RCW 48.43.732 Provider contracts—Public statements—Language.

(1) In the case of a provider contract that is expiring by its own terms or for which one party has given notice to the other party of an intended termination without cause in accordance with the terms of the provider contract, neither the health care provider, the health care facility, any health care provider employed by, contracted with, or otherwise affiliated with the facility, nor the carrier may make or cause to be made 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. Communications exclusively with the governor, legislators, or state agency staff regarding a potential or intended contract termination do not constitute a public statement.

(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) By December 1, 2025, 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 and patients by health carriers, health care providers, or health care facilities pursuant to this section. The standard template language must be posted on the commissioner's website.

(b) Notices developed pursuant to this section must include, at a minimum:

(i) A reference to the specific facility or facilities by name that would be affected by the potential contract termination or expiration and an indication of whether the potential termination or expiration would apply to hospital-based providers;

(ii) Direction to enrollees related to appointments that are scheduled past the date of the potential contract termination or expiration date; and

(iii) Information concerning the enrollee's continuity of care rights pursuant to the federal no surprises act, 42 U.S.C. Sec. 300gg-111.

(c) Notices sent to enrollees or patients that solely utilize the template language developed pursuant to this section are not subject to review or approval. Notices to enrollees or patients that do not utilize the template language in full, or add to or revise the language of the template developed pursuant to this section, must be reviewed and approved by the commissioner before being used in any manner.

(5) By January 1, 2027, the requirements of this section must be included in all provider contracts. The commissioner must develop template language for inclusion in provider contracts by rule.

(6)(a) The commissioner is authorized to enforce the provisions of chapter 389, Laws of 2025 related to carriers on or after January

1, 2026. In addition to the enforcement actions authorized under RCW 48.02.080, the commissioner may impose a civil monetary penalty in an amount not to exceed $100 for each day that a notice has been sent to enrollees in advance of the 45-day period established in subsection (1) of this section for each enrollee to whom the notice has been sent.

(b) If the commissioner has cause to believe that any health care provider or health care facility has violated this section, the commissioner may submit information to the department of health, another appropriate health care facility licensing entity, or the appropriate health profession disciplining authority for action. The commissioner may provide the health care provider or health care facility with an opportunity to explain why the actions in question did not violate this section.

(c) If any health care provider or health care facility violates this section, the department of health, other appropriate health care facility licensing entity, or the appropriate health profession 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, 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.

(7) 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.

(8) This section does not apply to a provider contract that is expiring or being terminated by an independent individual provider or an independent single-specialty or multispecialty group practice of five or fewer providers, whether due to a provider's retirement or some other reason. For purposes of this subsection, "independent" means a provider that is not employed by or affiliated with a hospital or multihospital health system. [2025 c 389 s 2.]

Finding—Intent—2025 c 389: "The legislature finds that public communications and notices to health plan members by carriers, health care providers, or health care facilities during contract negotiations have created concerns for enrollees, patients, and affected communities. Therefore, the legislature intends to provide consistent policies for communication with enrollees and affected communities regarding potential contract terminations." [2025 c 389 s 1.]