



RULE-MAKING ORDER PERMANENT RULE ONLY

CR-103P (October 2017) (Implements RCW 34.05.360)

CODE REVISER USE ONLY

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STATE OF WASHINGTON
FILED

DATE: December 12, 2017

TIME: 1:06 PM

WSR 18-01-049

Agency: Department of Social and Health Services, Aging and Long-Term Support Administration

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 department is amending WAC 388-106-0225 "How do I pay for medicaid personal care?" as a result of the passage of Senate Bill 5118 to reflect an increase in the personal needs allowance effective July 1, 2017 and each fiscal year thereafter. This adjustment is subject to legislative funding.

Citation of rules affected by this order:

New: None

Repealed: None

Amended: WAC 388-106-0225

Suspended: None

Statutory authority for adoption: RCW 74.08.090

Other authority:

PERMANENT RULE (Including Expedited Rule Making)

Adopted under notice filed as WSR 17-21-076 on October 16, 2017 (date).

Describe any changes other than editing from proposed to adopted version: None

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Federal statute:	New	___	Amended	___	Repealed	___
Federal rules or standards:	New	___	Amended	___	Repealed	___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>1</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	Repealed	___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New	___	Amended	___	Repealed	___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New	___	Amended	___	Repealed	___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New	___	Amended	___	Repealed	___
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The number of sections adopted using:

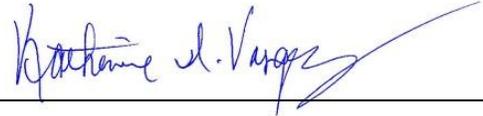
Negotiated rule making:	New	___	Amended	___	Repealed	___
Pilot rule making:	New	___	Amended	___	Repealed	___
Other alternative rule making:	New	___	Amended	<u>1</u>	Repealed	___

Date Adopted: December 11, 2017

Name: Katherine I. Vasquez

Title: DSHS Rules Coordinator

Signature:



WAC 388-106-0225 How do I pay for ((MPC)) medicaid personal care? You pay for medicaid personal care (MPC) as follows:

(1) If you live in your own home, you do not ~~((participate to-ward))~~ share in the cost of your personal care services.

(2) If you live in a residential facility ~~((and are:~~

~~(a) An SSI beneficiary who receives only SSI income, you only pay for board and room. You are allowed to)), you:~~

~~(a) Keep a personal needs allowance ((of sixty two dollars and seventy nine cents)) as described in WAC 182-513-1105;~~

~~(b) ((An SSI beneficiary who receives SSI and another source of income, you only)) pay for ((board and)) room((. You are allowed to keep a personal needs allowance of sixty two dollars and seventy nine cents.)) and board as described in WAC 182-513-1105; and~~

~~(c) ((An SSI-related person under WAC 182-512-0050, you)) May be required to ~~((participate towards))~~ share in the cost of your personal care ~~((services in addition to your board and room if your financial eligibility is based on the facility's state contracted rate described in))~~ under WAC 182-513-1205. ~~((You are allowed to keep a personal needs allowance of sixty two dollars and seventy nine cents.~~~~

~~(d) An aged, blind, disabled (ABD) cash assistance client eligi-ble for categorically needy medicaid coverage in an adult family home (AFH), you are allowed to keep a personal needs allowance (PNA) of thirty eight dollars and eighty four cents per month. The remainder of your income must be paid to the AFH as your room and board up to the ALTSA room and board standards; or~~

~~(e) An aged, blind, disabled (ABD) cash assistance client eligi-ble for categorically needy medicaid coverage in an assisted living facility, you are authorized a personal needs grant of up to thirty eight dollars and eighty four cents per month;~~

~~(f) A Washington apple health MAGI based client as determined by WAC 182-505-0250, you pay only for room and board. If your income is less than the ALTSA room and board standard, you are allowed to keep a personal needs allowance of sixty two dollars and seventy nine cents and the remainder of your income goes to the provider for room and board.))~~

(3) ~~((Personal needs allowance (PNA) standards and the ALTSA room and board standard can be found at <http://www.hca.wa.gov/medicaid/eligibility/pages/standards.aspx>.~~

~~(4))~~ The department pays the residential care facility from the first day of service through the:

(a) Last day of service when the medicaid resident dies in the facility; or

(b) Day of service before the day the medicaid resident is dis-charged.