A recent or new onset of a condition that causes an))~~ The client has all of the following:

(i) Extensive or complex medical needs;

(ii) Nursing needs; and

(iii) Therapy needs.

(b) The client has a new or recent significant impairment in two or more of the following areas:

(i) Mobility and strength;

(ii) Self-care/ADLs (activities of daily living);

(iii) Communication; or

(iv) Cognitive/perceptual functioning.

~~((2) To qualify for acute PM&R services, a client must meet the conditions in subsection (1) of this section and have))~~ (c) The client has a new or recent onset of one of the following conditions:

~~((a))~~ (i) Brain injury caused by trauma or disease.

~~((b))~~ (ii) Spinal cord injury resulting in:

~~((i))~~ (A) Quadriplegia; or

~~((ii))~~ (B) Paraplegia.

~~((c))~~ (iii) Extensive burns.

~~((d))~~ (iv) Bilateral limb loss.

~~((e))~~ (v) Stroke or aneurysm with resulting hemiplegia or cognitive deficits, including speech and swallowing deficits.

~~((f))~~ (vi) Multiple trauma (after the client is cleared to bear weight) with complicated orthopedic conditions and neurological deficits.

~~((g) Severe pressure ulcers after))~~ (vii) Skin flap surgery after severe pressure ulcer for a client who:

~~((i))~~ (A) Requires close observation by a surgeon; and

~~((ii))~~ (B) Is ready to mobilize or be upright in a chair.

(viii) Acute inflammatory demyelinating polyneuropathy (AIDP).

(2) If the client does not meet the clinical criteria set forth in this section, the agency will evaluate the request for medical necessity according to the process in WAC 182-501-0165.