

December 13, 2023

Dr. Umair Shah, MD, MPH
Secretary of Health
Washington State Department of Health

Via email: secretary@doh.wa.gov

Dear Dr. Shah,

The undersigned more than 40 organizations are writing to express our deep concern over the current charity care rulemaking process by the Department of Health (DOH). We urge you to hold hospitals accountable and continue the rulemaking to incorporate the changes made by the legislature in [SHB 1616](#) and previously in [SSB 6273](#). We are concerned that the process currently underway will be paused due to litigation filed by the Washington State Hospital Association (WSHA) regarding DOH's recent [enforcement guidance](#), although it appears the litigation is nothing more than a delay tactic and should not be allowed to impede progress on the much-needed updates to obsolete regulations.

Hospitals are not telling patients about charity care. Without clear and understandable regulations on the books, patients may not be told about charity care, are given inaccurate and outdated information, and may be denied charity care inappropriately. A recent [survey](#) shows that many hospitals are not in compliance with the [notice requirements](#) of the charity care law, even though they have been in effect for more than five years. Based on survey results:

- an estimated one-third of callers to Washington hospitals are not being told about charity care,
- many hospital websites do not include accurate information about eligibility requirements;
- one-third of hospitals do not post a plain language summary of the policy on their websites.

This survey echoes the findings of repeat investigations by the Attorney General's Office, which has found as recently as November 2023 that a major health care system [failed to properly screen](#) people who could have been eligible for charity care.

Hospitals violating charity care notice requirements can have devastating effects.

Patients who are unaware that they would qualify for free or reduced cost care can end up with a pile of unpaid hospital bills that turn into medical debt. That medical debt is then assigned to a debt collector. Debt collectors can then tack on up to 50% more on the charges (for public hospitals), garnish up to 20% of every paycheck, or wipe out all but \$2,000 in a bank account. It is estimated 5% of the state population, or [400,000 people](#), are being hounded by debt collectors for medical bills.

Lawsuits for unpaid debt and associated costs compound the financial burden. University of Washington researcher Kali Curtis conducted [extensive research](#) on medical debt in Thurston County by reviewing court records in 2020 and found that the final debt amount increased by nearly 60%, from an average of \$1,200 to nearly \$2,000. Curtis says, “It’s obvious from looking at court records that people who can’t afford a medical bill certainly can’t afford the penalties and fees that get added as a result of getting sued. In many situations, people are working minimum wage jobs and having their wages garnished. This could all be avoided if hospitals were following the law and informing patients of charity care.”

Immigrants are disproportionately affected by hospitals failing to inform patients and denying them charity care and community organizations are starting to take action. Unidos Nueva Alianza, Foundation (UNA) and Wenatchee for Immigrant Justice (WIJ) see first-hand the problems immigrants face in trying to access charity care. WIJ Coordinator Jessica Ingman says, “Most immigrants in our area are English language learners, working multiple jobs throughout the year at widely varying rates of pay. Add on top of that, navigating many new and complex systems and managing their households and it can feel easier to accept a large debt rather than try to fight it.” After hearing repeated stories about inappropriate denials from patients, WIJ started holding regular community clinics to educate people about charity care and provide assistance with applications. Ingman says, “People hear about charity care from us or another community organization, not from the hospital. A poster on the wall isn’t enough and a single line on your bill or a website saying ‘financial assistance may be available’ isn’t enough. We need the Department of Health to make clear in the regulations that the law requires hospitals to screen all patients.”

Recent litigation appears to be a delay tactic. We are aware that WSHA has filed a lawsuit regarding DOH’s recent [Interpretive Statement](#) guidance, which asked hospitals to remove geographic restrictions on charity care. The lawsuit’s legal claims are unfounded as DOH is simply enforcing the law after learning that some hospitals were inappropriately denying charity care based on a patient’s residency location. We strongly encourage DOH not to allow industry pressure to impede the much-needed progress on updating the outdated charity care regulations.

It is critical that DOH continue the charity care rulemaking process without delay. Every day that passes without regulations reflecting the current charity care law means more people are accumulating medical debt unnecessarily, with disproportionate effects on communities of color. Of Washington residents [recently surveyed](#) who were asked about whether they incurred medical debt, depleted savings, or sacrificed basic necessities because of medical bills in the last year, for Hispanic/Latinx respondents, the answer was “yes” for 54% and for Black/African American respondents it was 56%, compared to 35% of white respondents.

To address these disparities and ensure the rights of patients are protected, the groups signing this letter request that you proceed with the rulemaking process and utilize the [recommendations](#) submitted on July 26, 2023 to make it clear that under *existing* law, hospitals must:

- screen all patients for charity care;
- comply with all notice requirements;
- provide resources for patients with limited English proficiency so they can be informed of charity care;
- take into account patient conditions that may hinder their ability to apply for charity care; and
- comply with reporting requirements.

It is not acceptable to allow hospitals to violate the law with impunity. As current and prior litigation has shown time and again, some hospitals deliberately deny patients access to charity care. We urge DOH to take appropriate enforcement action in situations where hospitals are not in compliance.

If you have any questions, please contact Leslie Bennett at leslie@nohla.org.

We appreciate your consideration.

Alliance for Equitable Healthcare
 ALS Association
 American Federation of Teachers - Washington
 Bleeding Disorder Foundation of Washington
 Cascade AIDS Project
 Clark County Volunteer Lawyers Program
 Columbia Legal Services
 Dollar For
 Economic Opportunity Institute
 Faith Action Network
 Firelands Workers Action/Acción de Trabajadores
 Health Care for All - Washington
 Health Care is a Human Right Washington
 Health Equity Circle Language Access Team Spokane
 Immigration and Race Justice Group of Leavenworth/Wenatchee
 Latino Community Fund of Washington State
 Legal Voice
 Leukemia and Lymphoma Society
 North Seattle Progressives
 North Seattle Troublemakers
 Northwest Health Law Advocates
 Patient Coalition of Washington
 Pro-Choice Washington
 Puget Sound Advocates for Retirement Action
 Retired Public Employees Council of Washington
 Save Secular Healthcare WA
 Seattle Chapter, National Organization for Women

SEIU 1199 NW
Solid Ground
Statewide Poverty Action Network
Teamsters 117
34th Legislative District Democrats Health Care Caucus
Unidos Nueva Alianza, Foundation
Washington CAN
Washington Physicians for Social Responsibility
Washington Poor People's Campaign
Washington State Coalition Against Domestic Violence
Washington State Coalition for Language Access
Washington State Labor Council
Washington State Nurses Association
Wenatchee for Immigrant Justice
Whole Washington

cc:

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