

# Impact of HR 1 to Washington Providers

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# Agenda

1. MultiCare Health System Overview

2. HR 1

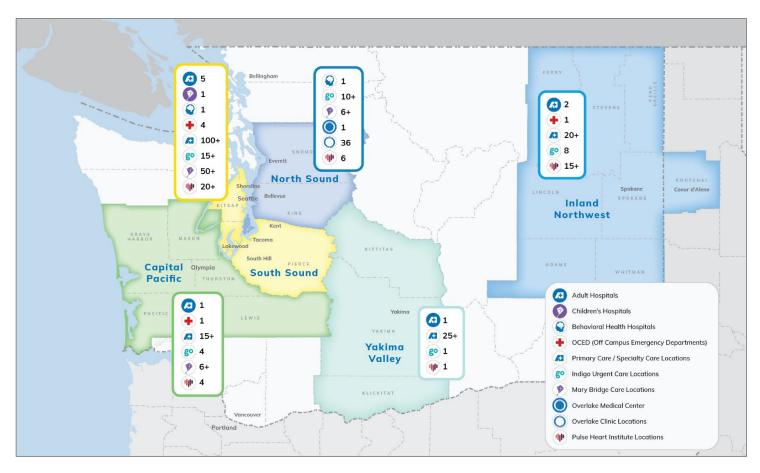
3. Impact to Washington Providers

4. Q&A



# MultiCare at a Glance

# Ranked 2nd Statewide with 21% Inpatient Market Share





Research

Investigators

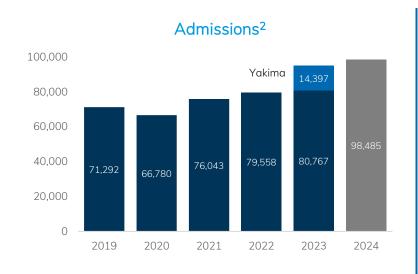
#### Notes:

- 1. All data as of 12/31/2024, excluding Overlake, unless specifically indicated
- Overlake Medical Center and our joint venture with Virginia Mason Franciscan Health, Wellfound Behavioral Health Hospital, and its 120 licensed beds, are included in these counts, plus beds in development
- 8. Specific zip codes within King County are part of our South Sound Region
- Includes Overlake; Operating Revenues include Overlake FY2024 ending June 30

Patient Visits for

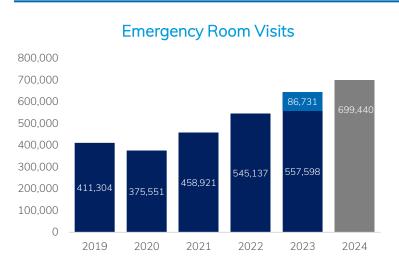
Research Studies

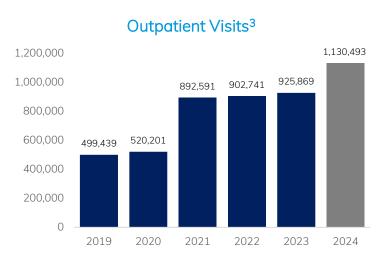
# Strong Volume Growth – Both Inpatient and Outpatient Services (1)











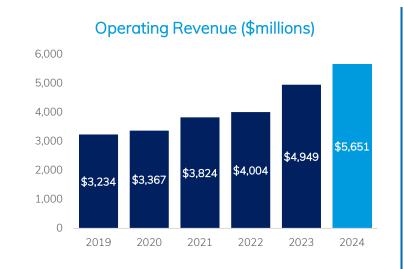
- Volume continues to be strong with inpatient admissions up by 3.5% and OR cases up by 9.7%
- Continues to manage and drive ALOS down to pre-pandemic levels
- Significant 3-year reduction in ALOS despite stable/growing case mix index

Excludes Overlake

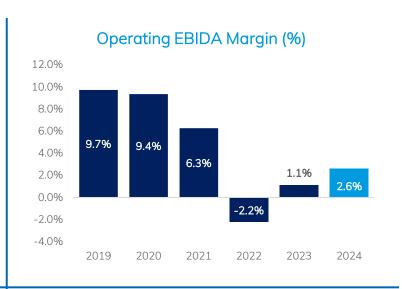
<sup>2)</sup> Admissions include acute care and rehabilitation volumes and exclude newborns

Outpatient visits exclude ER visits, physician visits, outpatient surgery and lab tests

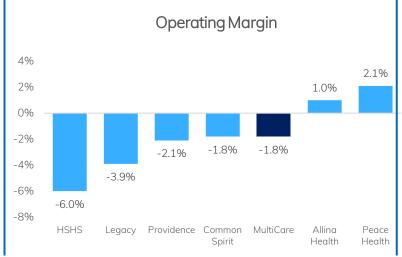
# On Our Way to Financial Recovery (1)

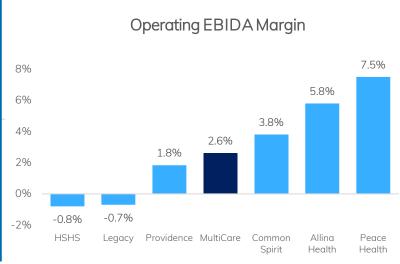




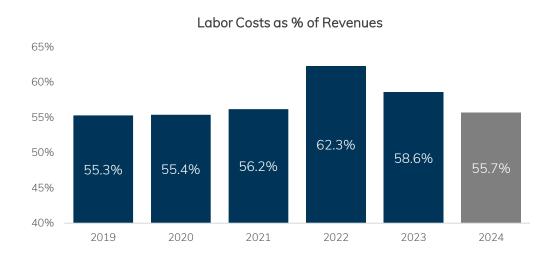


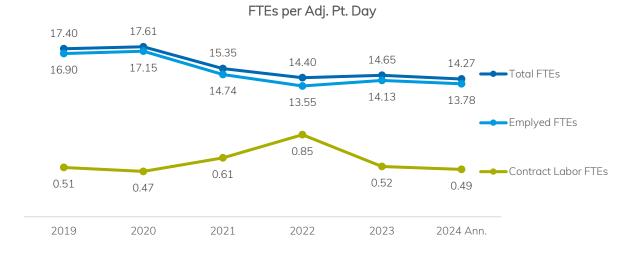
Peer Comparison

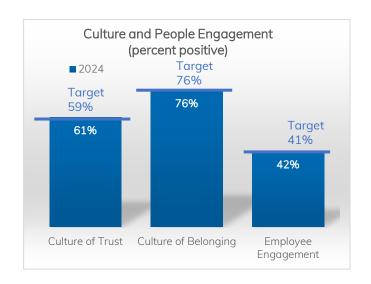




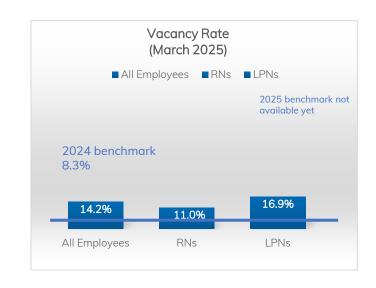
# On Our Way to Financial Recovery (1)











#### (1) Excludes Overlake

Vacancy Rate Source: Adaptive in Workday; Vacancy rate: Open positions divided by total positions for all employees

Engagement Source: SCORE survey 2024; Percent positive: % of individuals that feel positively about the measure of culture of trust, culture of belonging and employment engagement
Turnover Rate Survey Source: Workday Adaptive Leadership Dashboard. Turnover rate: rolling 12 month for full time, part time and per diem conversions. Target of 20.1% is based on NSI (Nursing sensitive indicators, National Healthcare) benchmark

HR 1

#### HR 1

On July 4, President Trump signed HR 1, the One Big Beautiful Bill Act, into law

- HR 1 will affect hospitals in two ways:
  - More uninsured -> More uncompensated care
  - Cuts in payments for benefits to eligible Medicaid beneficiaries -> More Medicaid shortfall
- According to the Congressional Budget Office (CBO):
  - 10 million people are projected to lose healthcare coverage by 2034.
  - 5.1 million people will lose coverage from other pending Marketplace changes.

## Key Provisions Affecting Hospitals

#### Cuts to health coverage

- Repeal of Medicaid eligibility regulations
- Marketplace eligibility restrictions and expiration of enhanced subsidies
- Medicaid work requirements and more frequent redeterminations
- New requirements for Medicaid cost sharing
- Changes to coverage of immigrants in federal health programs

#### Cuts to payments for Medicaid benefits

 New limits on state directed payments (SDPs)

#### Cuts to Medicaid financing

- New limits on provider taxes
- Changes to federal matching rate for newly expanded states

#### Rural health fund

 \$50 billion fund to support rural health providers, broadly defined

### Key Dates

#### July 4, 2025:

- · Limit on new SDPs
- Prohibition on new provider taxes
- Repeal of Bidenera eligibility regulations

#### Oct. 1, 2026

- Freeze on increases to existing provider taxes
- Changes to immigrant eligibility for federal health programs

#### Oct. 1, 2027

 Phase down of grandfathered provider taxes begins

#### Oct. 1, 2028

 New Medicaid cost sharing requirements















#### December 31, 2025

- CMS approval of state applications for rural health fund
- End of enhanced premium tax credits
- End of low-income immigrant eligibility for premium tax credits

#### Dec. 31, 2026

- Work requirements
- Increased frequency of redeterminations
- Limits to retroactive eligibility

#### Jan. 1, 2028

 Phase down of grandfathered SDPs begins HR 1

Impact to Washington Hospitals & Health Systems



## Safety Net Assessment: Hospital 10 Year Impact (2026-2035)

\* Includes significant conjecture in out years

	(millions)									
	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035
Gross payments to hospitals	\$2,340	\$2,340	\$2,340	\$1,856	\$1,622	\$1,388	\$1,154	\$920	\$686	\$496
10% Cuts (ACR to Medicare Rates)		\$-	\$(234)	\$(234)	\$(234)	\$(234)	\$(234)	\$(234)	\$(190)	\$-
Fewer Medicaid enrollees		\$(30)	\$(250)	\$-	\$-	\$-	\$-	\$-	\$-	\$-
Less: Assessment (tax) state take to SGF	\$(226)	\$(226)	\$(226)	\$(226)	\$(226)	\$(226)	\$(226)	\$(226)	\$(226)	\$(226)
Less: Assessment (tax) for hospital payments	\$(701)	\$(701)	\$(546)	\$(471)	\$(396)	\$(321)	\$(247)	\$(172)	\$(111)	\$(111)
Less: Intergovernmental transfers	\$(101)	\$(91)	\$(82)	\$(74)	\$(66)	\$(60)	\$(54)	\$(48)	\$(43)	\$(43)
Net benefit to hospitals	\$1,312	\$1,292	\$1,002	\$851	\$699	\$547	\$394	\$240	\$116	\$116
Additional reimbursement cut each year	0	\$(20)	\$(290)	\$(151)	\$(152)	\$(152)	\$(153)	\$(154)	\$(124)	\$-
Cumulative reimbursement cut	0	\$(20)	\$(310)	\$(461)	\$(613)	\$(765)	\$(918)	\$(1,072)	\$(1,196)	\$(1,196)

**10 Year Impact:** \$ (6,552)

Notes: Estimated -12% Medicaid enrollees in 2028 and number of enrollees remains consistent for the 10 year projection. Estimated gross Medicare payment rates reached in 2034. WSHA estimates that CMS will cut hospitals by 10% annually at \$226M. That cut remains consistent over the 10 years. The net benefit to hospitals statewide decreases by 91% in 2034 and after.

## Ongoing Advocacy

# Legislative

 Push to delay and modify bill

# Regulatory

 Shape implementation of provisions

## Communications

 Sway public opinion and control the narrative about bill impact

# Advocacy

Strengthen
 engagement and
 education with
 team members
 and board
 members

# MultiCare / 3

Partnering for healing and a healthy future.