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Attorneys for the State of Oregon

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF OREGON  
EUGENE DIVISION

STATE OF OREGON, et al,

Plaintiffs,

v.

ROBERT F. KENNEDY, JR., in his official capacity as the Secretary of the Department of Health and Human Services, et al,

Defendants.

Case No. 6:25-cv-02409-MTK

CORRECTED DECLARATION OF  
TRINITY WILSON

**DECLARATION OF TRINITY WILSON**

I, TRINITY WILSON, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of the State of Washington. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.
2. I am the Interim Medicaid and Children's Health Insurance Program (CHIP) Director for Washington State. I have been employed in this position since November 4th, 2025. In this capacity, I am responsible for the overall administration, strategic direction, and operational oversight of Washington's Medicaid and CHIP programs, including policy implementation, program compliance, budget stewardship, and coordination with federal partners. I make programmatic and operational decisions impacting over 1.9 million Washingtonians on behalf of HCA and represent the state in matters related to Medicaid and CHIP administration.
3. Prior to this position, I served as the Assistant Director of the Medicaid Customer Service Division at HCA for over three and a half years. In that role, I was responsible for direct oversight of key operations of the Medicaid program including eligibility policy and operations, customer service, coordination of benefits, claims processing, provider enrollment, and Medicaid Systems IT. I have twelve years' experience working at varying roles within Washington State's Medicaid program. Throughout my tenure, I have held progressively senior leadership roles with increasing responsibility and scope. My experience includes leading large teams, managing cross-agency initiatives, and making determinations that directly affect program integrity, access to care, and compliance with federal Medicaid and CHIP requirements.
4. I obtained a graduate certificate in Leading Public Innovation from the University of Washington's Evans School of Public Policy in September 2024 and a Bachelor of Science from the University of Puget Sound in 2008.

5. I am aware that on December 26, 2025, the official Department of Health and Human Services (HHS) X account posted to the social media platform X an announcement that HHS General Counsel Mike Stuart referred Seattle Children's Hospital to the HHS Office of Inspector General "for failure to meet professional recognized standards of health care as according to Secretary Kennedy's declaration that sex-rejecting procedures for children and adolescents are neither safe nor effective as a treatment modality for gender dysphoria, gender incongruence, or other related disorders in minors."

6. Seattle Children's Hospital is a premier children's hospital providing medical services to the entire region including Washington, Alaska, Idaho, and Montana. It provides intensive care for medically complicated patients that other providers in the region cannot, including specialized inpatient care. For example, Seattle Children's Hospital provides care to newborns with complications from birth that other children's hospitals or community hospitals are unable to manage. These children may require complex medical care for heart failure, heart surgery and specialized care and technology not available at other hospitals in the Pacific Northwest. Further, Seattle Children's Hospital provides treatment to many Medicaid clients who are following specific existing treatment pathways, such as treatment for cancer or neurological disorders. The timing of much of the care that Seattle Children's Hospital provides is critical to the growth and development of children and youth with special health care needs such as autism spectrum disorder, cerebral palsy, type I diabetes, and heart disease.

7. As one specific example, Seattle Children's Hospital is the only hospital in Washington approved to provide pediatric organ transplants. If a child on Medicaid needed an organ transplant, and Seattle Children's Hospital were excluded from that program, there would be no provider in Washington capable of providing them with this medically necessary care.

8. Seattle Children's Hospital is a global leader in advancing pediatric research. Specifically, revolutionizing childhood cancer treatment. They drive life-changing breakthroughs in over 200 childhood diseases to include Cystic Fibrosis, decreasing invasive surgeries for hemangiomas, gene therapy, malaria treatments and severe neurological disorders such as epilepsy.

9. In state fiscal year 2025, Seattle Children's Hospital served over 13,000 Medicaid clients under 2 years of age and received over \$208 million in reimbursement for those clients demonstrating the critical role they play in serving very young children. Washington State's Medicaid program pays hospitals what is known as an "outlier payment" in situations in which the hospital services a client with extraordinarily high costs. These are normally situations in which the client received specialized care, had complex needs, or required lengthy hospitalization. There were 3,690 claims paid to non-certified public expenditure hospitals in state fiscal year 2024 that qualified for an outlier payment. Seattle Children's Hospital represented about 32% of those cases.

10. Washington's Medicaid program relies on Seattle Children's Hospital to provide this care, and would likely be unable to provide it in a timely way if Seattle Children's Hospital were no longer able to care for Medicaid clients. Federal law, including Early and Periodic Screening, Diagnostic, and Treatment, requires that Washington's Medicaid program provide for timely treatment of clients age 21 and younger. If Seattle Children's Hospital were unable to provide care to Medicaid clients, HCA's ability to comply with these laws would be jeopardized. HCA would likely need to send clients out of state for necessary care, resulting in high transportation costs. Moreover, necessary and critical care would likely be delayed since Seattle Children's Hospital is a regional medical facility. If access to it were lost, there is no other facility or group of facilities that could take its place.

11. Moreover, Washington's Medicaid provider network relies on Seattle Children's Hospital for other purposes. The training program sends physicians to the University of Washington Medical Center Newborn Nursery, the Pediatric Clinic at Harborview Medical Center, The UW Medical Center Pediatric Care Clinic, the Center for Adoption Medicine, Odessa Brown's Children's Clinic, the UW Neighborhood Kent/Des Moines Clinic, and the Neighborcare Health at Columbia Center clinic. If Seattle Children's Hospital were unable to continue operating and providing care to Medicaid clients, it would undermine the state's pediatric healthcare system.

12. If Seattle Children's Hospital is lost as a Medicaid provider, some of Washington's most complex patients who are children and youth suffering a myriad of complex conditions will have no other access to the treatment they need. It would not be possible for Washington to cover all of the care that Seattle Children's Hospital provides to Medicaid clients using state only funds.

I declare under penalty of perjury under the laws of the State of Washington and the United States of America that the foregoing is true and correct.

DATED this 2nd day of January 2026, at Olympia, Washington.

*s/ Trinity Wilson*  
Trinity Wilson  
Interim Medicaid Director  
Washington State Health Care Authority

**CERTIFICATE OF SERVICE**

I certify that on January 7, 2026, I served the foregoing CORRECTED DECLARATION OF TRINITY WILSON upon the parties hereto by the method indicated below, and addressed to the following:

**Susanne Luse**

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*Counsel for Defendants*

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*s/Allie M. Boyd*

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