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SUBSTITUTE SENATE BILL 5579

State of Washington 69th Legislature 2025 Regular Session

By Senate Health & Long-Term Care (originally sponsored by Senators Cleveland, Muzzall, and Valdez)

READ FIRST TIME 02/21/25.

AN ACT Relating to prohibiting health carriers, facilities, and providers from making any public statements of any potential or planned contract terminations unless it satisfies a legal obligation; adding a new section to chapter 48.43 RCW; creating a new section; and prescribing penalties.

- 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 7 1. legislature finds that public NEW SECTION. Sec. The 8 communications and notices to health plan members by carriers, health 9 providers, or health care facilities during contract 10 negotiations have created concerns for enrollees, patients, 11 affected communities. Therefore, the legislature intends to provide 12 consistent policies for communication with enrollees and affected 13 communities regarding potential contract terminations.
- NEW SECTION. Sec. 2. A new section is added to chapter 48.43
 RCW to read as follows:
- 16 (1) In the case of a provider contract that is expiring by its 17 own terms or for which one party has given notice to the other party 18 of an intended termination without cause in accordance with the terms 19 of the provider contract, neither the health care provider, the 20 health care facility, nor the carrier may make or cause to be made

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public statements, including by directly communicating with impacted health plan enrollees and patients, regarding such expiration or termination until 45 days prior to the termination date, unless: (a) The disclosure is required to satisfy a specific legal obligation; or (b) the expiration or termination has already been disclosed publicly because of a legal obligation.

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- (2) Nothing in this section requires a carrier, health care facility, or health care provider to provide notice of a potential termination to enrollees, unless required to do so as a regulatory or legal requirement.
- (3) Public statements or communication with health plan enrollees or patients by a carrier, health care facility, or health care provider may not occur prior to the date the carrier, health care facility, or health care provider has given written notice of the termination to the other party, unless agreed upon by both parties.
- (4) (a) The commissioner, in consultation with health carriers, health care providers, health care facilities, and consumers, must develop standard template language for notices sent to health plan enrollees by health carriers, health care providers, or health care facilities pursuant to this section.
- 21 (b) Templates developed pursuant to this section must include, at 22 a minimum:
 - (i) A reference to the specific facility or facilities by name that would be affected by the potential contract termination and an indication of whether the potential termination would apply to hospital-based providers;
 - (ii) Direction to enrollees related to appointments that are scheduled past the date of the potential contract termination date; and
- 30 (iii) Information concerning the enrollee's continuity of care 31 rights pursuant to the federal no surprises act, 42 U.S.C. Sec. 32 300gg-111.
- 33 (c) All notices must be reviewed and approved by the commissioner 34 before being used in any manner.
- 35 (5)(a) The commissioner is authorized to enforce the provisions 36 of this act that are applicable to or regulate the conduct of 37 carriers issuing or renewing health plans or grandfathered health 38 plans to residents of Washington state on or after January 1, 2026. 39 In addition to the enforcement actions authorized under RCW 40 48.02.080, the commissioner may impose a civil monetary penalty in an

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amount not to exceed \$100 for each day for each individual with respect to which a failure to comply with these provisions occurs.

- (b) If the commissioner has cause to believe that any health care provider or health care facility has engaged in a pattern of unresolved violations of this section, the commissioner may submit information to the department of health or the appropriate disciplining authority for action. Prior to submitting information to the department of health or the appropriate disciplining authority, the commissioner may provide the health care provider or health care facility with an opportunity to cure the alleged violations or explain why the actions in question did not violate this section.
- (c) If any health care provider or health care facility has engaged in a pattern of unresolved violations of this section, the department of health or the appropriate disciplining authority may levy a fine or cost recovery upon the health care provider or health care facility in an amount not to exceed the applicable statutory amount per violation and take other action as permitted under the authority of the department of health or disciplining authority. Upon completion of its review of any potential violation submitted by the commissioner or initiated directly by an enrollee, the department of health or the disciplining authority shall notify the commissioner of the results of the review, including whether the violation was substantiated and any enforcement action taken as a result of a finding of a substantiated violation.
- (6) For the purposes of this section, "provider contract" means a written contract between a carrier and a health care provider or health care facility, as they are defined in RCW 48.43.005, for any health care services rendered to an enrollee.

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