

Multiple Agency Fiscal Note Summary

Bill Number: 1496 HB	Title: Health care information
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Estimated Cash Receipts

Agency Name	2025-27			2027-29			2029-31		
	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total
University of Washington	Non-zero but indeterminate cost and/or savings. Please see discussion.								
Total \$	0	0	0	0	0	0	0	0	0

Agency Name	2025-27		2027-29		2029-31	
	GF- State	Total	GF- State	Total	GF- State	Total
Local Gov. Courts						
Loc School dist-SPI						
Local Gov. Other	Non-zero but indeterminate cost and/or savings. Please see discussion.					
Local Gov. Total						

Estimated Operating Expenditures

Agency Name	2025-27				2027-29				2029-31			
	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total
Department of Social and Health Services	.0	0	0	0	.0	0	0	0	.0	0	0	0
Department of Health	.0	0	0	0	.0	0	0	0	.0	0	0	0
University of Washington	Non-zero but indeterminate cost and/or savings. Please see discussion.											
Total \$	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0

Agency Name	2025-27			2027-29			2029-31		
	FTEs	GF-State	Total	FTEs	GF-State	Total	FTEs	GF-State	Total
Local Gov. Courts									
Loc School dist-SPI									
Local Gov. Other			3,289,520			6,579,040			6,579,040
Local Gov. Other	In addition to the estimate above, there are additional indeterminate costs and/or savings. Please see individual fiscal note.								
Local Gov. Total			3,289,520			6,579,040			6,579,040

Estimated Capital Budget Expenditures

Agency Name	2025-27			2027-29			2029-31		
	FTEs	Bonds	Total	FTEs	Bonds	Total	FTEs	Bonds	Total
Department of Social and Health Services	.0	0	0	.0	0	0	.0	0	0
Department of Health	.0	0	0	.0	0	0	.0	0	0
University of Washington	.0	0	0	.0	0	0	.0	0	0
Total \$	0.0	0	0	0.0	0	0	0.0	0	0

Agency Name	2025-27			2027-29			2029-31		
	FTEs	GF-State	Total	FTEs	GF-State	Total	FTEs	GF-State	Total
Local Gov. Courts									
Loc School dist-SPI									
Local Gov. Other	Non-zero but indeterminate cost and/or savings. Please see discussion.								
Local Gov. Total									

Estimated Capital Budget Breakout

NONE

Prepared by: Amy Hatfield, OFM	Phone: (360) 280-7584	Date Published: Final 2/26/2025
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Individual State Agency Fiscal Note

Bill Number: 1496 HB	Title: Health care information	Agency: 300-Department of Social and Health Services
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Part I: Estimates

☒ No Fiscal Impact

Estimated Cash Receipts to:

NONE

Estimated Operating Expenditures from:

NONE

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

- ☐ If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
- ☐ If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
- ☐ Capital budget impact, complete Part IV.
- ☒ Requires new rule making, complete Part V.

Legislative Contact:	Phone:	Date: 02/21/2025
Agency Preparation: Mitchell Close	Phone: 3600000000	Date: 02/21/2025
Agency Approval: Dan Winkley	Phone: 360-902-8236	Date: 02/21/2025
OFM Review: Amy Hatfield	Phone: (360) 280-7584	Date: 02/26/2025

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

Section 1 of this legislation allows health care providers and facilities to charge a reasonable fee of no more than \$50 for providing health care information. The Department of Social and Health Services (DSHS) shall adopt rules to establish standards for this reasonable fee. Any costs to complete rulemaking are anticipated to be minimal, and passage of this legislation will not impact DSHS client benefits. Therefore, there is no fiscal impact to DSHS from this bill.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

New or amended rules may be needed to implement this legislation.

Individual State Agency Fiscal Note

Bill Number: 1496 HB	Title: Health care information	Agency: 303-Department of Health
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Part I: Estimates

☒ No Fiscal Impact

Estimated Cash Receipts to:

NONE

Estimated Operating Expenditures from:

NONE

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

- ☐ If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
- ☐ If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
- ☐ Capital budget impact, complete Part IV.
- ☐ Requires new rule making, complete Part V.

Legislative Contact:	Phone:	Date: 02/21/2025
Agency Preparation: Donna Compton	Phone: 360-236-4538	Date: 02/24/2025
Agency Approval: Kristin Bettridge	Phone: 3607911657	Date: 02/24/2025
OFM Review: Amy Hatfield	Phone: (360) 280-7584	Date: 02/26/2025

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

Section 1: This bill requires the Department of Social and Health Services (DSHS) to adopt rules related to reasonable fees for obtaining copies of medical records. No fiscal impact to the Department of Health (DOH).

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

NONE

III. B - Expenditures by Object Or Purpose

NONE

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

Individual State Agency Fiscal Note

Bill Number: 1496 HB	Title: Health care information	Agency: 360-University of Washington
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Part I: Estimates

☐ No Fiscal Impact

Estimated Cash Receipts to:

Non-zero but indeterminate cost and/or savings. Please see discussion.

Estimated Operating Expenditures from:

Non-zero but indeterminate cost and/or savings. Please see discussion.

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

- ☒ If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
- ☐ If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
- ☐ Capital budget impact, complete Part IV.
- ☐ Requires new rule making, complete Part V.

Legislative Contact:	Phone:	Date: 02/21/2025
Agency Preparation: Michael Lantz	Phone: 2065437466	Date: 02/25/2025
Agency Approval: Michael Lantz	Phone: 2065437466	Date: 02/25/2025
OFM Review: Ramona Nabors	Phone: (360) 742-8948	Date: 02/25/2025

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

HB 1496 concerns access to patient records.

Section 1 allows health care providers and facilities to charge reasonable fees to provide healthcare information. For certain specified requests, the fees may not exceed \$50. This includes information requested by the patient, patient's representative, patient's attorney, a provider or facility caring for the patient, a community-based or system-based advocate for the patient, or the patient's guardian. For all other medical records requests, this section requires the Washington State Department of Health (DOH) to adopt rules to establish standards for reasonable fees, which must be based upon the actual costs of searching and producing the patient's records. The fee may not be based upon a per page calculation.

The remaining sections update the procedures for requesting and distributing health care records.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

Due to the provisions contained in Section 1, HB 1496 will have an indeterminate negative cash receipts impact on UW Medicine. However, the fiscal impact is likely to exceed \$50,000 per fiscal year.

UW Medicine currently only charges for medical records in limited instances, including if the request comes from an attorney or insurance provider. UW Medicine does not charge for medical records if the request comes directly from a patient or other providers caring for the patient. UW Medicine also sets caps on the total allowable charges for individual records requests. The maximum charges a request could incur do not exceed \$137 before applicable taxes.

Under Section 1(2)(a) of SB 5254, UW Medicine will only be able to charge a \$50 fee for records requests made by an attorney representing a patient. Over the last five months, UW Medicine has received approximately 1,910 records requests related to legal services. The average cost to provide these records was \$105.14. Therefore, there is an anticipated loss of revenue of approximately \$55.14 per request, which would total \$252,780 per FY.

Meanwhile, records requests related to insurance numbered approximately 879 over the past five months, with an average cost of \$83.93. Given the bill language directs DOH to adopt rules around a reasonable fee, the fiscal impacts for this section are currently indeterminate. However, given the bill language specifies the standards must be based upon the actual costs of searching and producing the particular patient's records, UW Medicine assumes the standards adopted may require tracking and setting a fee schedule for the time required for each individual request, which may not be feasible to implement. Therefore, this could result in a fiscal impact of between \$0-\$177,059 per FY.

For this reason, the overall impact of HB 1496 is assessed as indeterminate, but significantly over \$50,000 per year.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

HB 1496 would require changes to record management processes at UW Medicine, which may result in impacts to staff FTE due to updating processes, materials, and time studies. These impacts are currently unknown and indeterminate for the purposes of this fiscal note.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Non-zero but indeterminate cost and/or savings. Please see discussion.

III. B - Expenditures by Object Or Purpose

Non-zero but indeterminate cost and/or savings. Please see discussion.

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

III. D - Expenditures By Program (optional)

NONE

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

LOCAL GOVERNMENT FISCAL NOTE

Department of Commerce

Bill Number: 1496 HB	Title: Health care information
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Part I: Jurisdiction-Location, type or status of political subdivision defines range of fiscal impacts.

Legislation Impacts:

- ☒ Cities: Municipal Jails
- ☒ Counties: County Jails
- ☒ Special Districts: Public hospital districts (PHD) and Behavioral Health Administration Service Organizations (BH-ASO)
- ☐ Specific jurisdictions only:
- ☐ Variance occurs due to:

Part II: Estimates

- ☐ No fiscal impacts.
- ☐ Expenditures represent one-time costs:
- ☐ Legislation provides local option:
- ☒ Key variables cannot be estimated with certainty at this time: Total increase in PHD expenditures caused by an expected increase in health care information requests from plaintiff attorneys; Decrease in PHD revenue due to the bill requiring a switch over from a per page fee to a capped fee; and the increase in local jail revenue generated from charging a fee for health care information requests

Estimated revenue impacts to:

Non-zero but indeterminate cost and/or savings. Please see discussion.

Estimated expenditure impacts to:

Jurisdiction	FY 2026	FY 2027	2025-27	2027-29	2029-31
County	1,644,760	1,644,760	3,289,520	6,579,040	6,579,040
TOTAL \$	1,644,760	1,644,760	3,289,520	6,579,040	6,579,040
GRAND TOTAL \$	16,447,600				

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

Part III: Preparation and Approval

Fiscal Note Analyst: Brandon Rountree	Phone: (360) 999-7103	Date: 02/25/2025
Leg. Committee Contact:	Phone:	Date: 02/21/2025
Agency Approval: Allan Johnson	Phone: 360-725-5033	Date: 02/25/2025
OFM Review: Amy Hatfield	Phone: (360) 280-7584	Date: 02/26/2025

Part IV: Analysis

A. SUMMARY OF BILL

Description of the bill with an emphasis on how it impacts local government.

Overview: This bill would establish the circumstances when a health care provider or health care facility may or may not charge more than a \$50 fee for providing health care information to a person. The bill would also expand and clarify who and how a patient's health care information can be requested and released on behalf of the patient.

Sec. 1 (Adds New Section to RCW 70.02)

Subsection (1) would establish the circumstances when a health care provider or health care facility may not charge more than a \$50 fee for providing health care information to a person. Subsection (1) would also establish the requirement for a health care provider or health care facility to follow all Department of Health (DOH) rules established under Subsection (3).

Subsection (2) (a) (i-vi) would outline and establish the circumstances when a health care provider or health care facility may not charge more than a \$50 fee when providing health care information to a person.

Subsection (2) (b) would expand the \$50 limit established in (a) of this subsection to include any third party acting on behalf of a health care provider or health care facility.

Subsection (3) would require DOH to adopt rules to establish standards for a reasonable fee that a health care provider or health care facility may charge for providing access to or exchanging health care information. These standards are required to recognize the prevalence of the use of electronic health record searching and exchange capabilities and consider related federal laws. The standards must also be based upon the actual cost of searching and producing the particular patient's health care information and may not be based upon per page calculations.

Sec. 2 (Amends RCW 70.02.010)

Removes the definition for "legal counsel" (page 7 line 20) and "reasonable fee" (page 8 line 22) from the definitions list.

Sec. 3 (Amends RCW 70.02.030)

Adds and removes language from subsection (1) that would expand and clarify the requirement for a health care provider or health care facility to assist the designated recipient with obtaining the recorded health care information when requested. The added language would also expand the circumstances when a health care provider or health care facility can deny a patient's request to include exemptions required under federal law.

Adds and removes language to subsection (2) by removing the entirety of the previous subsection (2) and moving up the below subsections by one to replace the removed subsection. The added language to subsection (2) (a) would expand the required signature for disclosure authorization to include the patient's personal representative or any person, or entity designated by the patient to receive the information.

Sec. 4 (Amends RCW 70.02.080)

Adds and removes language from subsection (1) that would change "examine or copy" to "obtain".

Adds language to subsection (1) (a) that would expand the list of people or entities that can request a patient's recorded health care information to include the patient's personal representative, or any person or entity designated by the patient to receive the information.

Removes "RCW 70.02.030" (page 12 line 8) from subsection (2) and replaces it with "section 1 of this act".

Removes "providing" (page 12 line 9) and replaces it with "assisting the designated recipient to obtain".

Removes "permit examination or copying" (page 12 line 11) with "provide the health care information".

Sec. 5 (Amends RCW 70.02.090)

Adds language to subsection (1) (e) that would clarify the prohibited access to requested health care information to include both state and federal laws.

Adds and removes language to subsection (2) that would replace "examination and copying" with "the patient to obtain health care information". Additionally, this legislation would remove "examine or copy" with "obtain".

Adds and removes language to subsection (3) that would replace "examination and copying" with "obtaining health care information". Additionally, this legislation would remove "examination and copying of the record by" and add "to obtain

the health care information if the other health care provider has been”.

Sec. 6 (Amends RCW 70.02.170)

Adds language that would create a fifth subsection which would outline what “prevailing patient” includes.

Sec. 8 (Amends RCW 70.02.260)

Adds language that would create a tenth subsection which would utilize the definition of “legal counsel” from RCW 71.05.020 for this section.

B. SUMMARY OF EXPENDITURE IMPACTS

Expenditure impacts of the legislation on local governments with the expenditure provisions identified by section number and when appropriate, the detail of expenditures. Delineated between city, county and special district impacts.

This bill would indeterminately increase public hospital district (PHD) expenditures due to an expected increase in health care information requests and the bill’s capping of health care information requests request fees.

The Washington state Hospital Association (WSHA) expects this bill to increase PHD expenditures because this bill would remove the current per page fee and replace it with “a new cap on” health care information requests. WSHA believes this change in health care information request fees would cause an increase in PHD expenditures because hospitals often send decades of records or tens of thousands of documents to attorneys and the proposed \$50 fee increase would not be sufficient at recouping the cost associated with fulfilling larger health care information requests.

This bill also could increase city and county jail expenditures by \$4,851,000 ($97,036 \times \$50 = \$4,036,000$)

This bill is projected by the Washington state Association of Sheriffs and Police Chiefs (WASPC) to increase statewide local jail expenditures by approximately \$4,851,000 a year. WASPC utilized data from the 2023 Comparative Jail Survey Results to estimate the approximate total number of statewide jail admissions. WASPC assumes the results of the JSTF 2023 Comparative Jail Survey Results were accurate and estimate that 121,295 or 125,602 are annually admitted to jails statewide. WASPC also estimates 80% of jail admissions require medical record requests due to many inmates having diagnosed conditions, medication requirements, mental illness or other needs where consulting a prior clinic/physician for records is necessary.

Based off WASPCs estimations for annual jail admissions and percent of inmate admissions that require health care information requests upon admission, WASPC estimates that 97,036 inmates would require health care information requests upon admission. If jails were to be charged the maximum fee of \$50 per request, the estimated total increase in local jail expenditures would be \$4,851,000.

The expenditure impact on local jails was reported to the Local Government Fiscal Note Program by WASPCs with that assumption local jails could start being charged the fee for when requesting health care information. However, local jails are currently not being charged a health care information request fee when requesting inmate medical records, and the University of Washington reported that they do not plan to start charging jails for health care information requests.

The Washington state Association of Local Public Health Officials (WALPHO) would expect some jails to indeterminately mitigate health care information requests request fees if there are shared health electronic health records or a local jail has an agreement in place.

C. SUMMARY OF REVENUE IMPACTS

Revenue impacts of the legislation on local governments, with the revenue provisions identified by section number, and when appropriate, the detail of revenue sources. Delineated between city, county and special district impacts.

This bill would indeterminately decrease public hospital districts (PHD) revenue due to the bill capping health care information request fees.

PHD currently generate revenue from health care information requests by charging a per page fee. The Washington state Hospital Association (WSHA) expects hospital revenue generated from health care information requests to become negative due to hospitals having to often send decades of records or tens of thousands of documents to attorneys. WSHA believe that switching from a per page fee to “a new cap on” health care information requests would result in hospitals becoming unable to recoup the cost associated with fulfilling larger health care information requests.

This bill would also indeterminately increase local jail revenue due to the bill allowing health care facilities to charge a fee for health care information requests.

The Washington state Association of Local Public Health Officials (WALPHO) would expect local jails to start charging a fee for fulfilling health care information requests and generate an indeterminate increase in revenue.

SOURCES:

Washington state Association of Local Public Health Officials (WALPHO)

Washington state Hospital Association (WSHA)

Washington state Association of Sheriffs and Police Chiefs (WASPC)

Jail Standards Task Force Comparative Jail Survey Results 2023

Joint Legislative Task Force on Jail Standards Final Report 2023

University of Washington Fiscal Note, SB 5254, (2025)



Multiple Agency Ten-Year Analysis Summary

Bill Number	Title
1496 HB	Health care information

This ten-year analysis is limited to the estimated cash receipts associated with the proposed tax or fee increases.

Estimated Cash Receipts

Department of Social and Health Services	0	0	0	0	0	0	0	0	0	0	0
Department of Health	0	0	0	0	0	0	0	0	0	0	0
University of Washington Indeterminate Impact	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0	0



Ten-Year Analysis

Bill Number 1496 HB	Title Health care information	Agency 300 Department of Social and Health Services
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This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at <http://www.ofm.wa.gov/tax/default.asp>.

Estimates

☒ **No Cash Receipts** ☐ **Partially Indeterminate Cash Receipts** ☐ **Indeterminate Cash Receipts**

Name of Tax or Fee	Acct Code											
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Agency Preparation: Mitchell Close	Phone: 3600000000	Date: 2/21/2025 4:37:20 pm
Agency Approval: Dan Winkley	Phone: 360-902-8236	Date: 2/21/2025 4:37:20 pm
OFM Review:	Phone:	Date:



Ten-Year Analysis

Bill Number 1496 HB	Title Health care information	Agency 303 Department of Health
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This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at <http://www.ofm.wa.gov/tax/default.asp>.

Estimates

☒ **No Cash Receipts** ☐ **Partially Indeterminate Cash Receipts** ☐ **Indeterminate Cash Receipts**

Name of Tax or Fee	Acct Code											
--------------------	-----------	--	--	--	--	--	--	--	--	--	--	--

Agency Preparation: Donna Compton	Phone: 360-236-4538	Date: 2/24/2025 3:37:31 pm
Agency Approval: Kristin Bettridge	Phone: 3607911657	Date: 2/24/2025 3:37:31 pm
OFM Review:	Phone:	Date:



Ten-Year Analysis

Bill Number 1496 HB	Title Health care information	Agency 360 University of Washington
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This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at <http://www.ofm.wa.gov/tax/default.asp>.

Estimates

☐ **No Cash Receipts** ☐ **Partially Indeterminate Cash Receipts** ☒ **Indeterminate Cash Receipts**

Estimated Cash Receipts

Name of Tax or Fee	Acct Code											
Total												

Biennial Totals

Narrative Explanation (Required for Indeterminate Cash Receipts)

Due to the provisions contained in Section 1, HB 1496 will have an indeterminate negative cash receipts impact on UW Medicine. However, the fiscal impact is likely to exceed \$50,000 per fiscal year.

UW Medicine currently only charges for medical records in limited instances, including if the request comes from an attorney or insurance provider. UW Medicine does not charge for medical records if the request comes directly from a patient or other providers caring for the patient. UW Medicine also sets caps on the total allowable charge for individual records requests. The maximum charges a request could incur do not exceed \$137 before applicable taxes.

Under Section 1(2)(a) of SB 5254, UW Medicine will only be able to charge a \$50 fee for records requests made by an attorney representing a patient. Over the last five months, UW Medicine has received approximately 1,910 records requests related to legal services. The average cost to provide these records was \$105.14. Therefore, there is an anticipated loss of revenue of approximately \$55.14 per request, which would total \$252,780 per FY.

Meanwhile, records requests related to insurance numbered approximately 879 over the past five months, with an average cost of \$83.93. Given the bill language directs DOH to adopt rules around a reasonable fee, the fiscal impacts for this section are currently indeterminate. However, given the bill language specifies the standards must be based upon the actual costs of searching and producing the particular patient's records, UW Medicine assumes the standards adopted may require tracking and setting a fee schedule for the time required for each individual request, which may not be feasible to implement. Therefore, this could result in a fiscal impact of between \$0-\$177,000 per FY.



Ten-Year Analysis

Bill Number	Title	Agency
1496 HB	Health care information	360 University of Washington

This ten-year analysis is limited to agency estimated cash receipts associated with the proposed tax or fee increases. The Office of Financial Management ten-year projection can be found at <http://www.ofm.wa.gov/tax/default.asp> .

Narrative Explanation (Required for Indeterminate Cash Receipts)

For this reason, the overall impact of HB 1496 is assessed as indeterminate, but significantly over \$50,000 per year.

Agency Preparation: Michael Lantz	Phone: 2065437466	Date: 2/25/2025 12:41:03 pm
Agency Approval: Michael Lantz	Phone: 2065437466	Date: 2/25/2025 12:41:03 pm
OFM Review:	Phone:	Date: