



PROPOSED RULE MAKING

CR-102 (June 2024)
(Implements RCW 34.05.320)
Do NOT use for expedited rule making

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STATE OF WASHINGTON
FILED

DATE: June 06, 2025

TIME: 12:14 PM

WSR 25-13-019

Agency: Department of Social and Health Services, Home and Community Living Administration, DDCS

☒ **Original Notice**

☐ **Supplemental Notice to WSR** _____

☐ **Continuance of WSR** _____

☒ **Preproposal Statement of Inquiry was filed as WSR** 25-09-021 ; or

☐ **Expedited Rule Making--Proposed notice was filed as WSR** _____; or

☐ **Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1); or**

☐ **Proposal is exempt under RCW** _____.

Title of rule and other identifying information: (describe subject) WAC 388-833-0017, Who may become an intensive habilitation services provider? WAC 388-833-0019, Is a site visit required and what does DDA review during a site visit? Effective May 1, 2025, Developmental Disabilities Administration will move under Home and Community Living Administration. The former Developmental Disabilities Administration will be known as Developmental Disabilities Community Service Division within the Home and Community Living Administration.

Hearing location(s):

Date:	Time:	Location: (be specific)	Comment:
July 22, 2025	10:00 a.m.	Virtually via Teams or Call in	Hearings are held virtually, see the DSHS website at https://www.dshs.wa.gov/sesa/rpau/proposed-rules-and-public-hearings for the most current information.

Date of intended adoption: Not earlier than July 23, 2025 (Note: This is **NOT** the **effective** date)

Submit written comments to:

Name DSHS Rules Coordinator
Address PO Box 45850, Olympia WA 98504
Email DSHSRPAURulesCoordinator@dshs.wa.gov
Fax 360-664-6185
Other

Beginning (date and time) noon on June 18, 2025

By (date and time) 5:00pm on July 22, 2025

Assistance for persons with disabilities:

Contact Shelley Tencza, Rules Consultant
Phone 360-664-6036
Fax 360-664-6185
TTY 711 Relay Service
Email shelley.tencza@dshs.wa.gov
Other

By (date) 5:00 p.m. on July 8, 2025

Purpose of the proposal and its anticipated effects, including any changes in existing rules: Add cross-references to the certification chapter proposed for adoption by HCLA under chapter 388-825A WAC and require contracted providers to be certified under the same chapter 388-825A WAC as state-operated providers.

Reasons supporting proposal: The purpose of these amendments is to standardize certification and requirements between state-operated and contracted intensive habilitation services (IHS) providers.

Statutory authority for adoption: RCW 71A.12.030

Statute being implemented: RCW 71A.12.040

Is rule necessary because of a:

Federal Law?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Federal Court Decision?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
State Court Decision?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If yes, CITATION:

Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters: None

Name of proponent: (person or organization) Department of Social and Health Services Type of proponent: <input type="checkbox"/> Private. <input type="checkbox"/> Public. <input checked="" type="checkbox"/> Governmental.			
Name of agency personnel responsible for:			
	Name	Office Location	Phone
Drafting	Chantelle Diaz	P.O. Box 45310, Olympia WA 98504-5310	360-790-4732
Implementation	Melanie Ingram	P.O. Box 45310, Olympia WA 98504-5310	360-764-6915
Enforcement	Melanie Ingram	P.O. Box 45310, Olympia WA 98504-5310	360-764-6915
Is a school district fiscal impact statement required under RCW 28A.305.135?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, insert statement here:			
The public may obtain a copy of the school district fiscal impact statement by contacting: <div style="margin-left: 20px;"> Name Address Phone Fax TTY Email Other </div>			
Is a cost-benefit analysis required under RCW 34.05.328?			
<input checked="" type="checkbox"/> Yes: A preliminary cost-benefit analysis may be obtained by contacting: <div style="margin-left: 20px;"> Name Melanie Ingram Address PO Box 45310, Olympia WA 98504-5310 Phone 360-764-6915 Fax TTY 711 Relay Service Email melanie.ingram@dshs.wa.gov Other </div>			
<input type="checkbox"/> No: Please explain:			
Regulatory Fairness Act and Small Business Economic Impact Statement Note: The Governor's Office for Regulatory Innovation and Assistance (ORIA) provides support in completing this part.			
(1) Identification of exemptions: This rule proposal, or portions of the proposal, may be exempt from requirements of the Regulatory Fairness Act (see chapter 19.85 RCW). For additional information on exemptions, consult the exemption guide published by ORIA . Please check the box for any applicable exemption(s):			
<input type="checkbox"/> This rule proposal, or portions of the proposal, is exempt under RCW 19.85.061 because this rule making is being adopted solely to conform and/or comply with federal statute or regulations. Please cite the specific federal statute or regulation this rule is being adopted to conform or comply with, and describe the consequences to the state if the rule is not adopted. Citation and description:			
<input type="checkbox"/> This rule proposal, or portions of the proposal, is exempt because the agency has completed the pilot rule process defined by RCW 34.05.313 before filing the notice of this proposed rule.			
<input type="checkbox"/> This rule proposal, or portions of the proposal, is exempt under the provisions of RCW 15.65.570 (2) because it was adopted by a referendum.			

- ☐ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.025\(3\)](#). Check all that apply:
- | | |
|---|---|
| <input type="checkbox"/> RCW 34.05.310 (4)(b)
(Internal government operations) | <input type="checkbox"/> RCW 34.05.310 (4)(e)
(Dictated by statute) |
| <input type="checkbox"/> RCW 34.05.310 (4)(c)
(Incorporation by reference) | <input type="checkbox"/> RCW 34.05.310 (4)(f)
(Set or adjust fees) |
| <input type="checkbox"/> RCW 34.05.310 (4)(d)
(Correct or clarify language) | <input type="checkbox"/> RCW 34.05.310 (4)(g)
(i) Relating to agency hearings; or (ii) process requirements for applying to an agency for a license or permit) |
- ☐ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.025\(4\)](#). (Does not affect small businesses).
- ☒ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.025\(5\)](#).
- Explanation of how the above exemption(s) applies to the proposed rule:

(2) Scope of exemptions: *Check one.*

- ☒ The rule proposal: Is fully exempt. (*Skip section 3.*) Exemptions identified above apply to all portions of the rule proposal.
- ☐ The rule proposal: Is partially exempt. (*Complete section 3.*) The exemptions identified above apply to portions of the rule proposal, but less than the entire rule proposal. Provide details here (consider using [this template from ORIA](#)):
- ☐ The rule proposal: Is not exempt. (*Complete section 3.*) No exemptions were identified above.

(3) Small business economic impact statement: *Complete this section if any portion is not exempt.*

If any portion of the proposed rule is **not exempt**, does it impose more-than-minor costs (as defined by RCW 19.85.020(2)) on businesses?

- ☒ No Briefly summarize the agency's minor cost analysis and how the agency determined the proposed rule did not impose more-than-minor costs. HCLA has analyzed the proposed rules and there is no indication of costs for compliance. The rules do not require small businesses, IHS providers, to purchase any goods, services, licenses, etc.
- ☐ Yes Calculations show the rule proposal likely imposes more-than-minor cost to businesses and a small business economic impact statement is required. Insert the required small business economic impact statement here:

The public may obtain a copy of the small business economic impact statement or the detailed cost calculations by contacting:

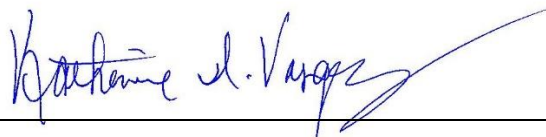
Name
Address
Phone
Fax
TTY
Email
Other

Date: June 3, 2025

Name: Katherine I. Vasquez

Title: DSHS Rules Coordinator

Signature:



AMENDATORY SECTION (Amending WSR 24-19-101, filed 9/18/24, effective 10/19/24)

WAC 388-833-0017 Who may become an intensive habilitation services provider? The following entities may become an intensive habilitation services provider:

(1) A staffed residential home licensed under chapter 110-145 WAC and certified under chapter 388-825A WAC; or

(2) A ~~((DDA-certified))~~ state-operated provider certified under chapter 388-825A WAC.

AMENDATORY SECTION (Amending WSR 24-19-101, filed 9/18/24, effective 10/19/24)

WAC 388-833-0019 Is a site visit required and what does DDA review during a site visit? (1) To be certified, a ~~((state-operated))~~ provider must participate in site visits in accordance with certification requirements under chapter 388-825A WAC.

(2) During a site visit, DDA reviews the ~~((state-operated))~~ provider's service site for the following safety requirements:

(a) The common areas of the home are unrestricted.

(b) All entrances and exits are unblocked.

(c) The home is maintained in a safe and healthy manner.

(d) The home has a storage area for flammable and combustible materials.

(e) Every floor of the home has working smoke and carbon monoxide detectors.

(f) The home has a fire extinguisher that meets requirements for the residence type. There must be a fire extinguisher in the kitchen and at least one on every floor of the home.

(g) The home has a stocked first-aid kit.

(h) The home has a working and accessible telephone.

(i) The home has a working and accessible flashlight or alternative light source.

(j) Emergency contact information is available and accessible in the home (e.g., 911, poison control, nonemergency 911, adult protective services, child protective services).

(k) The contact information for the developmental disabilities ombuds is available and accessible in the home.

(l) The water temperature at the home is 120 degrees Fahrenheit or less.

(m) There is a safety plan for any body of water more than 24 inches deep at the home.

(n) The home has an evacuation plan and an emergency food and water supply.

(o) The home meets integrated setting requirements under WAC 388-823-1096.

(p) The home has a backup power source (e.g., generator, battery pack) if the provider supports a client who uses life sustaining medical equipment.