**Chapter 182-505 WAC**

**FAMILY, CHILDREN, PREGNANCY AND ADULT MEDICAL PROGRAMS**

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**Disposition of Sections Formerly Codified in this Chapter**

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**WAC 182-505-0100**

Washington apple health—Monthly income standards based on the federal poverty level (FPL). (1) Each year, the federal government publishes new federal poverty level (FPL) income standards in the Federal Register found at http://aspe.hhs.gov/poverty/index.shtml. The income standards for the following Washington apple health (WAH) programs change on the first day of April every year based on the new FPL:

- WAH for parents and caretaker relatives up to fifty percent of FPL; the earned income increases above this limit are the only persons who may be eligible for the WAH transitional medical program described in WAC 182-523-0100;
- (b) Modified adjusted gross income (MAGI)-based WAH for adults up to one hundred thirty-three percent of FPL;
(c) WAH for pregnant women up to one hundred ninety-three percent of FPL;
(d) WAH for children up to two hundred ten percent of FPL; and
(e) Premium-based coverage under WAH for children over two hundred ten percent of FPL, but not over three hundred twelve percent of FPL.

(2) The agency uses the FPL income standards to determine the premium amount, if any, for a child.

WAC 182-505-0115 Washington apple health—Eligibility for pregnant women. (1) A pregnant woman is eligible for the Washington apple health (WAH) for pregnant women program if she:
(a) Meets citizenship or immigration status under WAC 182-503-0535;
(b) Meets Social Security number requirements under WAC 182-503-0115;
(c) Meets Washington state residency requirements under WAC 182-503-0520 and 182-503-0525; and
(d) Has countable income at or below the limit described in:
(i) WAC 182-505-0100 to be eligible for categorically needy (CN) coverage; or
(ii) WAC 182-505-0100 to be eligible for medically needy (MN) coverage.

(2) A noncitizen pregnant woman who does not meet the requirements in subsection (1)(a) or (b) of this section to be eligible for WAH and receives either CN or MN coverage based upon her countable income as described in subsection (1)(d) of this section.

(3) The assignment of medical support rights as described in WAC 182-503-0540 do not apply to pregnant women.

(4) A woman who was eligible for and received coverage under any WAH program on the last day of pregnancy is eligible for extended medical coverage for postpartum care for a minimum of sixty days from the end of her pregnancy. This includes women who meet an MN spenddown liability with expenses incurred no later than the date the pregnancy ends. This extension continues through the end of the month in which the sixtieth day falls.

(5) All women approved for WAH pregnancy coverage at any time are eligible for family planning services for twelve months after the pregnancy ends.

WAC 182-505-0117 Washington apple health—Eligibility for pregnant minors. (1) For the purposes of this rule, “minor” means a person under the age of nineteen.

(2) A pregnant minor who meets Washington state residency requirements under WAC 182-503-0520 and 182-503-0525 is eligible for the Washington apple health (WAH) for kids program.

(3) The medical assistance unit (MAU) of a pregnant minor is the pregnant minor.

(4) There are no income standards and no resource tests for a pregnant minor to be eligible for WAH for kids.

(5) To ensure reimbursement from the U.S. Department of Health and Human Services, every pregnant minor applicant for WAH for kids must provide her Social Security number unless she is exempt under WAC 182-503-0515 and provide her citizenship or immigration status. The immigration status of a pregnant minor who is an undocumented alien (see WAC 182-503-0530) will not be disclosed to any third party.

(6) The assignment of rights as described in WAC 182-503-0540 does not apply to pregnant minors.

(7) A pregnant minor covered by the WAH for kids program will have a one year certification period unless she has her nineteenth birthday during her pregnancy, at which time she will be automatically enrolled in the WAH for pregnant women program. Under the WAH for pregnant women program, her coverage will continue through the end of her pregnancy and she will be eligible for extended medical coverage for postpartum care through the end of the month of the sixtieth day after the end of her pregnancy.

WAC 182-505-0120 Washington apple health breast and cervical cancer treatment program for women—Client eligibility. (1) Effective April 1, 2014, a woman is eligible for categorically needy (CN) coverage under the Wash-
cington apple health (WAH) breast and cervical cancer treatment program (BCCTP) only when she:

(a) Has been screened for breast or cervical cancer under the department of health’s breast, cervical, and colon health program (BCCHP);

(b) Requires treatment for breast cancer, cervical cancer, or a related precancerous condition;

(c) Is under sixty-five years of age;

(d) Is not eligible for other WAH-CN coverage, including coverage under the MAGI-based adult group;

(e) Is uninsured or does not otherwise have creditable coverage;

(f) Meets residency requirements under WAC 182-503-0520;

(g) Meets Social Security number requirements under WAC 182-503-0515;

(h) Is a U.S. citizen, U.S. national, qualifying American Indian born abroad, or qualified alien under WAC 182-503-0535; and

(i) Meets the income standard set by the BCCHP in DOH form 342-031.

(2) The certification period for breast and cervical cancer treatment covered under this section is twelve months, as provided in WAC 182-504-0015. To remain continuously enrolled, the client must renew her eligibility before the certification period ends. Eligibility for BCCTP coverage under subsection (1)(b) of this section continues throughout the course of treatment as certified by the BCCHP. Retroactive coverage may be available under WAC 182-504-0005.

[Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 15-17-056, § 388-462-0020, filed 12/19/01, effective 1/19/02.]

WAC 182-505-0210 Washington apple health—Eligibility for children. (1) Unless otherwise stated in this section, a child is a person age eighteen or younger (including the month the child turns nineteen). To be eligible for one of the Washington apple health (WAH) for kids programs, a child must:

(a) Be a resident of Washington state under WAC 182-503-0520 and 182-503-0525;

(b) Provide a Social Security number (SSN) under WAC 182-503-0515 unless exempt; and

(c) Meet any additional requirements listed for the specific program.

(2) Children younger than age one are eligible for WAH categorically needy (CN) coverage, without a new application, when they are born to a mother who is eligible for WAH:

(a) On the date of the newborn’s birth, including a retroactive eligibility determination; or

(b) Based on meeting a medically needy (MN) spenddown liability with expenses incurred by the date of the newborn’s birth.

(3) Children are eligible for WAH at no cost when they:

(a) Have countable family income that is no more than two hundred ten percent of FPL under WAC 182-505-0100;

(b) Are currently eligible for supplemental security income (SSI); or

(c) Received SSI payments in August 1996 and would continue to be eligible for those payments except for the August 1996 passage of amendments to federal disability definitions.

(4) Children are eligible for premium-based WAH under WAC 182-505-0215 when they:

(a) Have countable family income that is not more than three hundred twelve percent of FPL under WAC 182-505-0100;

(b) Do not have other creditable health insurance under WAC 182-500-0020; and

(c) Pay the required monthly premiums under WAC 182-505-0225.

(5) Children are eligible for WAH home and community based waiver programs under chapter 182-515 WAC when they:

(a) Meet citizenship or immigration status under WAC 182-503-0535;

(b) Meet SSI-related eligibility requirements under chapter 182-512 WAC; and

(c) Meet program-specific age requirements.

(6) Children are eligible for the WAH long-term care program when they meet the institutional program rules under chapter 182-513 or 182-514 WAC, and either:

(a) Reside or are expected to reside in a medical institution, intermediate care facility for the intellectually disabled (ICF/ID), hospice care center, or nursing home for thirty days or longer; or

(b) Reside or are expected to reside in an institution for mental diseases (IMD) (as defined in WAC 182-500-0050 (1)) or inpatient psychiatric facility:

(i) For ninety days or longer and are age seventeen or younger;

(ii) For thirty days or longer and are age eighteen through twenty-one.

(7) Children are eligible for the WAH-MN program under WAC 182-519-0100 when they:

(a) Meet citizenship or immigrant status under WAC 182-503-0535;

(b) Have countable family income that exceeds three hundred twelve percent of FPL under WAC 182-505-0100; or

(c) Have countable family income that is more than two hundred ten percent of FPL, but are not eligible for premium-based WAH as described in subsection (4) of this section because of creditable coverage; and

(d) Meet a spenddown liability under WAC 182-519-0110, if required.

(8) Children are eligible for WAH SSI-related programs under chapter 182-512 WAC when they:

(a) Meet citizenship or immigration status under WAC 182-503-0535;

(b) Meet SSI-related eligibility under chapter 182-512 WAC; and

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(c) Meet an MN spenddown liability under WAC 182-519-0110, if required.

(9) Children who are not eligible for WAH under subsections (5) through (8) of this section because of their immigration status, are eligible for the WAH alien emergency medical program if they:
(a) Meet the eligibility requirements of WAC 182-507-0110;
(b) Have countable family income:
(i) That exceeds three hundred twelve percent of FPL under WAC 182-505-0100; or
(ii) That is more than two hundred ten percent of FPL, but they are not eligible for premium-based WAH, as described in subsection (4) of this section because of creditable coverage; and
(c) Meet a spenddown liability under WAC 182-519-0110, if required.

(10) Children who are in foster care or receive subsidized adoption services are eligible for coverage under the WAH foster care program described in WAC 182-505-0211.

(11) Children who are incarcerated in a public institution (as defined in WAC 182-500-0050(4)) that is not an IMD, are not eligible for any WAH program unless they are receiving inpatient hospital services outside of the public institution.

(12) Children who reside in a public institution that is an IMD are eligible for WAH under this section but are not eligible to receive inpatient hospital services outside of the IMD unless they are unconditionally discharged from the IMD before receiving the services.

WAH 182-505-0211 Washington apple health (WAH)—Foster care. (1) A person under the age of nineteen is eligible for Washington apple health (WAH) when he or she:
(a) Is in foster care under the legal responsibility of the state, or a federally recognized tribe located within the state; and
(b) Meets Washington residency requirements as described in WAC 182-503-0520 or 182-503-0525.

(2) A person under the age of twenty-one is eligible for WAH when he or she meets:
(a) Washington residency requirements as described in WAC 182-503-0520 or 182-503-0525;
(b) Citizenship or immigration status requirements as described in WAC 182-503-0535;
(c) Social Security number requirements as described in WAC 182-503-0515; and
(d) One of the following requirements:
(i) Is in foster care, or is eligible for continued foster care services as determined by the children's administration, under the legal responsibility of the state, or a federally recognized tribe located within the state; or
(ii) Receives subsidized adoption services through the children's administration; or
(iii) Is enrolled in the unaccompanied refugee minor (URM) program as authorized by the office of refugee and immigrant assistance (ORIA); or
(iv) Is living in a group home operated or contracted by the juvenile rehabilitation administration; or
(v) Is placed in a foster home or group home through the voluntary placement waiver program managed by the division of developmental disabilities.

(3) A person age nineteen or older but under age twenty-six is eligible for WAH when he or she:
(a) Was both in foster care under the legal responsibility of the state or a federally recognized tribe located within the state and enrolled in Medicaid:
(i) On his or her eighteenth birthday; or
(ii) At such higher age at which foster care assistance ended; and
(b) Meets residency, Social Security number, and citizenship requirements as described in subsection (2) of this section.

(4) A person described in subsections (1) through (3) of this section is not eligible for WAH if he or she is confined to a public institution as defined in WAC 182-500-0050, except:
(a) If he or she is under age twenty-one; and
(b) Resides in an institution for mental disease (IMD); and
(c) Meets the institutional status requirements in WAC 182-505-0240.

WAC 182-505-0215 Washington apple health—Premium-based children's program—Purpose and scope. The medicaid agency administers the programs included in Washington apple health (WAH) for kids that provide premium-based coverage through a combination of state and federal funding sources as described below:

(1) Federally matched health care coverage as authorized by Title XXI of the Social Security Act state children's health insurance program (CHIP) and RCW 74.09.450 for citizen and federally qualified immigrant children whose family...
income is above two hundred ten percent of the federal poverty level (FPL) but is not above three hundred twelve percent FPL.

(2) State funded health care coverage for children with family income above two hundred ten percent FPL, but not above three hundred twelve percent FPL, who are ineligible for federally matched health care coverage due to immigration status.

[Statutory Authority: RCW 41.05.021, 41.05.160, Public Law 111-148, 42 C.F.R. § 431, 435, and 457, and 45 C.F.R. § 155. WSR 14-16-052, § 182-505-0215, filed 7/29/14, effective 8/29/14. WSR 12-13-056, recodified as § 182-505-0215, filed 6/15/12, effective 7/1/12. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.402, 74.09.470, and 2008 session law. WSR 09-07-086, § 388-542-0010, filed 3/17/09, effective 4/17/09. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.530, 74.09-700, and 2007 c 5. WSR 08-05-018, § 388-542-0010, filed 2/12/08, effective 3/14/08. Statutory Authority: RCW 74.08.090, 74.09.050, and Title XXI of the Social Security Act. WSR 06-15-134, § 388-542-0010, filed 7/19/06, effective 8/19/06. Statutory Authority: RCW 74.08.090, 74.09.510, 74.09-522, 74.09.450, and 2004 c 276. WSR 04-16-064, § 388-542-0010, filed 7/30/04, effective 8/30/04.]

WAC 182-505-0225 Premium requirements for premium-based health care coverage under programs included in apple health for kids. (1) For the purposes of this chapter, "premium" means an amount paid for health care coverage under programs included in apple health for kids as described in WAC 388-505-0210 (4) and (5).

(2) Payment of a premium is required as a condition of eligibility for premium-based coverage under programs included in apple health for kids, as described in WAC 388-505-0210 (4) and (5), unless the child is:

(a) Pregnant; or

(b) An American Indian or Alaska native.

(3) The premium requirement begins the first of the month following the determination of eligibility. There is no premium requirement for medical coverage received in a month or months before the determination of eligibility.

(4) The premium amount for the assistance unit (AU) is based on the net countable income as described in WAC 388-450-0210 and the number of children in the AU. If the household includes more than one AU, the premium amount billed for the AUs may be different amounts.

(5) The premium amount is limited to a monthly maximum of two premiums for households with two or more children.

(6) The premium amount for each U.S. citizen or lawfully present alien child described in WAC 388-505-0210(4) is:

(a) Twenty dollars per month per child for households with income above two hundred percent FPL, but not above two hundred and fifty percent FPL; or

(b) Thirty dollars per month per child for households with income above two hundred and fifty percent FPL, but not above three hundred percent FPL.

(7) The premium amount for each noncitizen child described in WAC 388-505-0210(5) who is not a lawfully present qualified or nonqualified alien is no greater than the average of the state-share of the per capita cost for state-funded children's health coverage. The premium amount is set every two years, based on the forecasted per capita costs for that period.

(8) All children in an AU are ineligible for health care coverage when the head of household fails to pay required premium payments for three consecutive months.

(9) When the agency or the agency's designee terminates the medical coverage of a child due to nonpayment of premiums, the child's eligibility is restored only when the:

(a) Past due premiums are paid in full prior to the end of the certification period; or

(b) The child becomes eligible for coverage under a non-premium-based CN health care program.

(10) The agency or the agency's designee writes off past-due premiums after twelve months.

(11) If all past due premiums are paid after the certification period is over:

(a) Eligibility for prior months is not restored; and

(b) Children are not eligible for premium-based coverage under apple health for kids until:

(i) The month the premiums are paid or the agency writes off the debt; and

(ii) The family reapplys and is found eligible.

(12) A family cannot designate partial payment of the billed premium amount as payment for a specific child in the AU. The full premium amount is the obligation of the head of household of the AU. A family can decide to request health care coverage only for certain children in the AU, if they want to reduce premium obligation.

(13) A change that affects the premium amount is effective the month after the change is reported and processed.

(14) A sponsor or other third party may pay the premium on behalf of the child or children in the AU. The premium payment requirement remains the obligation of household of the AU. The failure of a sponsor or other third party to pay the premium does not eliminate the obligation of the head of household to pay past due premiums.

[WSR 12-13-056, recodified as § 182-505-0225, filed 6/15/12, effective 7/1/12. Statutory Authority: RCW 41.05.021, 74.04.050, 74.04.057, 74.09.500, and PPACA, § 2102 (b)(1)(A) of the Social Security Act, and Public Law 111-3 (CHIPRA). WSR 11-23-077, § 388-505-0211, filed 11/15/11, effective 12/16/11. Statutory Authority: RCW 74.04.050, 74.04.057, and 74.08.090, and Apple Health for Kids Act (ESHB 2128); 42 U.S.C. 1305; Public Law 111-3 (Children's Health Insurance Program Reauthorization Act of 2009). WSR 11-03-001, § 388-505-0211, filed 1/5/11, effective 2/5/11. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.402, 74.09.470, and 2008 session law. WSR 09-07-086, § 388-505-0211, filed 3/17/09, effective 4/17/09. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.530, 74.09.700, and 2007 c 5. WSR 08-05-018, § 388-505-0211, filed 2/12/08, effective 3/14/08. Statutory Authority: RCW 74.08.090, 74.09.510, 74.09.522, 74.09.450, and 2004 c 276. WSR 04-16-064, § 388-505-0211, filed 7/30/04, effective 8/30/04. Statutory Authority: RCW 74.08.090, 74.09.050, 74.09.450, and 2000 c 276. WSR 04-06-125, § 388-505-0211, filed 4/7/04, effective 5/8/04.]

WAC 182-505-0235 Washington apple health—Premium-based children's program—Order of payments. The medicaid agency administers premium-based Washington apple health (WAH) for kids coverage through a combination of state and federal funding sources. For expenditures funded by Title XXI of the Social Security Act (SSA), also known as the children's health insurance program (CHIP), federal financial participation will be sought in compliance with section 2105 in the following order:

(1) For health care coverage for targeted low-income children from birth through age eighteen, as described in section 4 of the Title XXI state plan.
(2) For health care coverage for unborn children, as described in section 4.1.2.1 of the Title XXI state plan.

(3) For health care coverage for medicaid-eligible children, as described in the Children's Health Insurance Program Reauthorization Act (CHIPRA), section 214.

(4) For health care coverage for medicaid-eligible children, as described in section 2105 (g)(4)(A) and (B) of the SSA.

(5) For allowable administrative expenditures under the ten percent cap, as defined in section 2105 (a)(1)(D) of the SSA in the following order:

(a) First, for reasonable expenditures necessary to administer the plan, including staffing for eligibility determinations, plan administration, quality assurance, and similar costs.

(b) Second, for a toll-free 800 telephone number providing information regarding the Washington apple health for kids program.

(c) Third, for health services initiatives, such as the funding of the Washington poison center, to the extent that state funds are appropriated by the legislature.

(d) Fourth, for translation or interpretation services in connection with the enrollment, retention, or use of services under this title by persons for whom English is not their primary language, but only to the extent that state-matching funds are made available.

(e) Fifth, for outreach services for the Washington apple health for kids program, to the extent that appropriated state-matching funds are available.

(f) Sixth, for other CMS-approved activities to the extent that federal matching funds are available, and where such activities do not duplicate efforts conducted under this subsection.


WAC 182-505-0237 Premium-based Washington apple health for kids—Other rules that apply. In addition to the rules of this chapter, children receiving premium-based Washington apple health (WAH) for kids are subject to the following rules:

(1) Chapter 182-538 WAC, Managed care (except WAC 182-538-061, 182-538-063, and 182-538-065) if the child is covered under federally matched CN coverage;

(2) WAC 182-504-0015, Certification periods for categorically needy (CN) scope of care medical assistance programs;

(3) WAC 182-504-0125, Effect of changes on medical program eligibility.

[Statutory Authority: RCW 41.05.021, 41.05.160, Public Law 111-148, 42 C.F.R. § 431, 435, and 457, and 45 C.F.R. § 155. WSR 14-16-052, § 182-505-0237, filed 7/29/14, effective 8/29/14. WSR 12-13-056, recodified as § 182-505-0237, filed 6/15/12, effective 7/1/12. Statutory Authority: RCW 74.04.050, 74.04.057, and 74.08.090. WSR 07-07-014, § 388-542-0020, filed 1/5/11, effective 2/5/11. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.402, 74.09.470, and 2008 session law. WSR 09-07-086, § 388-542-0020, filed 3/17/09, effective 4/17/09. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.530, 74.09.700, and 2007 c 5. WSR 08-05-018, § 388-542-0020, filed 2/12/08, effective 3/14/08. Statutory Authority: RCW 74.08.090 and 74.09.522. WSR 06-07-014, § 388-542-0020, filed 3/3/06, effective 4/3/06. Statutory Authority: RCW 74.08.090, 74.09.510, 74.09.522, 74.09.450, and 2004 c 276. WSR 04-16-064, § 388-542-0020, filed 7/30/04, effective 8/30/04.]

WAC 182-505-0240 Washington apple health—Parents and caretaker relatives. (1) A person is eligible for Washington apple health (WAH) categorically needy (CN) coverage when he or she:

(a) Is a parent or caretaker relative of a dependent child who meets the criteria described in WAC 182-503-0565(2);

(b) Meets citizenship and immigration status requirements described in WAC 182-503-0535;

(c) Meets general eligibility requirements described in WAC 182-503-0505;

(d) Has countable income below fifty-four percent of the federal poverty level (FPL).

(2) To be eligible for WAH coverage as a caretaker relative, a person must be related to a dependent child who meets the criteria described in WAC 182-503-0565(2).

(3) A person must cooperate with the state of Washington in the identification, use and collection of medical support from responsible third parties as described in WAC 182-503-0540.

(4) A person who does not cooperate with the requirements in subsection (3) of this section is not eligible for WAH coverage.

[Statutory Authority: RCW 41.05.021, 41.05.160, Public Law 111-148, 42 C.F.R. § 431, 435, and 457, and 45 C.F.R. § 155. WSR 14-16-052, § 182-505-0240, filed 7/29/14, effective 8/29/14. WSR 12-13-056, recodified as § 182-505-0240, filed 6/15/12, effective 7/1/12. Statutory Authority: RCW 74.04.050, 74.04.057, and 74.08.090. WSR 07-07-014, § 388-505-0220, filed 5/21/07, effective 7/1/07. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.402, 74.09.470, and 2008 session law. WSR 09-07-086, § 388-505-0220, filed 3/17/09, effective 4/17/09. Statutory Authority: RCW 74.04.050, 74.04.057, 74.08.090, 74.09.530, 74.09.700, and 2007 c 5. WSR 08-05-018, § 388-542-0020, filed 2/12/08, effective 3/14/08. Statutory Authority: RCW 74.08.090 and 74.09.522. WSR 06-07-014, § 388-542-0020, filed 3/3/06, effective 4/3/06. Statutory Authority: RCW 74.08.090, 74.09.510, 74.09.522, 74.09.450, and 2004 c 276. WSR 04-16-064, § 388-542-0020, filed 7/30/04, effective 8/30/04.]

WAC 182-505-0250 Washington apple health—MAGI-based adult medical. (1) Effective on or after January 1, 2014, a person is eligible for Washington apple health (WAH) modified adjusted gross income (MAGI)-based adult coverage when he or she meets the following requirements:

(a) Is age nineteen or older and under the age of sixty-five;

(b) Is not entitled to, or enrolled in, medicare benefits under Part A or B of Title XVIII of the Social Security Act;

(c) Is not otherwise eligible for and enrolled in mandatory coverage under one of the following programs:

(i) WAH SSI-related categorically needy (CN);

(ii) WAH foster care program; or

(iii) WAH adoption support program;

(d) Meets citizenship and immigration status requirements described in WAC 182-503-0535;
(e) Meets general eligibility requirements described in WAC 182-503-0505; and

(f) Has net countable income that is at or below one hundred thirty-three percent of the federal poverty level for a household of the applicable size.

(2) Parents or caretaker relatives of an eligible dependent child as described in WAC 182-503-0565 are first considered for WAH for families as described in WAC 182-505-0240. A person whose countable income exceeds the standard to qualify for family coverage is considered for coverage under this section.

(3) Persons who are eligible under this section are eligible for WAH alternative benefit plan as defined in WAC 182-500-0010 coverage. A person described in this section is not eligible for medically needy WAH.

(4) Other coverage options for adults not eligible under this section are described in WAC 182-508-0001.

[Statutory Authority: RCW 41.05.021, 41.05.160, Public Law 111-148, 42 C.F.R. § 431, 435, and 457, and 45 C.F.R. § 155. WSR 14-16-052, § 182-505-0250, filed 7/29/14, effective 8/29/14.]

WAC 182-505-0300 Washington apple health—Hospital presumptive eligibility. (1) Purpose. The hospital presumptive eligibility (HPE) program provides temporary Washington apple health (WAH) coverage to HPE-eligible persons who enroll through an HPE-qualified hospital.

(2) HPE-eligible persons. To be HPE-eligible:

(a) A person must:
   (i) Be younger than age sixty-five; and
   (ii) Meet the eligibility requirements for one or more of the following programs:
       (A) WAH for pregnant women (chapter 182-505 WAC);
       (B) WAH for kids (chapter 182-505 WAC);
       (C) WAH for foster care (chapter 182-505 WAC);
       (D) WAH for parents and caretaker relatives (chapter 182-505 WAC);
       (E) WAH for adults (chapter 182-505 WAC);
       (F) TAKE CHARGE for family planning services (chapter 182-532 WAC).

   (b) A person must not:
       (i) Be a WAH beneficiary;
       (ii) Be a supplemental security income beneficiary; or
       (iii) Have received HPE coverage within the preceding twenty-four months.

   (3) HPE-qualified hospitals. To be HPE-qualified, a hospital must:
       (a)Operate in Washington state;
       (b) Submit a signed core provider agreement (CPA) to the agency;
       (c) Submit a signed HPE agreement to the agency;
       (d) Comply with the terms of the CPA and HPE agreements;
       (e) Determine HPE eligibility using only those employees who have successfully completed the agency's HPE training;
       (f) Agree to provide HPE-application assistance to anyone who requests it; and
       (g) Agree to be listed on the agency's web site as an HPE-application assistance provider.

[Statutory Authority: RCW 41.05.021, 41.05.160, Patient Protection and Affordable Care Act established under Public Law 111-148. WSR 15-06-039, § 182-505-0300, filed 2/26/15, effective 3/29/15.]