



# HEALTH SYSTEM TRANSPARENCY



## Approve SHB 2036 to improve accountability and access

**Healthcare spending is growing faster than purchasers can sustain while policymakers and patients face a delivery system that is increasingly complex and consolidated. While we have some price transparency, we have not yet overlaid that with network transparency in order to make this information more actionable.**

Nationally, hospitals account for one third of healthcare spending. Spending on hospitals is increasing steadily – this reflects greater growth in prices, in spite of slowing growth in the volume and intensity of services.<sup>1</sup> Meanwhile the healthcare system is changing rapidly due to financial and practice consolidation and technological changes. This is creating gaps in our regulatory system and increased confusion and loss of agency for patients.

**Several states – including California and Oregon – have taken action to regulate and oversee their increasingly consolidated healthcare delivery system.**

QUESTION	OTHER STATES	SHB 2036
How are health systems and facilities spending money? Where does their revenue come from?	CA, GA, MA, ME	Requires disclosure of expenses/revenues greater than \$50,000
How much are patients paying for facility fees?	CT	Standardizes reporting on facility fees for affiliated clinics
What are affiliated organizations?	CA, MA	Requires disclosure of institutional providers, parent organizations and other affiliated organizations
What's happening with quality, staffing and finances in clinics, where healthcare is shifting?	CA, OR, TX	Requires hospital-affiliated ambulatory care sites to follow the same reporting standards as hospitals; requires ambulatory surgery facilities to report service utilization and number of patient encounters
Are hospitals truly meeting their community benefit obligation?	CA, CO, GA, IL, NV, OR	Requires hospitals to disclose what benefits were provided, their cost, and if they relate to hospital services
How does medical debt collection work?	CA, CO, GA, IL, OR	Requires disclosure of debt collection practices and if there is a revenue-generating relationship between a hospital and debt collection company

To ensure patient access while addressing costs in the healthcare system, we need to understand cost drivers in the areas of largest healthcare spending: healthcare delivery. **Washington needs up-to-date oversight and transparency to create a sustainable healthcare system that works for us all.**

1. CMS Office of the Actuary Releases 2018 National Health Expenditures, Dec. 2019. [www.cms.gov/newsroom/press-releases/cms-office-actuary-releases-2018-national-health-expenditures](http://www.cms.gov/newsroom/press-releases/cms-office-actuary-releases-2018-national-health-expenditures)

**Washington State Labor Council, AFL-CIO – 906 Columbia St. SW, Olympia, WA, 98501 – 360-943-0608**

For more information, contact WSLC Legislative Director **Sybill Hyppolite** at [shyppolite@wslc.org](mailto:shyppolite@wslc.org) or 206-475-5783.