WA CARES FUND

WA CARES FUND

Care transition coordination

PROVIDER APPLICATION DETAILS

INSTRUCTIONS

Please review this entire document and compile the necessary information and documentation before you begin the WA Cares provider application process.

GENERAL DESCRIPTION OF SERVICE

Service that provides comprehensive discharge planning and coordination of health care services for up to two months after a beneficiary has been discharged from a hospital or nursing home with the goal of avoiding preventable poor outcomes as a beneficiary returns to their place of residence.

Care transition coordination is designed to ensure proper coordination, timely follow-up care, and healthcare continuity with the goal of avoiding preventable poor outcomes as beneficiaries return home from an acute care setting like a hospital or skilled nursing facility (such as readmission).

RELATED LAWS, RULES AND POLICIES

Below is a list of some of the laws, rules and policies that may be helpful to review prior to completing an application. This may not be a comprehensive list of all laws, rules and policies that apply.

- Chapter 50B.04 RCW: Long-term services and supports trust program
- Chapter 74.39A RCW: Long-term care services options
- RCW 43.43.830 through 43.43.845: Washington State Patrol background checks
- Chapter 388-116 WAC: WA Cares program

MINIMUM PROVIDER QUALIFICATIONS

1. Contractors must meet all Washington state laws to do business in the state (and city or county requirements, if applicable). This includes having all required business license(s), endorsement(s), credential(s) and certification(s) to provide the service.
2. The agency owner(s) and contract signatory must pass a Department of Social and Health Services criminal history background check at initial application and contract

renewal. The date of birth and background check confirmation number must be provided at time of application.

3. All employees, volunteers, and subcontractors who may have unsupervised access to beneficiaries must have passed a criminal history background check, which must be conducted by the contractor prior to access and every two years. The criminal history background check must at least include Washington State Patrol criminal conviction records and be kept in their personnel or subcontractor file(s).
4. Meet Department of Social and Health Services insurance requirements.
5. Contractors for care transition coordination must meet one of the following professional qualifications:
   a. Solo practitioner or sole proprietor providing or specializing in care transition coordination services.
   b. Agencies providing or specializing in care transition coordination, including:
      i. Governmental agencies; and
      ii. Non-profit 501(c)(3) organizations.
   c. Contracted health home care coordination organizations associated with a health home lead entity that employs individuals with the applicable license, credential, or certification.
   d. Any evidence-based program provider that is licensed and credentialed for care transition coordination. Fidelity to evidence-based program must be verified at the time of contracting.

PROVIDER CONTRACT

Care transition coordination contracts have a maximum duration of two years. Sample contracts are available in the provider toolkit. The sample is available to review to ensure all contract terms can be met before application.

Required documentation for provider application

1. Completed provider network application and required attachments.
2. Copy of Washington state business license or proof of exemption.
3. Copy of W-9 request or taxpayer identification number and certification.
4. Unless a sole proprietor, supporting documentation on business organization (e.g., list of partners, members, directors, officers, board members).

5. Name, date of birth, and background check confirmation number for the contract signatory and the agency owner(s) with 5% or more ownership interest.
6. Evidence of one of the following credentials:
    a. Licensed solo practitioner or sole proprietor with a Core Provide Agreement with the Health Care Authority (e.g. ProviderOne number):
        i. Independent Clinical Social Worker
        ii. Registered Nurse (RN)
    b. Agencies providing or specializing in care transition coordination, including:
        i. Home health services under Chapter 70.127 RCW and Chapter 246-335 WAC;
        ii. Governmental agencies; or
        iii. Non-profit 501(c)(3) organizations
    c. Contracted Health Home Care Coordination Organization (CCO) associated with a health home lead entity that employs individuals with the applicable license, credential, or certification.
    d. Licensed home health agency with a current Core Provider Agreement with the Health Care Authority (e.g. ProviderOne number).
    e. Evidence-based program (EBP) provider recognized by a national EBP organization specializing in care transition coordination. Fidelity to evidence-based program must be verified at the time of contracting.
7. Current certificate of insurance (COI) satisfying the insurance requirements.
8. Current rate(s) or pricing guide, for informational purposes.