

BILL SUMMARY
1st Session of the 60th Legislature

Bill No.:	HB 2295
Version:	POLPCS1
Request Number:	
Author:	Speaker Hilbert
Date:	2/21/2025
Impact:	\$0

Research Analysis

The proposed policy committee substitute for HB 2295 provides that no public trust hospital license or main provider location under an agreement with the Centers for Medicare and Medicaid Services will be transferred from its current address to one more than 15 miles away, if the public trust hospital is located in a community with less than 30,000 residents. If the public trust hospital facility announces a closure, a mediator must be appointed before closure. The municipality beneficiary must also appoint one and then those two will hire a third mediator and all three mediators will agree upon a sales price for the hospital, if this cannot occur without mediation. The hospital will be transferred to the beneficiary municipality if they are willing to pay the agreed-upon price and have the staff to run the hospital. In the event the public trust hospital is sold to another entity, the trustees of the hospital must certify that they haven't entered into any agreement regarding any position, role, or employment for themselves or direct relatives and that they won't receive any financial benefits from the potential owners. In the event that a public third party has been leasing the public trust hospital, the CMS provider number will revert back to the public trust hospital immediately after lease termination. The polpcs also requires all public trust hospital trustees to complete a trustee education program. Trustee education will commence within 90 days of appointment to the office of trustees for the public trust hospital.

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Fiscal Analysis

HB 2295 in its current form is not expected to have a direct fiscal impact on the State Budget or State Revenues.

Prepared By: John McPhetridge, House Fiscal Director

Other Considerations

None.