## HOUSE BILL 1466

## State of Washington 69th Legislature 2025 Regular Session

**By** Representatives Fitzgibbon and Ormsby; by request of Office of Financial Management

Read first time 01/21/25. Referred to Committee on Appropriations.

AN ACT Relating to increasing the biennial funds contribution in lieu of state funds from the hospital safety net program; amending RCW 74.60.020; and providing a contingent effective date.

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

5 Sec. 1. RCW 74.60.020 and 2023 c 430 s 3 are each amended to 6 read as follows:

7 (1) A dedicated fund is hereby established within the state treasury to be known as the hospital safety net assessment fund. The 8 9 purpose and use of the fund shall be to receive and disburse funds, 10 together with accrued interest, in accordance with this chapter. 11 Moneys in the fund, including interest earned, shall not be used or 12 disbursed for any purposes other than those specified in this 13 chapter. Any amounts expended from the fund that are later recouped 14 by the authority on audit or otherwise shall be returned to the fund.

(a) Any unexpended balance in the fund at the end of a fiscal year shall carry over into the following fiscal year or that fiscal year and the following fiscal year and shall be applied to reduce the amount of the assessment under RCW 74.60.050(1)(c).

(b) If the program is discontinued, any amounts remaining in thefund shall be refunded to hospitals, pro rata according to the amount

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paid by the hospital since July 1, 2018, subject to the limitations
 of federal law.

3 (2) All assessments, interest, and penalties collected by the 4 authority under RCW 74.60.030 and 74.60.050 shall be deposited into 5 the fund.

6 (3) Disbursements from the fund are conditioned upon 7 appropriation and the continued availability of other funds 8 sufficient to maintain aggregate payment levels to hospitals for 9 inpatient and outpatient services covered by medicaid, including fee-10 for-service and managed care, at least at the levels the state paid 11 for those services on July 1, 2022, as adjusted for current 12 enrollment and utilization.

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(4) Disbursements from the fund may be made only:

14 (a) To make payments to hospitals and managed care organizations15 as specified in this chapter;

16 (b) To refund erroneous or excessive payments made by hospitals 17 pursuant to this chapter;

18 (c) For up to \$2,000,000 per biennium for payment of 19 administrative expenses incurred by the authority in performing the 20 activities authorized by this chapter;

21 (d) For ((<del>\$452,000,000 per</del>)) <u>\$527,000,000 during the 2025-2027</u> fiscal biennium, to be used in lieu of state general fund payments 22 23 for medicaid hospital services of which \$160,000,000 per biennium shall be used for appropriation by the legislature for postacute 24 25 hospital transitions, provided that if the full amount of the payments required under RCW 74.60.120 and 74.60.130 cannot be 26 distributed in a given fiscal year, this total amount must be reduced 27 28 proportionately;

(e) <u>Beginning July 1, 2027, \$552,000,000 per fiscal biennium, to</u>
be used in lieu of state general fund payments for medicaid hospital
services of which \$160,000,000 per fiscal biennium shall be used for
appropriation by the legislature for postacute hospital transitions,
provided that if the full amount of the payments required under RCW
74.60.120 and 74.60.130 cannot be distributed in a given fiscal year,
this total amount must be reduced proportionately;

36 <u>(f)</u> To repay the federal government for any excess payments made 37 to hospitals from the fund if the assessments or payment increases 38 set forth in this chapter are deemed out of compliance with federal 39 statutes and regulations in a final determination by a court of 40 competent jurisdiction with all appeals exhausted. In such a case, 1 the authority may require hospitals receiving excess payments to 2 refund the payments in question to the fund. The state in turn shall 3 return funds to the federal government in the same proportion as the 4 original financing. If a hospital is unable to refund payments, the 5 state shall develop either a payment plan, or deduct moneys from 6 future medicaid payments, or both;

7  $\left(\left(\frac{f}{f}\right)\right)$  (g) To pay an amount sufficient, when combined with the maximum available amount of federal funds necessary to provide a one 8 percent increase in medicaid hospital inpatient rates for medicaid 9 prospective payment system hospitals and designated public hospitals 10 11 that are eligible for quality improvement incentives under RCW 12 74.09.611. Only funds collected under RCW 74.60.030 shall be used to generate payments to medicaid prospective payment hospitals. Only 13 funds received under RCW 74.60.090 shall be used to generate payments 14 to designated public hospitals. By May 16, 2018, and by each May 16th 15 16 thereafter, the authority, in cooperation with the department of 17 health, must verify that all medicaid prospective payment system hospitals and all designated public hospitals are in substantial 18 19 compliance with the reporting requirements in RCW 43.70.052 and 70.01.040 for the prior period. Safety net assessment funds shall not 20 21 be used to pay quality improvement incentives to any other hospitals. 22 For the purposes of this subsection, "substantial compliance" means, in the prior period, the hospital has submitted at least 75 percent 23 24 of the required reports by the due date. The authority shall 25 distribute quality improvement incentives to hospitals that have met these requirements beginning upon implementation of the programs 26 27 authorized in chapter 430, Laws of 2023 and each January 1st 28 thereafter; and

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((<del>(g)</del>)) <u>(h)</u> For each state fiscal year to pay:

30 (i) ((Two million dollars)) <u>\$2,000,000</u> for integrated evidence-31 based psychiatry residency program slots that did not receive state 32 funding prior to 2016 at the integrated psychiatry residency program 33 at the University of Washington; and

(ii) ((Four million one hundred thousand dollars)) \$4,100,000 for family medicine residency program slots that did not receive state funding prior to 2016, as directed through the family medicine residency network at the University of Washington, for slots where residents are employed by hospitals. <u>NEW SECTION.</u> Sec. 2. Section 1 of this act takes effect when
 section 3, chapter 430, Laws of 2023 takes effect.

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