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State/Territory Name: Washington

State Plan Amendment (SPA) #: 18-0038

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) 179 Form
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Seattle Regional Office 701 Fifth Avenue, Suite 1600, MS/RX-200 Seattle, WA 98104



Division of Medicaid & Children's Health Operations

February 12, 2019

Susan Birch, Director MaryAnne Lindeblad, Medicaid Director Health Care Authority PO Box 45502 Olympia, WA 98504-5010

RE: Washington State Plan Amendment (SPA) Transmittal Number 18-0038

Dear Ms. Birch and Ms. Lindeblad:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of State Plan Amendment (SPA) Transmittal Number WA 18-0038. This amendment was submitted to comply with Section 1902(a)(68) of the Social Security Act.

This SPA is approved with an effective date of January 1, 2019.

If there are additional questions, please contact me or your staff may contact James Moreth at James.Moreth@cms.hhs.gov or (206) 615-2043.

Sincerely,

David L. Meacham Associate Regional Administrator

Cc:

Ann Myers, SPA Coordinator

HEALTH CARE FINANCING ADMINISTRATION		OMB NO. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE Washington
STATE PLAN MATERIAL	18-0038	wasnington
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION	January 1, 2019	
DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (Check One):		
	CONSIDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		ch amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT: a. FFY 2019 \$ 0	
1902(a) of the Social Security Act	b. FFY 2020 \$ 0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):	
Attachment 4.42-A, Page 1	Attachment 4.42-A, Page 1	
10. SUBJECT OF AMENDMENT:		
Mandatory Education Regarding False Claims Act		
Find dution of Location Regulating Labor Claims Flot		
11 COVERNORS REVIEW (Check Orgali		
11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT	☐ OTHER, AS SPE	CIFIED: Exampt
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	OTHER, AS SEE	CIFIED. Exempt
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
	Ann Myers	
13 .TYPED NAME:	Rules and Publications	
MaryAnne Lindeblad	Division of Legal Services	
14. TITLE:	Health Care Authority	
Director	626 8 th Ave SE MS: 42716	
	Olympia, WA 98504-2716	
15. DATE SUBMITTED: /2 - 28 - 18		
FOR REGIONAL OF		
17. DATE RECEIVED: 12/28/18	18. DATE APPROVED: 2/12/19	
PLAN APPROVED – ON		
19. EFFECTIVE DATE OF APPROVED MATERIAL:		gitally signed by David L. Meacham -S
21. TYPED NAME: 1/1/19	22. TITLE: Associate Regional Admit	ste: 2019.02.15 07:46:28 -08'00'
David L. Meacham	Associate Regional Admi	nistrator
23. REMARKS:		
	A STATE OF THE STA	

Employee Education Regarding False Claims Recovery Methodology of Compliance Oversight

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Compliance, oversight, and enforcement

An entity that receives or makes annual medical assistance payments under the State Plan of at least \$5,000,000 must comply with the requirements of section 1902 of the Social Security Act in order to receive payments.

The State has implemented various monitoring processes for entities that receive Medicaid funds on or after September 1, 2007. During the normal cycle of monitoring payments of medical assistance under the State Plan, the State determines if an entity is required to comply with section 1902(a)(68) of the Act. If the entity is required to comply, the State will provide notice that the entity is subject to the requirements under section 1902(a)(68). The entity is responsible for submitting an attestation under penalty of perjury to the State to verify the entity has compliant written policies, and that they have been disseminated as required. The State may also obtain copies of an entity's written policies and proof of dissemination for review to verify the entity has complied with the requirements.

For those entities the State determines are not in compliance with section 1902(a)(68), the State may provide a warning for a reasonable period of time for the entity to become compliant, or the State may suspend or forfeit medical assistance payments until such time as an entity establishes with the State that it has become compliant.

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