- WAC 246-455-035 Waiver for reporting the additional patient demographic information. (1) Beginning October 1, 2022, a hospital that is certified by the Centers for Medicare and Medicaid Services as a critical access hospital, is certified by the Centers of Medicare and Medicaid Services as a sole community hospital, or qualifies as a medicare dependent hospital must comply with this section.
- (2)(a) A hospital subject to the additional patient demographic information reporting requirements in RCW 43.70.052 (6)(a) and WAC 246-455-025, and is experiencing an economic hardship, technological limitations that are not reasonably in the control of the hospital, or other exceptional circumstance demonstrated by the hospital, may submit an attestation to the department requesting a waiver of the additional patient demographic information reporting requirements in RCW 43.70.052 (6)(a) and WAC 246-455-025.
- (b) The waiver attestation with supporting documentation must be submitted on forms provided by the department. The waiver is deemed granted upon written or electronic approval from the department. The department may request additional information to complete the attestation. The department, in its discretion, may deny the waiver request if the hospital fails to comply with the requirements in RCW 43.70.052(6) and this section.
- (c) A hospital that has been granted a waiver shall be exempt from reporting the additional patient discharge information outlined by WAC 246-455-025 for one calendar year. The one calendar year starts at the beginning of the next calendar month after the waiver is approved. The waiver is effective when the department sends written or electronic approval to the hospital.
- (d) A hospital seeking an extension on its approved waiver must apply for an extension before the waiver expires. If the hospital does not apply for an extension before the waiver expires, the hospital must collect and report the additional patient discharge information in RCW 43.70.052 (6)(a) and WAC 246-455-025 and will not be eligible for an additional waiver.
- (e) For economic hardship or technological limitations that are not reasonably in the control of the hospital, a hospital may only submit up to a total of three waiver attestations to the department.
- (f) For other exceptional circumstances, there is no limit on the number of waiver attestations that a hospital may submit to the department.
- (g) The hospital must begin collecting the additional patient discharge information in RCW 43.70.052 (6)(a) and WAC 246-455-025 immediately following the waiver expiration.
- (h) Data collected under a waiver must be reported consistent with WAC 246-455-020, and data collected after the waiver expiration must be reported consistent with both WAC 246-455-020 and 246-455-025. Data must be submitted according to the deadline for submission required by WAC 246-455-050.
 - (3) For the purposes of this section:
 - (a) Economic hardship means:
- (i) A hospital with less than 30 days of operating days in cash as of December 31st based on audited financial statements;
- (ii) A hospital with a net loss or a negative change in net assets for two consecutive years based on audited financial statements;
- (iii) A bankruptcy in the previous year or a waiver submitted under this section due to bankruptcy in the previous year;
 - (iv) Opening a new hospital after January 1, 2022;

- (v) Operating a low-income hospital, that is defined as a hospital serving a minimum of 30 percent medicaid patients; or
- (vi) Intent to discontinue operating in Washington prior to January 1, 2023.
- (b) Technological limitation that is not reasonable in the control of the hospital means the integration of electronic health records system changes, switching electronic health record system vendors, or updating the hospital's current electronic health record system to comply with the requirements of this section and is in progress but has not yet been completed; and
- (c) Other exceptional circumstance means unforeseen circumstances that stress the hospital in such a way that compliance is not possible. Examples may include, but are not limited to, natural disasters, widespread health care emergencies, unforeseen barriers to integration, or unforeseen events that results in a statewide emergency.

[Statutory Authority: 2021 c 162 and RCW 43.70.052. WSR 22-13-187, \$246-455-035, filed 6/22/22, effective 10/1/22.]