



Washington State  
Hospital Association

# Legislative Summary & Policy Preview

2024





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Dear WSHA Members,

Although the 2024 legislative session was a “short,” 60-day session, it was packed with numerous high-impact health care bills and budget items. Our biggest policy win this year was the unanimous passage of SB 5940, which allows EMT-basic, EMT-advanced and paramedics to work in hospitals through a new medical assistant credential using their existing training and education. Continuing our legislative efforts to address complex discharge patients, WSHA also advocated for the enactment of SB 5825 to expand the capacity of the state Office of Public Guardianship to provide guardianship and decision-making assistance for hospitalized patients who do not have a family member or friend able to serve as a guardian. Another win was the death of SB 5241, which would have placed strict limits on hospitals’ abilities to merge and affiliate, which are often necessary to keep their doors open. This bill passed the Senate but did not come up for a vote in the House before the final cutoff.

Being the second year of the biennium, the budget was expectedly smaller than it was in 2023. Although the state’s financial outlook was strong, lawmakers were cautious in their spending, as several citizen initiatives coming before voters this fall could adversely affect the state’s future budget. We advocated for complex discharge funding; support for rural labor and delivery sustainability; funding to support reproductive care access in public hospital districts; funding for Medicaid coverage for partial hospitalization/intensive outpatient mental health treatment programs for adults; and increasing Medicaid payments for professional services.

Our successes in the budget were mixed. We are pleased the budget funds the Washington Reproductive Access Alliance specifically for public hospital districts (though it is available to anyone in the state seeking access to care). We were also pleased to see funding for a new residential treatment facility for children/youth with developmental disabilities and complex behaviors, and funding for hospitals at risk of reducing labor and delivery services. We were disappointed the budget did not include funding for long-term care slots for complex discharge patients who are undocumented, Medicaid coverage of partial hospitalization/intensive outpatient treatment programs for adults or Medicaid payment increases for specialty providers.

Looking ahead, the focus of WSHA’s Government Affairs team shifts to empowering members to build legislative relationships, advocating during agency rulemaking and new law implementation, and planning for the next legislative session. We want to offer our sincerest thanks to our members who testified before lawmakers, participated in WSHA Advocacy Day and analyzed the impact of bills on hospital operations. Your efforts are instrumental to our legislative successes!

In your service,



Chelene Whiteaker  
WSHA Senior Vice President, Government Affairs



# Results of WSHA's 2024 Legislative Agenda

WSHA is pleased to report another successful legislative session in 2024. Our successes included:

**Ensure patients have health coverage and access throughout the care continuum before, during and after hospitalization.**

- **Support continuation of hospital at home services to Washington patients.** The Legislature unanimously passed HB 2295, permanently authorizing hospital at home services as a hospital service line that the Department of Health (DOH) can regulate. Without legislative action, patients would have lost access to these services when DOH ended its enforcement discretion. The program allows patients to receive hospital-level care for certain conditions in the comfort of their homes, and it has proven to be a high-quality, effective, safe and equitable care model. It is particularly helpful for patients suffering from cardiac disease or respiratory illnesses.

- **Ensure access to care is not threatened by reductions in payments to hospitals or policy changes that impact hospitals' ability to deliver timely access to a range of services.** WSHA successfully opposed HB 2378, which would have prohibited hospitals from billing for facility expenses for services provided at off-campus, outpatient clinics and created onerous notification requirements for on-campus services. Payment for these costs is critical to maintaining outpatient infrastructure and patient access.
- **Expand the availability of guardians and legal decision makers for people in hospitals.** The Legislature unanimously passed SB 5825 to expand the capacity of the state Office of Public to serve people stuck in hospitals who need legal decision-making supports. The bill also establishes a guardianship





navigator and provides specialized training for guardians on topics such as aging, mental health and dementia.

### Ensure hospitals are stable institutions serving their communities, long into the future.

- **Allow EMS personnel to work in hospitals with a new credential.** The Legislature unanimously passed SB 5940, allowing EMT-basic, EMT-advanced and paramedics to work in hospitals through a new medical assistant credential using their existing training and education. This will be particularly helpful for rural hospitals and will support existing EMS infrastructure.

### Maintain flexibility for hospital operations while mitigating new burdensome and costly regulations.

- **Allow hospitals and providers to continue to merge, affiliate and engage in business transactions.** SB 5241 (the so-called "Keep Our Care Act"), placing strict limits on the ability of health care providers and facilities to merge and affiliate, did not pass. Although we engaged in extensive negotiations with legislators, we ultimately remained opposed to the bill.
- **Protect hospitals' ability to negotiate sustainable contracts.** HB 2066, giving increased negotiating leverage to health insurers and placing a gag rule on hospitals prohibiting them from notifying patients and the public in advance about termination of an insurer contract, did not pass. Supporters claimed hospitals have too much power in contract negotiations. In reality, the bill would have created an unlevel playing field that would not address concerns of increasing health care costs and recent health insurer rate increases.



- **Health Care Cost Transparency Board (HCCTB) operations and governance.** WSHA negotiated to a neutral position on HB 1508. WSHA worked hard in the interim to provide feedback and offer alternatives to HB 1508. Given these negotiations, WSHA and WSMA, in partnership, were able to amend HB 1508 to remove concerning elements of the proposal, such as fines, performance improvement plans and penalties.
- **Support a regulatory structure for pharmacy benefit managers.** SB 5213, creating a regulatory structure for pharmacy benefit managers, passed.
- **Maintain recognition of health privacy laws in consumer data privacy and access to advances in health care technology.** WSHA successfully opposed HB 1951, which would have instituted burdensome requirements for hospitals using artificial intelligence, without considering the specialized needs of health care providers. SB 5838, which creates an artificial intelligence task force, passed and WSHA anticipates a bill on the task force's recommendations in the future.

# WSHA’s 2024 Policy Priorities

Leading up to each legislative session, WSHA’s Public Policy Committee and Board of Directors identifies the state policy and budget issues that are most important to our hospitals, patients and communities. We are pleased to report that the state enacted crucial measures to support our health care community and the residents of our state. Every year, we demonstrate our commitment to transparency in our legislative process by publishing our agenda and providing regular updates in Inside Olympia, which are both available on the WSHA website. The following reflects both our policy agenda and other critical issues that emerged during the 2024 legislative session.

BILL #	BILL DESCRIPTION	WSHA POSITION AND LEGISLATIVE OUTCOME	OVERALL FAVORABILITY FOR WSHA
WSHA Goal: Ensure patients have health coverage and access throughout the care continuum before, during and after hospitalization.			
HB 1929	Supporting young adults following inpatient behavioral health treatment.	Supported, passed	✓
HB 1941	Home health services for Medicaid-eligible children with medically complex conditions.	Supported, passed	✓
HB 2015	Incentivizing adult family homes to increase bed capacity.	Supported, passed	✓
HB 2184	Authorizing payment for parental caregivers of minor children with developmental disabilities.	Supported, not passed	✗
HB 2295	Hospital at-home services.	Supported, passed	✓
HB 2295	Facility fees.	Opposed, did not pass	✓
SB 5825	Guardianship and conservatorship.	Supported, passed	✓
SB 5853	Extending the crisis relief center model to provide behavioral health crisis services for minors.	Supported, passed	✓
SB 5937	Supporting crime victims and witnesses by promoting victim-centered, trauma-informed responses.	Supported, passed	✓

BILL #	BILL DESCRIPTION	WSHA POSITION AND LEGISLATIVE OUTCOME	OVERALL FAVORABILITY FOR WSHA
<b>WSHA Goal:</b> Ensure hospitals are stable institutions serving their communities, long into the future.			
<b>HB 2066</b>	<b>Provider contracting.</b>	Opposed, did not pass	✓
<b>HB 2119</b>	<b>Prohibiting garnishment related to medical debt.</b>	Opposed, did not pass	✓
<b>SB 5821</b>	<b>Establishing a uniform standard for creating an established relationship for the purposes of coverage of audio-only telemedicine services.</b>	Opposed, passed	✗
<b>SB 5940</b>	<b>Creating a medical assistant-EMT certification.</b>	Supported, passed	✓
<b>SB 6257</b>	<b>Defining Washington state residency requirements for purposes of hospital charity care.</b>	Supported, not passed	✗
<b>WSHA Goal:</b> Maintain flexibility for hospital operations while mitigating new burdensome and costly regulations.			
<b>HB 1508</b>	<b>Health care cost transparency board.</b>	Negotiated to neutral, passed	✓
<b>HB 1893</b>	<b>Unemployment insurance benefits for striking or lockout workers.</b>	Opposed, did not pass	✓
<b>HB 2073</b>	<b>Emissions of greenhouse gases from sources other than methane and carbon dioxide.</b>	Negotiated to neutral, did not pass	✓
<b>HB 2122</b>	<b>Wellness programs for certain health care professionals.</b>	Concerns, did not pass	✓
<b>HB 2128</b>	<b>Modernizing certificate of need.</b>	Neutral, did not pass	NEUTRAL
<b>HB 2149</b>	<b>Protecting consumer personal information.</b>	Concerns, did not pass	✓
<b>HB 2319</b>	<b>Substance use disorder treatment.</b>	Concerns, did not pass	✓
<b>HB 2466</b>	<b>Ambulance wait times.</b>	Opposed, did not pass	✓
<b>SB 5059</b>	<b>Prejudgment interest.</b>	Opposed, did not pass	✓



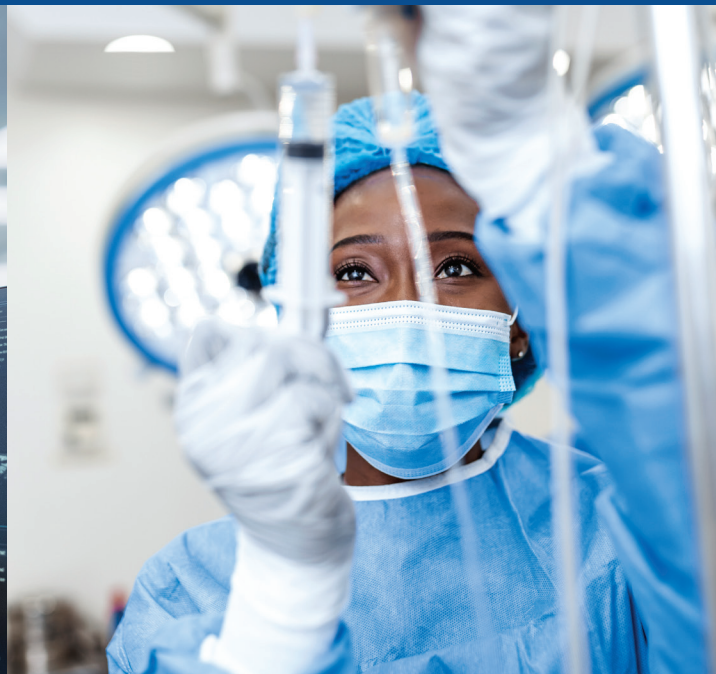
BILL #	BILL DESCRIPTION	WSHA POSITION AND LEGISLATIVE OUTCOME	OVERALL FAVORABILITY FOR WSHA
SB 5213	Creating a regulatory structure for pharmacy benefit managers.	Supported, passed	✓
SB 5241	Material changes to the operations and governance structure of participants in the health care marketplace.	Opposed, did not pass	✓
SB 5802	Providing flexibility in calculation of skilled nursing facility rates.	Supported, passed	✓
SB 5920	Lifting certificate of need requirements for psychiatric hospitals and beds.	Negotiated to support, passed	✓
SB 5924	Access to personnel records.	Concerns, did not pass	✓
SB 5995	Creating a professional license for spoken language interpreters and translators.	Negotiated to neutral, did not pass	✓
SB 6092	Disclosure of greenhouse gas emissions.	Negotiated to neutral, did not pass	NEUTRAL
SB 6134	Preventing overdose and illicit use of opioids in Washington state.	Negotiated to neutral, did not pass	✓

OTHER IMPORTANT BILLS

WSHA’s government affairs team tracks many health care bills to ensure that any new legislation supports access to high-quality care. Here are other bills that emerged during session that we worked on with members and partners.

BILL #	BILL DESCRIPTION	WSHA POSITION AND LEGISLATIVE OUTCOME	OVERALL FAVORABILITY FOR WSHA
HB 1859	The rights of residents in long-term care facilities.	Opposed, did not pass	✓
HB 1951	Promoting ethical artificial intelligence by protecting against algorithmic discrimination.	Concerns, did not pass	✓
HB 2041	Concerning physician assistant collaborative practice.	Neutral, passed	NEUTRAL
HB 2061	Defining an employee of a health care facility for purposes of mandatory overtime provisions.	Negotiated to neutral, passed	NEUTRAL
HB 1859	The rights of residents in long-term care facilities.	Negotiated to neutral, passed	✓

BILL #	BILL DESCRIPTION	WSHA POSITION AND LEGISLATIVE OUTCOME	OVERALL FAVORABILITY FOR WSHA
HB 1859	The rights of residents in long-term care facilities.	Opposed, did not pass	✓
HB 1951	Promoting ethical artificial intelligence by protecting against algorithmic discrimination.	Concerns, did not pass	✓
HB 2041	Concerning physician assistant collaborative practice.	Neutral, passed	NEUTRAL
HB 2061	Defining an employee of a health care facility for purposes of mandatory overtime provisions.	Negotiated to neutral, passed	NEUTRAL
HB 2102	Establishing requirements for the disclosure of health care information for qualifying persons to receive paid family and medical leave benefits.	Neutral, passed	NEUTRAL
HB 2166	Portable orders for life-sustaining treatment.	Neutral, did not pass	NEUTRAL
HB 2347	Adult family home information.	Supported, passed	✓
SB 5184	Licensure of anesthesiologist assistants.	Supported, passed	✓
SB 5481	Uniform law commission's uniform telehealth act.	Negotiated to neutral, passed	NEUTRAL
SB 5788	Accessibility for service animals in training.	Neutral, passed	NEUTRAL
SB 5838	Establishing an artificial intelligence task force.	Concerns, passed	✗
SB 5938	Noncompetition covenants.	Neutral, passed	NEUTRAL
SB 5982	Updating the definition of "vaccine" in RCW 70.290.010 to include all federal food and drug administration-approved immunizations recommended by the centers for disease control and prevention.	Supported, passed	✓
SB 5986	Protecting patients out of network ground ambulance balance billing.	Supported, passed	✓
SB 6110	Modernizing the child fatality statute.	Neutral, not passed	NEUTRAL
SB 6127	Increasing access to human immunodeficiency virus postexposure prophylaxis drugs or therapies.	Negotiated to neutral, passed	✓
SB 6210	Unlawful detainer actions and expanding superior court capacity.	Supported, not passed	✗
SB 6228	Concerning treatment of substance use disorders.	Negotiated to neutral, passed	✓



# WSHA's 2024 Budget Priorities

Forecasted state revenues increased by more than \$3 billion since lawmakers passed the 2023–2025 state budget last year. With a maintenance level cost of just \$2 billion and substantial reserves, state economists are now projecting a healthy balance of \$2.7 billion by 2025 with \$4 billion in reserves.

However, lawmakers were cautious with their spending, given this was a supplemental budget year, lawmakers made unprecedented investments in hospital and health care priorities in 2023, and there are three initiatives to come before voters in November 2024 that could substantially reduce state revenues.

## Top hospital and health system budget items *(in general order of priority)*

WSHA advocated for the following budget priorities during the legislative session: complex discharge funding; support for rural labor and delivery sustainability; funding to support reproductive care access in public hospital districts; funding for Medicaid coverage for partial hospitalization/intensive outpatient mental health treatment programs for adults; and increasing Medicaid payments for professional services.

We are pleased the budget funds the Washington Reproductive Access Alliance for public hospital districts, funds a new residential treatment facility for children/youth with developmental disabilities and complex behaviors that may provide more community capacity

for children/youth stuck in hospitals, and adds funding for hospitals at risk of reducing labor and delivery services.

We are disappointed the budget did not include funding for long-term care slots for complex discharge patients who are undocumented, Medicaid coverage of partial hospitalization/intensive outpatient treatment programs for adults or Medicaid payment increases for specialty providers.

The following includes a selection of major health care budget items funded in this year's budget. Additional details are available on WSHA's website.



### Hospital Specific Budget Items

- **\$2.9 million GFS/total for bridge grants to distressed hospitals, including those at risk of reducing labor and delivery services.** \$1.36 million is for designated hospitals and \$1.6 million is for low-volume birthing hospitals in danger of closing labor and delivery units.
- **\$412,000 GFS/total for UW to develop and implement the Washington Reproductive Access Alliance,** so public hospital districts can provide substantially equivalent services under the Reproductive Privacy Act.
- **\$300,000 total to fund the Surgical Smoke Evacuation System Reimbursement Account directed by SHB 1779 (2022).** Certain hospitals qualify for a reimbursement of \$1,000 per operating room to install surgical smoke evacuation systems.
- **\$1.6 million GFS (\$5.5 million total) to increase Medicaid payment rates to hospitals for the Substance Using Pregnant Person (SUPP) Program.**
- **\$2 million GFS/total for a pilot program to provide rapid methadone induction services** to clients in hospitals electing to provide these services on an inpatient basis.
- **\$274,000 GFS/total for an Office of Financial Management (OFM) study of pregnancy-related health care services.**
- **\$350,000 total for an OFM study of costs to the state related to tax breaks for non-profit health care providers** and a report to the legislature and Governor's Office by Oct. 1, 2024.
- **\$50,000 GFS/total to align the implementation plan for the creation of a real-time hospital bed tracking tool** for hospitals that meet WaTech requirements to begin in 2025.

### Complex Discharge Investments

- **\$2.1 million GFS/total to fund Office of Public Guardianship pilot program** through SB 5825 for eligible individuals in hospitals who are ready to discharge. Also funds legal decision maker/guardianship navigator and specialized guardianship training.
- **Governor's Complex Discharge Taskforce budget language amended to allow for expanded pilot participation.**

- **\$12.32 million GFS (\$15.25 million total) to provide operational funding for a residential treatment facility at Lake Burien** to support youth with developmental disabilities and behavioral challenges, requiring tailored care and structured support environments.
- **\$1.28 million GFS (\$2.75 million total) to increase the specialty dementia care rate add-on** from \$43.48 per client per day to \$50. WSHA has long supported the specialty dementia care rate add-on for long term care providers.
- **\$2.85 million GFS (\$7.1 million total) to increase Medicaid payments to non-emergent medical transportation providers** for return trips longer than 25 miles.

### Behavioral Health Investments

- **\$14.33 million GFS (\$24.41 million total) to enhance two reimbursement rates** paid to 90- and 180-day involuntary civil commitment bed providers. The first is a rate enhancement of \$500 per day for involuntary services for complex, difficult-to-place individuals with extensive needs.
- **\$135 million GFS/total to support operations at Olympic Heritage Behavioral Health (formerly Cascade Hospital) and add 72 inpatient psychiatric beds** for civil conversion patients currently at Western State Hospital.



- **\$20 million GFS/total to fund the UW Behavioral Health Teaching Facility** operation of 75 long-term behavioral health beds.
- **\$1.65 million GFS (\$1.9 million total) to increase support of youth stabilization teams** in the state's crisis system. Support is also included for rural crisis stabilization and withdrawal management facilities.

#### Workforce Investments

- **\$12.8 million total for the creation of a family medicine graduate medical education directed payment program** through the Family Medicine Residency Network to supplement family medicine provider graduate medical education.
- **\$3.17 million GFS/total for project management teams** to implement improvements to reduce the amount of time it takes to complete the health care licensing process.
- **\$426,000 GFS/total to help recruit and train a health care professional workforce in rural and urban underserved areas.**



#### Other Health Care Investments

- **\$71.04 million GFS/total for non-citizen Apple Health** (Medicaid look-alike) coverage expansion beginning July 1, 2024. This is estimated to cover up to 15,000 of the over 100,000 eligible adults.
- **\$2.4 million GFS (\$5.3 million total) to align eligibility requirements** for pregnant people and children at 210% of the federal poverty level, update maternity support services and create a post-delivery transitional care program for people with substance use disorder.







# The Road Ahead:

## 2025 Policy Preview

As we look ahead to 2025, we will continue to advocate for legislation that supports access to care, the health care workforce and transitioning patients out of hospitals who no longer have a medical need to be there. We expect bills harmful to hospitals' ability to provide access to care and maintain a strong workforce to resurface under the guise of "health care affordability." These bills include those that limit hospital transactions, limit hospitals' abilities to negotiate insurance contracts, cap hospital and provider cost growth, and eliminate facility fees for hospital outpatient departments.

In the interim, we will actively engage in the implementation process for new laws, support candidates who support hospitals through the Hospitals for a Healthy Future PAC and prepare and advocate for our 2025 legislative agenda.

We are also planning for our annual Hospital Advocacy Day, which is another important opportunity for our hospital leadership, board members and clinicians to "stand up and stand together" on the issues we are advocating for in Olympia. We look forward to another year of advocating for you and doing everything we can to work together to improve the health of our communities!

### Advocacy Day 2024

During this year's Advocacy Day, 109 hospital members representing 55 hospitals joined us for 111 meetings with legislators. They used this time to talk about the importance of hospital transactions in maintaining access to care, the benefits of allowing EMTs to work in hospitals and other priority issues.





**HOSPITALS** for a  
**HEALTHY FUTURE**  
**PAC**

## Advocacy Involves Relationships, Input and Political Action Committees

The Hospitals for a Healthy Future PAC (HHFPAC) and the American Hospital Association Political Action Committee help us build relationships and unify our political voices with state and federal lawmakers. The HHFPAC helps hospital and health system leaders elect health care champions and engage with policymakers on important issues.

Hospitals and the patients they serve have a lot at stake in the political process. This includes issues related to access to care, impacts of regulation, payment rates, health quality reporting, patient safety, health equity and much more. Your financial support helps us cultivate and elect lawmakers who are health care champions and keep hospital and patient issues at the forefront of the political debate in Olympia and Washington, D.C.

## The 2024 Hospitals for a Healthy Future Campaign

In 2023, our ambitious campaign raised more than \$220,000 from member contributions, and in 2024 we hope to meet our fundraising goal of \$300,000! Washington hospitals and health systems cannot be left behind as other interest groups out-raise us by significant margins. We need everyone's help getting to our goal and maintaining our political influence. Donate today.



To make your online donation to the Hospitals for a Healthy Future campaign or for more information about last year's efforts and how funds are spent, visit [wshaweb.com/hhfpac](https://wshaweb.com/hhfpac). Password: HHFPAC.

## Thank You for Testifying in Olympia

Our heartfelt thanks to everyone who testified in Olympia this year. Your voice and insight on health care is critical to good legislative decision-making. WSHA and legislators value the time you spend on improving health care policy.

**Kashi Arora**, Seattle Children's  
**Kim Bersing**, MultiCare Yakima Memorial Hospital  
**Diane Blake**, Cascade Medical Center  
**Jennifer Burkhardt**, Summit Pacific Medical Center  
**Tammy Buyok**, MultiCare Yakima Memorial Hospital  
**Kristy Carrington**, Providence Regional Medical Center Everett  
**Tamara Cesena**, Skagit Regional Health  
**Dr. Andrea Chatburn**, Providence Health  
**Dr. Christopher Dale**, Providence Health  
**Dr. Jeff Eisen**, MultiCare Health System  
**Madeline Grant**, UW Medicine Harborview Medical Center



**David Hargreaves**, MultiCare Yakima Memorial Hospital  
**Mike Marsh**, Overlake Medical Center & Clinics  
**Colton Myers**, Ferry County Public Hospital District  
**Dr. Ettore Palazzo**, EvergreenHealth  
**Bill Robertson**, MultiCare Health System  
**Dr. David Selander**, Providence Swedish  
**Dr. Megha Shah**, Virginia Mason Franciscan Health  
**Kelly Thompson**, Forks Community Hospital  
**Alex Town**, Samaritan Healthcare  
**Dr. Jessica Van Fleet-Green**, MultiCare Health System





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Hospital Association

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# RURAL HOSPITAL LEADERSHIP CONFERENCE

**JUNE 23-26, 2024**

Register now to join us for WSHA and AWPHD's Rural Hospital Leadership Conference at Campbell's Resort in Chelan! This members-only event focuses on education, discussions and networking on rural health care advocacy, safety and quality. The event is returning to its full schedule for the first time since 2019 in response to member feedback about how valuable this time is for CEOs to be together with their boards.

Register now at [wsa.org/chelan](https://wsa.org/chelan).



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Association of Washington  
Public Hospital Districts