

CERTIFICATION OF ENROLLMENT

**ENGROSSED SECOND SUBSTITUTE HOUSE BILL 1686**

69th Legislature  
2025 Regular Session

Passed by the House March 10, 2025  
Yeas 86 Nays 7

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**Speaker of the House of  
Representatives**

Passed by the Senate April 14, 2025  
Yeas 49 Nays 0

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**President of the Senate**

Approved

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**Governor of the State of Washington**

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **ENGROSSED SECOND SUBSTITUTE HOUSE BILL 1686** as passed by the House of Representatives and the Senate on the dates hereon set forth.

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**Chief Clerk**

FILED

**Secretary of State  
State of Washington**

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ENGROSSED SECOND SUBSTITUTE HOUSE BILL 1686

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Passed Legislature - 2025 Regular Session

State of Washington

69th Legislature

2025 Regular Session

By House Appropriations (originally sponsored by Representatives Bronoske, Fosse, Reed, Scott, Nance, Hill, and Macri)

READ FIRST TIME 02/28/25.

1 AN ACT Relating to creating a health care entity registry; adding  
2 a new section to chapter 43.70 RCW; and creating new sections.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** (1) The legislature finds that:

5 (a) Washington's health care landscape is changing rapidly. A  
6 2023 report by the office of the insurance commissioner identified  
7 that Washington has experienced substantial horizontal consolidation  
8 and vertical integration across health care providers, facilities,  
9 and insurers;

10 (b) Washington's health care market is also experiencing  
11 investment from new for-profit entities such as private equity  
12 firms. While there were only four private equity acquisitions in  
13 Washington in 2014, this number had grown to 97 by 2023;

14 (c) These changes to Washington's health care landscape have not  
15 resolved access and affordability challenges. A 2024 survey of over  
16 1,000 Washingtonians found that over half skipped needed care due to  
17 cost. Department of health data indicates substantial health  
18 disparities based on geographic location. Many rural Washingtonians  
19 experience health care deserts for essential care; and

20 (d) Washington is currently unable to evaluate how changes in the  
21 health care landscape are impacting access and affordability because

1 the state lacks a complete and transparent registry of health care  
2 systems and entities. While the state collects some information about  
3 health insurers through annual financial statement filing  
4 requirements, there is no similar information available for other  
5 kinds of health care systems and entities. The office of financial  
6 management identified this critical data infrastructure gap in 2010,  
7 but it has not yet been resolved. Recent reports in 2023 and 2024 by  
8 the office of financial management, the office of the insurance  
9 commissioner, and the health care cost transparency board have  
10 indicated this data gap continues to prevent effective stewardship of  
11 health care resources and state health planning.

12 (2) Therefore, the legislature intends to develop a plan and  
13 recommendations with the goal of establishing a complete and  
14 interactive registry that will allow for the monitoring and measuring  
15 of changes in the health care landscape to better understand trends  
16 in health care market consolidation, with the goal of improving  
17 access and affordability.

18 NEW SECTION. **Sec. 2.** A new section is added to chapter 43.70  
19 RCW to read as follows:

20 (1) The department, in consultation with the health care  
21 authority, the office of the insurance commissioner, the office of  
22 the governor, and the office of financial management, and with input  
23 from stakeholders shall develop a plan and provide recommendations to  
24 the legislature as to how to create a complete and interactive  
25 registry of the health care landscape in Washington. The plan and  
26 recommendations must identify:

27 (a) The health care entities, including but not limited to  
28 licensed and unlicensed facilities, providers, provider groups,  
29 systems, carriers, and health care benefit managers, that must  
30 report;

31 (b) The information that each entity must report; and

32 (c) The fee to be charged to the registering entities, which may  
33 be tiered, to support the registration process and creation of the  
34 registry.

35 (2) In developing the plan and recommendations, the department  
36 must consider:

37 (a) Opportunities to streamline reporting and consider  
38 opportunities to allow for information sharing between state agencies

1 for health care entities and health care providers licensed or  
2 certified by a state agency; and

3 (b) Strategies to fully understand and monitor the business  
4 structure, funding, and contractual relationships of health care  
5 entities in Washington, including the current status and future  
6 changes in the direct or indirect ownership, control, or affiliation  
7 of and between health care entities and other entities and  
8 organizations, including private equity investment, that serve  
9 Washingtonians.

10 (3) The department shall provide a progress update to the  
11 relevant health and fiscal committees of the legislature by December  
12 31, 2027, and a final report by November 1, 2028. The final report  
13 must identify any remaining data gaps and recommend an implementation  
14 plan for the registry.

15 NEW SECTION. **Sec. 3.** If specific funding for the purposes of  
16 this act, referencing this act by bill or chapter number, is not  
17 provided by June 30, 2025, in the omnibus appropriations act, this  
18 act is null and void.

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