

CERTIFICATION OF ENROLLMENT  
**ENGROSSED SUBSTITUTE HOUSE BILL 2582**

62nd Legislature  
2012 Regular Session

Passed by the House March 3, 2012  
Yeas 95 Nays 1

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**Speaker of the House of Representatives**

Passed by the Senate February 29, 2012  
Yeas 49 Nays 0

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**President of the Senate**

Approved

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**Governor of the State of Washington**

CERTIFICATE

I, Barbara Baker, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE HOUSE BILL 2582** as passed by the House of Representatives and the Senate on the dates hereon set forth.

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**Chief Clerk**

FILED

**Secretary of State  
State of Washington**

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**ENGROSSED SUBSTITUTE HOUSE BILL 2582**

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AS AMENDED BY THE SENATE

Passed Legislature - 2012 Regular Session

**State of Washington                      62nd Legislature                      2012 Regular Session**

**By** House Health Care & Wellness (originally sponsored by Representatives Johnson, Cody, Ross, Jinkins, Green, Walsh, Hinkle, Clibborn, Lias, Kenney, Klippert, Smith, Alexander, Warnick, Fagan, Bailey, Ahern, Asay, Dahlquist, Kretz, DeBolt, Angel, Kelley, Hunt, Dickerson, Ladenburg, Orcutt, Zeiger, Wilcox, Finn, Wylie, Probst, Darneille, Moscoso, Kagi, and Tharinger)

READ FIRST TIME 01/31/12.

1            AN ACT Relating to billing practices for health care services;  
2 adding a new section to chapter 70.01 RCW; and providing an effective  
3 date.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5            NEW SECTION.    **Sec. 1.** A new section is added to chapter 70.01 RCW  
6 to read as follows:

7            (1) Prior to the delivery of nonemergency services, a provider-  
8 based clinic that charges a facility fee shall provide a notice to any  
9 patient that the clinic is licensed as part of the hospital and the  
10 patient may receive a separate charge or billing for the facility  
11 component, which may result in a higher out-of-pocket expense.

12            (2) Each health care facility must post prominently in locations  
13 easily accessible to and visible by patients, including its web site,  
14 a statement that the provider-based clinic is licensed as part of the  
15 hospital and the patient may receive a separate charge or billing for  
16 the facility, which may result in a higher out-of-pocket expense.

17            (3) Nothing in this section applies to laboratory services, imaging  
18 services, or other ancillary health services not provided by staff  
19 employed by the health care facility.

1 (4) As part of the year-end financial reports submitted to the  
2 department of health pursuant to RCW 43.70.052, all hospitals with  
3 provider-based clinics that bill a separate facility fee shall report:

4 (a) The number of provider-based clinics owned or operated by the  
5 hospital that charge or bill a separate facility fee;

6 (b) The number of patient visits at each provider-based clinic for  
7 which a facility fee was charged or billed for the year;

8 (c) The revenue received by the hospital for the year by means of  
9 facility fees at each provider-based clinic; and

10 (d) The range of allowable facility fees paid by public or private  
11 payers at each provider-based clinic.

12 (5) For the purposes of this section:

13 (a) "Facility fee" means any separate charge or billing by a  
14 provider-based clinic in addition to a professional fee for physicians'  
15 services that is intended to cover building, electronic medical records  
16 systems, billing, and other administrative and operational expenses.

17 (b) "Provider-based clinic" means the site of an off-campus clinic  
18 or provider office located at least two hundred fifty yards from the  
19 main hospital buildings or as determined by the centers for medicare  
20 and medicaid services, that is owned by a hospital licensed under  
21 chapter 70.41 RCW or a health system that operates one or more  
22 hospitals licensed under chapter 70.41 RCW, is licensed as part of the  
23 hospital, and is primarily engaged in providing diagnostic and  
24 therapeutic care including medical history, physical examinations,  
25 assessment of health status, and treatment monitoring. This does not  
26 include clinics exclusively designed for and providing laboratory, x-  
27 ray, testing, therapy, pharmacy, or educational services and does not  
28 include facilities designated as rural health clinics.

29 NEW SECTION. **Sec. 2.** This act takes effect January 1, 2013.

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