

Nursing home

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

Long-term care or custodial services provided in one of the following settings:

1. A setting that operates or maintains facilities providing convalescent or chronic care, or both, consistent with [Chapter 18.51 RCW](#) and [Chapter 388-97 WAC](#), for a period in excess of 24 consecutive hours for three or more patients who are not related by blood or marriage to the operator; and who, by reason of illness or infirmity, are unable to properly care for themselves.

Note: Convalescent or chronic care may include administering medicines; preparing special diets; giving bedside nursing care; applying dressings and bandages; carrying out treatment prescribed by a licensed health care provider; dementia care; and respite care for non-residents who are receiving care from family caregivers in their home.

2. A swing bed in a critical access hospital to provide post-acute nursing services, where "swing bed" is defined under [WAC 246-310-410](#) and "critical access hospital" is defined under [WAC 182-550-2598](#).

Excluded from nursing home services is medically necessary care provided in a skilled nursing facility that requires a licensed medical practitioner to perform, including, but not limited to:

1. Rehabilitation services such as physical or occupational therapy; and
2. Skilled nursing services such as wound care, intravenous injections and catheter care.

Respite care services subcode

There is one sub-code available to nursing home services providers. To provide this service, the contractor must be qualified and hold a contract with the applicable subcode.

- **Respite for family caregivers in a facility or residential setting:** Respite care for nonresidents who typically receive care from family caregivers in their homes.

RELATED LAWS, RULES AND POLICIES

Below is a list of some of the laws and rules that may be helpful to review prior to completing an application. This is not 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](#)
- [Chapter 18.51 RCW: Nursing homes](#)
- [Chapter 388-97 WAC: Nursing homes](#)
- [RCW 18.79.260\(3\)\(e\): Registered nurse – Activities allowed – Delegation of tasks](#)

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. Comply with background check requirements under [RCWs 43.43.830 through 43.43.845](#) and [Chapter 388-113 WAC](#) as required for licensure by Residential Care Services.
3. Meet Department of Social and Health Services [insurance requirements](#).
4. Have one of the following:
 - a. Nursing home license pursuant to [Chapter 18.51 RCW](#) and [Chapter 388-97 WAC](#); or
 - b. Critical access hospital license pursuant to [42 U.S.C. 1895i-4](#) and [Chapter 70.38 RCW](#).

PROVIDER CONTRACT

Nursing home contracts have a maximum duration of four years. The sample contract is available in the [provider toolkit](#). The sample is available to review to ensure all contract terms can be met before application. Providers must meet the qualifications for each subcode included in their contract. All available subcodes are included in the sample contract.

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. Supporting documentation of business organization as applicable (e.g., list of partners, members, directors, officers, board members).
5. Current certificate of insurance (COI) satisfying the [insurance requirements](#).
6. Current rate(s) or pricing guide, for informational purposes.