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
Clinical Quality and Care Transformation (CQCT)
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 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.

[Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 17-10-058, § 182-550-2531, filed 5/2/17, effective 6/2/17; WSR 15-18-065, §
182-550-2531, filed 8/27/15, effective 9/27/15. WSR 11-14-075, recodi-
fied as § 182-550-2531, filed 6/30/11, effective 7/1/11. Statutory Au-
thority: RCW 74.08.090 and 74.09.500. WSR 07-12-039, § 388-550-2531,
filed 5/30/07, effective 8/1/07. Statutory Authority: RCW 74.08.090,
74.09.520 and 42 C.F.R. 482.56. WSR 03-06-047, § 388-550-2531, filed
2/28/03, effective 3/31/03. Statutory Authority: RCW 74.08.090 and
74.09.520. WSR 99-17-111, § 388-550-2531, filed 8/18/99, effective
9/18/99.]