



PREPROPOSAL STATEMENT OF INQUIRY

CR-101 (October 2017)
(Implements RCW 34.05.310)

Do **NOT** use for expedited rule making

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: December 13, 2024

TIME: 3:50 PM

WSR 25-01-099

Agency: Health Care Authority

Subject of possible rule making:

182-550-4900 Disproportionate share hospital (DSH) payments – General provision
182-550-4935 DSH eligibility – Change in hospital ownership
182-550-4940 Disproportionate share hospital independent audit findings and recoupment process
182-550-5000 Payment method – Low income disproportionate share hospital (LIDSH)
182-550-5150 Payment method – Medical care services disproportionate share hospital (MCSDSH)
182-550-5200 Payment method – Small rural disproportionate share hospital (SRDSH)
182-550-5300 Payment method – Children’s health program disproportionate share hospital (CHPDSH)
182-550-5400 Payment method – Public hospital disproportionate share hospital (PHDSH)
Other related rules as appropriate.

Statutes authorizing the agency to adopt rules on this subject: RCW 41.05.021, RCW 41.05.160

Reasons why rules on this subject may be needed and what they might accomplish: The agency is amending these rules as an overall housekeeping project. Additionally, the agency is removing definitions for “base year” and “uninsured patient”, removing “with special needs” language from low-income clients, updating the abbreviation of the medicaid inpatient utilization rate from MIPUR to MIUR to align with CMS, updating WAC cross referencing, standardizing language, removing language that the DSH application is posted to the agency’s website, updating that the agency will use the medicare cost report rather than the DRDF to determine a hospital’s MUIR, removing DSH programs no longer funded and not part of the program, and audit requests for additional information must be received 10 days from the initial notification. Also updating the name of the “provider data summary schedule (PDSS)” to “schedule of annual reporting requirements (SARR).” During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.

Identify other federal and state agencies that regulate this subject and the process coordinating the rule with these agencies: The Department of Social and Health Services (DSHS)

Process for developing new rule (check all that apply):

- Negotiated rule making
- Pilot rule making
- Agency study

Other (describe) The agency welcomes the public to take part in developing this rule. If interested, contact the person

identified below to receive an early rule draft to review. After the early review, the agency will send a notice of proposed rulemaking (CR-102) to everyone receiving this notice and anyone who requests a copy.

Interested parties can participate in the decision to adopt the new rule and formulation of the proposed rule before publication by contacting:

Name: Valerie Freudenstein (Rulemaking Questions)
Address: PO Box 42716, Olympia, WA 98504-2716
Phone: 360-725-1344
Fax: 360-586-9727

TTY: Telecommunication Relay Services (TRS): 711

Email: valerie.freudenstein@hca.wa.gov

Web site: www.hca.wa.gov/about-hca/rulemaking

Other:

(If necessary)


Name: Mary O’Hare (Program Questions)
Address: PO Box 42716, Olympia, WA 98504
Phone: 360-725-9820
Fax: 360-586-9727

TTY: Telecommunication Relay Services (TRS): 711

Email: mary.ohare@hca.wa.gov

Web site: www.hca.wa.gov/about-hca/rulemaking

Other:

| | |
|-------------------------------------|---|
| Additional comments: | |
| Date: December 13, 2024 | Signature:  |
| Name: Wendy Barcus | |
| Title: HCA Rules Coordinator | |