



**STATE OF WASHINGTON
HEALTH CARE AUTHORITY**

626 8th Avenue, SE • P.O. Box 45502 • Olympia, Washington 98504-5502

March 19, 2026

Dear Tribal Leader:

SUBJECT: TRADITIONAL HEALTH CARE PRACTICES 1115 WAIVER NEXT STEPS

In accordance with Chapter 43.376 RCW, the Washington State Centennial Accord of 1989, and Executive Order 25-10 regarding collaboration with Indian Tribes in the development of policies, agreements, and program implementation that directly affect Indian Tribes, and the Tribal Consultation and Communication Policy of the Health Care Authority (HCA), the HCA seeks to inform and request input on the following matter.

Under the direction of Engrossed Substitute Senate Bill 5167, the enacted operating budget for the 2025 – 2027 biennium, Washington was seeking federal authority to provide Medicaid reimbursement to Tribes and Indian health care providers (IHCPs) for Traditional Health Care Practices (THCPs). This work was launched in August 2025 with a Dear Tribal Leader Letter inviting every Tribe and IHCP to identify a representative to participate in a workgroup which ran from September through December 2025.

The draft waiver application was presented at Consultation on January 9, 2026. Between then and now, the proposed Governor's budget and the Legislative Session brought up questions and concerns regarding the non-federal share of funding for this waiver. To discuss these concerns, HCA hosted a Roundtable on January 27, 2026, and March 4, 2026.

We are working on a plan to ensure we can come to agreement on a strategy to finance waiver services before we submit the application to the Centers for Medicare and Medicaid Services (CMS). The Health Care Authority (HCA) has been working to advance the application in alignment with the Governor's Office and the Office of Financial Management (OFM). This includes consulting with Tribes regarding the potential impact of the waiver on the State's operating budget. Presenting these scenarios to Tribes and Indian Health Care Providers (IHCPs) is part of the process, which will culminate with a report to the Governor and the Legislature by September of this year.

As part of a Section 1115 waiver application, states must describe to CMS who will receive services and estimate the expected enrollment and costs so CMS can assess the financial impact. See, e.g., 42 C.F.R. § 431.412(a). Because CMS requires projections of enrollment and expenditures as part of the application, HCA must determine whether services under the waiver will be available to Urban Indian health programs. This will inform the development of the required financial model for THCP services. These decisions affect both the number of people who may receive services and how those services are reimbursed, which together inform the budget and cost forecasts that CMS requires. Should these variables change significantly upon finance negotiations after CMS approval, it is likely that CMS will ask HCA to resubmit the entire application, and the federal negotiation process will start from the beginning. This will prolong our abilities to implement THCP.

Options were offered at the last Roundtable and HCA is open to other ideas and recommendations from Tribal leaders on how to develop the financial model. Any impact to the state budget will need to be reviewed and authorized by the Governor’s Office, OFM, and the fiscal committees of the Legislature for appropriation to be authorized in the next budget. Completing this consultation and reporting next steps will help ensure that the application can move forward, avoid the potential of a resubmission to CMS, and provide the Legislature with a financing model to fully consider THCP spending authorization.

To address the concerns shared by Tribal leaders, HCA is inviting all Tribal Chairs and their delegates to another roundtable on March 30, 2026, from 2 p.m. to 4 p.m., to work on a plan moving forward together to successfully submit the THCP waiver. During the upcoming roundtable, Tribes and IHCPs are encouraged to share any concerns and provide ideas for collective action steps to advance finance modelling and waiver submission together. Should we progress to a decision point, we would schedule and hold a Consultation, where the HCA proposes to collaborate on a workplan for submission of the waiver application, including the funding mechanisms. HCA is proposing including representation from the Governor’s Office, the OFM and the Governor’s Office of Indian Affairs (GOIA) in all future meetings on this topic.

The HCA follow-up Roundtable and Consultation meeting information follows so that we can work together on how we will proceed.

	Date and Time	Teams and call-in information
Roundtable	<p>March 30, 2026 2 p.m. - 4 p.m.</p> <p>Health Care Authority Cherry Street Plaza Sue Crystal Conference Room 626 8th Ave. SE Olympia, WA 98501</p>	<p>Join: https://teams.microsoft.com/meet/25698365612012?join=O1rfKM7WCcxBUlaM81 Meeting ID: 256 983 656 120 12 Passcode: ma2Ry74Z</p> <p>Dial in by phone +1 564-999-2000,,315029114# United States, Olympia (833) 322-1218,,315029114# United States (Toll-free) Phone conference ID: 315 029 114#</p>
Consultation	TBD	

Please contact Aren Sparck, Tribal Affairs Administrator, by email at aren.sparck@hca.wa.gov if you have any Tribal affairs related questions or concerns.

Please forward this information to any interested party.

Sincerely,



Aren Sparck

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Tribal Affairs Administrator
Office of Tribal Affairs

By email

cc: Ryan Moran, Director, Office of the Director (*OD*), Health Care Authority (*HCA*)
Christine Winn, Deputy Director, OTA, HCA
Lena Nachand, Tribal Liaison-Medicaid Transformation, OTA, HCA
Annette Squetimkin-Anquoe, Health Care Program Manager, OTA, HCA