E2SHB 1566 - H AMD 950 ADOPTED AS AMENDED 5/23/95 By Representatives Dyer, Dellwo and Carlson

3 Strike everything after the enacting clause and insert the following:

"NEW SECTION. Sec. 1. A new section is added to chapter 28A.400 RCW to read as follows:

- (1) In a manner prescribed by the state health care authority, school districts and educational service districts shall remit to the health care authority for deposit in the public employees' and retirees' insurance account established in RCW 41.05.120 the amount specified for remittance in the omnibus appropriations act.
- (2) The remittance requirements specified in this section shall not apply to employees of a school district or educational service district who receive insurance benefits through contracts with the health care authority.
- Sec. 2. RCW 41.05.011 and 1994 c 153 s 2 are each amended to read as follows:

Unless the context clearly requires otherwise, the definitions in this section shall apply throughout this chapter.

- (1) "Administrator" means the administrator of the authority.
- (2) "State purchased health care" or "health care" means medical and health care, pharmaceuticals, and medical equipment purchased with state and federal funds by the department of social and health services, the department of health, the basic health plan, the state health care authority, the department of labor and industries, the department of corrections, the department of veterans affairs, and local school districts.
- (3) "Authority" means the Washington state health care authority.

OPR -1-

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- (4) "Insuring entity" means an insurer as defined in chapter 48.01 RCW, a health care service contractor as defined in chapter 48.44 RCW, or a health maintenance organization as defined in chapter 48.46 RCW. ((On and after July 1, 1995, "insuring entity" means a certified health plan, as defined in RCW 43.72.010.))
- (5) "Flexible benefit plan" means a benefit plan that allows employees to choose the level of health care coverage provided and the amount of employee contributions from among a range of choices offered by the authority.
- (6) "Employee" includes all full-time and career seasonal employees of the state, whether or not covered by civil service; elected and appointed officials of the executive branch of government, including full-time members of boards, commissions, or committees; and includes any or all part-time and temporary employees under the terms and conditions established under this chapter by the authority; justices of the supreme court and judges of the court of appeals and the superior courts; and members of the state legislature or of the legislative authority of any county, city, or town who are elected to office after February 20, 1970. "Employee" also includes: (a) ((By October 1, 1995, all employees of school districts and educational service districts. Between October 1, 1994, and September 30, 1995, "employee" includes employees of those school districts and educational service districts for whom the authority has undertaken the purchase of insurance benefits. The transition to insurance benefits purchasing by the authority may not disrupt existing insurance contracts between school district or educational service district employees and insurers. However, except to the extent provided in RCW 28A.400.200, any such contract that provides for health insurance benefits coverage after October 1, 1995, shall be void as of that date if the contract was entered into, renewed, or extended after July 1, 1993. Prior to October 1, 1994, "employee" includes employees of a school district if the board of directors of the

OPR -2-

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school district seeks and receives the approval of the authority to provide any of its insurance programs by contract with the $\frac{\text{authority; (b)}}{\text{on other}}$ political subdivision of the state if the legislative authority of the county, municipality, or other political subdivision of the state seeks and receives the approval of the authority to provide any of its insurance programs by contract with the authority, as provided in RCW 41.04.205; (b) employees of employee organizations representing state civil service employees, at the option of each such employee organization, and, effective October 1, 1995, employees of employee organizations currently pooled with employees of school districts for the purpose of purchasing insurance benefits, at the option of each such employee organization; and (c) employees of a school district if the authority agrees to provide any of the school districts' insurance programs by contract with the authority as provided in RCW 28A.400.350.

- (7) "Board" means the public employees' benefits board established under RCW 41.05.055.
 - (8) "Retired or disabled school employee" means:
- (a) Persons who separated from employment with a school district or educational service district and are receiving a retirement allowance under chapter 41.32 or 41.40 RCW as of September 30, 1993;
- (b) Persons who separate from employment with a school district or educational service district on or after October 1, 1993, and immediately upon separation receive a retirement allowance under chapter 41.32 or 41.40 RCW;
- (c) Persons who separate from employment with a school district or educational service district due to a total and permanent disability, and are eligible to receive a deferred retirement allowance under chapter 41.32 or 41.40 RCW.
- (9) "Benefits contribution plan" means a premium only contribution plan, a medical flexible spending arrangement, or a

OPR -3-

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- cafeteria plan whereby state and public employees may agree to a contribution to benefit costs which will allow the employee to participate in benefits offered pursuant to 26 U.S.C. Sec. 125 or other sections of the internal revenue code.
 - (10) "Salary" means a state employee's monthly salary or wages.
 - (11) "Participant" means an individual who fulfills the eligibility and enrollment requirements under the benefits contribution plan.
- 10 <u>(12) "Plan year" means the time period established by the</u> 11 <u>authority.</u>
 - Sec. 3. RCW 41.05.022 and 1994 c 153 s 3 are each amended to read as follows:
 - (1) The health care authority is hereby designated as the single state agent for purchasing health services.
 - (2) On and after January 1, 1995, at least the following state-purchased health services programs shall be merged into a single, community-rated risk pool: Health benefits for groups of employees of school districts and educational service districts that voluntarily purchase health benefits as provided in RCW 41.05.011; health benefits for state employees; health benefits for eligible retired or disabled school employees not eligible for parts A and B of medicare; and health benefits for eligible state retirees not eligible for parts A and B of medicare. ((Beginning July 1, 1995, the basic health plan shall be included in the risk pool. The administrator may develop mechanisms to ensure that the cost of comparable benefits packages does not vary widely across the risk pools before they are merged. At the earliest opportunity the governor shall seek necessary federal waivers and state legislation to place the medical and acute care components of the medical assistance program, the limited casualty program, and the medical care services program of the department of social and

OPR -4-

- health services in this single risk pool. Long-term care services that are provided under the medical assistance program shall not be placed in the single risk pool until such services have been added to the uniform benefits package. On or before January 1, 1997, the governor shall submit necessary legislation to place the purchasing of health benefits for persons incarcerated in institutions administered by the department of corrections into the single community rated risk pool effective on and after July 1, 1997.))
- (3) At a minimum, and regardless of other legislative enactments, the state health services purchasing agent shall:
- (a) Require that a public agency that provides subsidies for a substantial portion of services now covered under the basic health plan ((or a uniform benefits package as adopted by the Washington health services commission as provided in RCW 43.72.130 ->)) use uniform eligibility processes, insofar as may be possible, and ensure that multiple eligibility determinations are not required;
- (b) Require that a health care provider or a health care facility that receives funds from a public program provide care to state residents receiving a state subsidy who may wish to receive care from them ((consistent with the provisions of chapter 492, Laws of 1993)), and that ((a health maintenance organization, health care service contractor, insurer, or certified health plan)) an insuring entity that receives funds from a public program accept enrollment from state residents receiving a state subsidy who may wish to enroll with them((under the provisions of chapter 492, Laws of 1993));
- (c) Strive to integrate purchasing for all publicly sponsored health services in order to maximize the cost control potential and promote the most efficient methods of financing and coordinating services;

OPR -5-

- (d) ((Annually suggest changes in state and federal law and rules to bring all publicly funded health programs in compliance with the goals and intent of chapter 492, Laws of 1993;
- (e))) Consult regularly with the governor, the legislature, and state agency directors whose operations are affected by the implementation of this section; and
- (e) Ensure the control of benefit costs under managed competition by adopting rules to prevent employers from entering into an agreement with employees or employee organizations when the agreement would result in increased utilization in public employees' benefits board plans or reduce the expected savings of managed competition.
- **Sec. 4.** RCW 41.05.055 and 1994 c 36 s 1 are each amended to read as follows:
- (1) The public employees' benefits board is created within the authority. The function of the board is to design and approve insurance benefit plans for state employees ((and school district employees)).
- (2) The board shall be composed of ((nine)) seven members appointed by the governor as follows:
- (a) Two representatives of state employees, one of whom shall represent an employee union certified as exclusive representative of at least one bargaining unit of classified employees, and one of whom is retired, is covered by a program under the jurisdiction of the board, and represents an organized group of retired public employees;
- (b) ((Two)) One representative((s)) of ((school district employees, one of whom shall represent an association of school employees and one of whom is retired, and represents)) an organized group of retired school employees;
- (c) ((Four)) Three members with experience in health benefit management and cost containment; and

OPR -6-

(d) The administrator.

- (3) The governor shall appoint the initial members of the board to staggered terms not to exceed four years. Members appointed thereafter shall serve two-year terms. Members of the board shall be compensated in accordance with RCW 43.03.250 and shall be reimbursed for their travel expenses while on official business in accordance with RCW 43.03.050 and 43.03.060. The board shall prescribe rules for the conduct of its business. The administrator shall serve as chair of the board. Meetings of the board shall be at the call of the chair.
- **Sec. 5.** RCW 41.05.065 and 1994 c 153 s 5 are each amended to read as follows:
- (1) The board shall study all matters connected with the provision of health care coverage, life insurance, liability insurance, accidental death and dismemberment insurance, and disability income insurance or any of, or a combination of, the enumerated types of insurance for employees and their dependents on the best basis possible with relation both to the welfare of the employees and to the state((-,)). However, liability insurance shall not be made available to dependents.
- (2) The ((public employees' benefits)) board shall develop employee benefit plans that include comprehensive health care benefits for all employees. In developing these plans, the board shall consider the following elements:
- (a) Methods of maximizing cost containment while ensuring access to quality health care;
- (b) Development of provider arrangements that encourage cost containment and ensure access to quality care, including but not limited to prepaid delivery systems and prospective payment methods;
- (c) Wellness incentives that focus on proven strategies, such as smoking cessation, <u>injury and accident prevention</u>, <u>reduction of</u>

OPR -7-

<u>alcohol misuse</u>, <u>appropriate weight reduction</u>, exercise, automobile and motorcycle safety, blood cholesterol reduction, and nutrition education;

- (d) Utilization review procedures including, but not limited to a cost-efficient method for prior authorization of services, hospital inpatient length of stay review, requirements for use of outpatient surgeries and second opinions for surgeries, review of invoices or claims submitted by service providers, and performance audit of providers;
 - (e) Effective coordination of benefits;
 - (f) Minimum standards for insuring entities; and
- benefit plans to be offered to enrollees participating in the employee health benefit plans. ((On and after July 1, 1995, the uniform benefits package shall constitute the minimum level of health benefits offered to employees.)) To maintain the comprehensive nature of employee health care benefits, employee eligibility criteria related to the number of hours worked and the benefits provided to employees shall be substantially equivalent to the state employees' health benefits plan and eligibility criteria in effect on January 1, 1993. Nothing in this subsection (2)(g) shall prohibit changes or increases in employee point-of-service payments or employee premium payments for benefits.
- (3) The board shall design benefits and determine the terms and conditions of employee participation and coverage, including establishment of eligibility criteria.
- (4) ((The board shall attempt to achieve enrollment of all employees and retirees in managed health care systems by July 1994.))

The board may authorize premium contributions for an employee and the employee's dependents in a manner that encourages the use of cost-efficient managed health care systems.

OPR -8-

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- (5) Employees shall choose participation in one of the health care benefit plans developed by the board <u>and may be permitted to waive coverage under terms and conditions established by the board.</u>
- (6) The board shall review plans proposed by ((insurance carriers)) insuring entities that desire to offer property insurance and/or accident and casualty insurance to state employees through payroll deduction. The board may approve any such plan for payroll deduction by ((carriers)) insuring entities holding a valid certificate of authority in the state of Washington and which the board determines to be in the best interests of employees and the state. The board shall promulgate rules setting forth criteria by which it shall evaluate the plans.
- Sec. 6. RCW 47.64.270 and 1993 c 492 s 224 are each amended to read as follows:

((Until December 31, 1996,)) Absent a collective bargaining agreement to the contrary, the department of transportation shall provide contributions to insurance and health care plans for ferry system employees and dependents, as determined by the state health care authority, under chapter 41.05 RCW; and the ferry system management and employee organizations may collectively bargain for other insurance and health care plans, and employer contributions may exceed that of other state agencies as provided in RCW 41.05.050, subject to RCW 47.64.180. ((On January 1, 1997, ferry employees shall enroll in certified health plans under the provisions of chapter 492, Laws of 1993.)) To the extent that ferry employees by bargaining unit have absorbed the required offset of wage increases by the amount that the employer's contribution for employees' and dependents' insurance and health care plans exceeds that of other state general government employees in the 1985-87 fiscal biennium, employees shall not be required to absorb a further offset except to the extent the differential between employer contributions for those employees and all other

OPR -9-

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- state general government employees increases during any subsequent fiscal biennium. If such differential increases in the 1987-89 fiscal biennium or the 1985-87 offset by bargaining unit is insufficient to meet the required deduction, the amount available for compensation shall be reduced by bargaining unit by the amount of such increase or the 1985-87 shortage in the required offset. Compensation shall include all wages and employee benefits.
 - **Sec. 7.** RCW 41.05.021 and 1994 c 309 s 1 are each amended to read as follows:
 - (1) The Washington state health care authority is created within the executive branch. The authority shall have an administrator appointed by the governor, with the consent of the The administrator shall serve at the pleasure of the senate. The administrator may employ up to seven staff members, who shall be exempt from chapter 41.06 RCW, and any additional staff members as are necessary to administer this chapter. administrator may delegate any power or duty vested in him or her by this chapter, including authority to make final decisions and enter final orders in hearings conducted under chapter 34.05 RCW. The primary duties of the authority shall be to: Administer state insurance benefits and retired or disabled school employees' employees' insurance benefits((-)); administer the basic health plan pursuant to chapter 70.47 RCW; study state-purchased health care programs in order to maximize cost containment in these programs while ensuring access to quality health care ((,)) and implement state initiatives, joint purchasing strategies, techniques for efficient administration that have potential all state-purchased health services. application to authority's duties include, but are not limited to, the following:
 - (a) To administer health care benefit programs for employees and retired or disabled school employees as specifically authorized

OPR -10-

in RCW 41.05.065 and in accordance with the methods described in RCW 41.05.075, 41.05.140, and other provisions of this chapter;

- (b) To analyze state-purchased health care programs and to explore options for cost containment and delivery alternatives for those programs that are consistent with the purposes of those programs, including, but not limited to:
- (i) Creation of economic incentives for the persons for whom the state purchases health care to appropriately utilize and purchase health care services, including the development of flexible benefit plans to offset increases in individual financial responsibility;
- (ii) Utilization of provider arrangements that encourage cost containment, including but not limited to prepaid delivery systems, utilization review, and prospective payment methods, and that ensure access to quality care, including assuring reasonable access to local providers, especially for employees residing in rural areas;
- (iii) Coordination of state agency efforts to purchase drugs effectively as provided in RCW 70.14.050;
- (iv) Development of recommendations and methods for purchasing medical equipment and supporting services on a volume discount basis; and
- (v) Development of data systems to obtain utilization data from state-purchased health care programs in order to identify cost centers, utilization patterns, provider and hospital practice patterns, and procedure costs, utilizing the information obtained pursuant to RCW 41.05.031;
- (c) To analyze areas of public and private health care interaction;
- (d) To provide information and technical and administrative assistance to the board;
- (e) To review and approve or deny applications from counties, municipalities, and other political subdivisions of the state to

OPR -11-

- provide state-sponsored insurance or self-insurance programs to their employees in accordance with the provisions of RCW 41.04.205, setting the premium contribution for approved groups as outlined in RCW 41.05.050;
 - (f) To appoint a health care policy technical advisory committee as required by RCW 41.05.150;
 - (g) To establish billing procedures and collect funds from school districts and educational service districts under RCW 28A.400.400 in a way that minimizes the administrative burden on districts; and
 - (h) To promulgate and adopt rules consistent with this chapter as described in RCW 41.05.160.
 - (2) On and after ((July)) January 1, ((1995)) 1996, the public employees' benefits board ((shall)) may implement strategies to promote managed competition among employee health benefit plans ((in accordance with the Washington health services commission schedule of employer requirements)). Strategies may include but are not limited to:
 - (a) Standardizing the benefit package;
 - (b) Soliciting competitive bids for the benefit package;
 - (c) Limiting the state's contribution to a percent of the lowest priced qualified plan within a geographical area((. If the state's contribution is less than one hundred percent of the lowest priced qualified bid, employee financial contributions shall be structured on a sliding scale basis related to household income));
 - (d) Monitoring the impact of the approach under this subsection with regards to: Efficiencies in health service delivery, cost shifts to subscribers, access to and choice of managed care plans state-wide, and quality of health services. The health care authority shall also advise on the value of administering a benchmark employer-managed plan to promote competition among managed care plans. The health care authority

OPR -12-

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- shall report its findings and recommendations to the legislature by January 1, 1997.
 - (3) The health care authority shall, no later than July 1, 1996, submit to the appropriate committees of the legislature, proposed methods whereby, through the use of a voucher-type process, state employees may enroll with any health carrier to receive employee benefits. Such methods shall include the employee option of participating in a health care savings account, as set forth in Title 48 RCW.
 - (4) The Washington health care policy board shall study the necessity and desirability of the health care authority continuing as a self-insuring entity and make recommendations to the appropriate committees of the legislature by December 1, 1996.
 - Sec. 8. RCW 41.04.205 and 1993 c 386 s 3 are each amended to read as follows:
 - (1) Notwithstanding the provisions of RCW 41.04.180, the employees, with their dependents, of any county, municipality, or other political subdivision of this state shall be eligible to participate in any insurance or self-insurance program for employees administered under chapter 41.05 RCW if the legislative authority of any such county, municipality, or other political subdivisions of this state determines, subject to collective bargaining under applicable statutes, a transfer to an insurance or self-insurance program administered under chapter 41.05 RCW should In the event of a special district employee transfer be made. pursuant to this section, members of the governing authority shall be eligible to be included in such transfer if such members are authorized by law as of June 25, 1976 to participate in the insurance program being transferred from and subject to payment by such members of all costs of insurance for members.

OPR -13-

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- (2) When the legislative authority of a county, municipality, or other political subdivision determines to so transfer, the state health care authority shall:
- (a) Establish the conditions ((under which the transfer may be made, which shall include the requirements that:
- (i) All the eligible employees of the political subdivision transfer as a unit, and
- (ii) The political subdivision involved obligate itself to make employer contributions in an amount at least equal to those provided by the state as employer)) for participation; and
- (b) ((Hold public hearings on the application for transfer;
 - $\frac{(c)}{(c)}$) Have the sole right to reject the application.

Approval of the application by the state health care authority shall effect a transfer of the employees involved to the insurance, self-insurance, or health care program applied for.

- (3) Any application of this section to members of the law enforcement officers' and fire fighters' retirement system under chapter 41.26 RCW is subject to chapter 41.56 RCW.
- (4) ((The requirements in subsection (2)(a) (i) and (ii) of this section need not be applied to)) School districts may voluntarily transfer, except that all eligible employees in a bargaining unit of a school district may transfer only as a unit and all nonrepresented employees in a district may transfer only as a unit.
- NEW SECTION. Sec. 9. The following acts or parts of acts are each repealed:
 - (1) RCW 41.05.200 and 1993 c 492 s 228;
 - (2) RCW 41.05.210 and 1993 c 492 s 229;
- 30 (3) RCW 41.05.240 and 1993 c 492 s 468; and
- 31 (4) RCW 43.72.230 and 1993 c 492 s 465.

OPR -14-

NEW SECTION. Sec. 10. A new section is added to Title 28C RCW to read as follows:

Employees of vocational technical institutes who were members of the public employees' benefits trust and as a result of chapter 238, Laws of 1991, were required to enroll in public employees' benefits board-sponsored plans, must decide whether to reenroll in the trust by January 1, 1996, or the expiration of the current collective bargaining agreements, whichever is later. Employees of a bargaining unit or administrative or managerial employees otherwise not included in a bargaining unit shall be required to transfer by group. Administrative or managerial employees shall transfer in accordance with rules established by the health care authority. If employee groups elect to transfer, they are eligible to reenroll in the public employees' benefits board-sponsored plans. This one-time reenrollment option in the public employees' benefits board sponsored plans is available to be exercised in January 2001, or only every five years thereafter, until exercised.

NEW SECTION. Sec. 11. A new section is added to chapter 41.05 RCW to read as follows:

- (1) The state of Washington may enter into benefits contribution plans with employees of the state pursuant to the internal revenue code, 26 U.S.C. Sec. 125, for the purpose of making it possible for employees of the state to select on a "before-tax basis" certain taxable and nontaxable benefits pursuant to 26 U.S.C. Sec. 125. The purpose of the benefits contribution plan established in this chapter is to attract and retain individuals in governmental service by permitting them to enter into agreements with the state to provide for benefits pursuant to 26 U.S.C. Sec. 125 and other applicable sections of the internal revenue code.
- (2) Nothing in the benefits contribution plan constitutes an employment agreement between the participant and the state, and

OPR -15-

- 1 nothing contained in the participant's benefits contribution
- 2 agreement, the plan, this section, or sections 12 through 17 of
- 3 this act gives a participant any right to be retained in state
- 4 employment.

NEW SECTION. Sec. 12. A new section is added to chapter 41.05 RCW to read as follows:

The authority shall have responsibility for the formulation and adoption of a plan, policies, and procedures designed to guide, direct, and administer the benefits contribution plan. For the plan year beginning January 1, 1996, the administrator may establish a premium only contribution plan. Expansion of the benefits contribution plan to a medical flexible spending arrangement or cafeteria plan during subsequent plan years shall be subject to approval by the director of the office of financial management.

- (1) A plan document describing the benefits contribution plan shall be adopted and administered by the authority. The authority shall represent the state in all matters concerning the administration of the plan. The state, through the authority, may engage the services of a professional consultant or administrator on a contractual basis to serve as an agent to assist the authority or perform the administrative functions necessary in carrying out the purposes of this section and sections 11 and 13 through 16 of this act.
- (2) The authority shall formulate and establish policies and procedures for the administration of the benefits contribution plan that are consistent with existing state law, the internal revenue code, and the regulations adopted by the internal revenue service as they may apply to the benefits offered to participants under the plan.
- (3) Every action taken by the authority in administering this section and sections 11 and 13 through 16 of this act shall be presumed to be a fair and reasonable exercise of the authority

OPR -16-

- vested in or the duties imposed upon it. The authority shall be presumed to have exercised reasonable care, diligence, and prudence and to have acted impartially as to all persons interested unless the contrary be proved by clear and convincing affirmative evidence.
 - NEW SECTION. Sec. 13. A new section is added to chapter 41.05 RCW to read as follows:
 - (1) Elected officials and all permanent employees of the state are eligible to participate in the benefits contribution plan and contribute amount(s) by agreement with the authority. The authority may adopt rules to permit participation in the plan by temporary employees of the state.
 - (2) Persons eligible under subsection (1) of this section may enter into benefits contribution agreements with the state.
 - (3)(a) In the initial year of the medical flexible spending arrangement or cafeteria plan, if authorized, an eligible person may become a participant after the adoption of the plan and before its effective date by agreeing to have a portion of his or her gross salary contributed and deposited into a health care and other benefits account to be used for reimbursement of expenses covered by the plan.
 - (b) After the initial year of the medical flexible spending arrangement or cafeteria plan, if authorized, an eligible person may become a participant for a full plan year, with annual benefit selection for each new plan year made before the beginning of the plan year, as determined by the authority, or upon becoming eligible.
 - (c) Once an eligible person elects to participate and the amount of gross salary that he or she shall contribute and the benefit for which the funds are to be used during the plan year is determined, the agreement shall be irrevocable and may not be amended during the plan year except as provided in (d) of this

OPR -17-

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subsection. Prior to making an election to participate in the benefit contribution plan, the eligible person shall be informed in writing of all the benefits and contributions that will occur as a result of such election.

- (d) The authority shall provide in the benefits contribution plan that a participant may enroll, terminate, or change his or her election after the plan year has begun if there is a significant change in a participant's status, as provided by 26 U.S.C. Sec. 125 and the regulations adopted under that section and defined by the authority.
- (4) The authority shall establish as part of the benefits contribution plan the procedures for and effect of withdrawal from the plan by reason of retirement, death, leave of absence, or termination of employment. To the extent possible under federal law, the authority shall protect participants from forfeiture of rights under the plan.
- (5) Any contribution under the benefits contribution plan shall continue to be included as reportable compensation for the purpose of computing the state retirement and pension benefits earned by the employee pursuant to chapters 41.26, 41.32, 41.40, and 43.43 RCW.
- NEW SECTION. Sec. 14. A new section is added to chapter 41.05 RCW to read as follows:
 - The authority shall keep or cause to be kept full and adequate accounts and records of the assets, obligations, transactions, and affairs of a benefits contribution plan created under section 11 of this act.
- NEW SECTION. Sec. 15. A new section is added to chapter 41.05 RCW to read as follows:

OPR -18-

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- (1) The state may terminate the benefits contribution plan at the end of the plan year or upon notification of federal action affecting the status of the plan.
- (2) The authority may amend the benefits contribution plan at any time if the amendment does not affect the rights of the participants to receive eligible reimbursement from the participants' benefits contribution accounts.
- 8 <u>NEW SECTION.</u> **Sec. 16.** A new section is added to chapter 41.05 RCW to read as follows:
- The authority shall adopt rules necessary to implement sections 11 through 15 of this act.
- NEW SECTION. Sec. 17. A new section is added to chapter 41.05 RCW to read as follows:
- Sections 11 through 16 of this act shall be construed to effectuate the purposes of 26 U.S.C. Sec. 125 and other applicable sections of the internal revenue code as required.
 - **Sec. 18.** RCW 28A.400.350 and 1993 c 492 s 226 are each amended to read as follows:
 - (1) The board of directors of any of the state's school districts may make available liability, life, health, health care, accident, disability and salary protection or insurance or any one of, or a combination of the enumerated types of insurance, or any other type of insurance or protection, for the members of the boards of directors, the students, and employees of the school district, and their dependents. Such coverage may be provided by contracts with private carriers, with the state health care authority after July 1, 1990, pursuant to the approval of the authority administrator, or through self-insurance or self-funding pursuant to chapter 48.62 RCW, or in any other manner authorized by law. ((Except for health benefits purchased with nonstate funds as

OPR -19-

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- provided in RCW 28A.400.200, effective on and after October 1, 1995, health care coverage, life insurance, liability insurance, accidental death and dismemberment insurance, and disability income insurance shall be provided only by contracts with the state health care authority.))
 - (2) Whenever funds are available for these purposes the board of directors of the school district may contribute all or a part of the cost of such protection or insurance for the employees of their respective school districts and their dependents. The premiums on such liability insurance shall be borne by the school district.

After October 1, 1990, school districts may not contribute to any employee protection or insurance other than liability insurance unless the district's employee benefit plan conforms to RCW 28A.400.275 and 28A.400.280.

(3) For school board members and students, the premiums due on such protection or insurance shall be borne by the assenting school board member or student. The school district may contribute all or part of the costs, including the premiums, of life, health, health care, accident or disability insurance which shall be offered to all students participating in interschool activities on the behalf of or as representative of their school or school district. school district board of directors may require any student participating in extracurricular interschool activities to, as a condition of participation, document evidence of insurance or purchase insurance that will provide adequate coverage, determined by the school district board of directors, for medical incurred as а result of injury expenses sustained while participating in the extracurricular activity. In establishing such a requirement, the district shall adopt regulations for waiving or reducing the premiums of such coverage as may be offered through the school district to students participating extracurricular activities, for those students whose families, by reason of their low income, would have difficulty paying the entire

OPR -20-

- amount of such insurance premiums. The district board shall adopt regulations for waiving or reducing the insurance coverage requirements for low-income students in order to assure such students are not prohibited from participating in extracurricular interschool activities.
- (4) All contracts for insurance or protection written to take advantage of the provisions of this section shall provide that the beneficiaries of such contracts may utilize on an equal participation basis the services of those practitioners licensed pursuant to chapters 18.22, 18.25, 18.53, 18.57, and 18.71 RCW.
- NEW SECTION. Sec. 19. A new section is added to chapter 28B.50 RCW to read as follows:
- (1) In a manner prescribed by the state health care authority, technical colleges who have employees enrolled in a benefits trust shall remit to the health care authority for deposit in the public employees' and retirees' insurance account established in RCW 41.05.120 the amount specified for remittance in the omnibus appropriations act.
- (2) The remittance requirements of this section do not apply to employees of a technical college who receive insurance benefits through contracts with the health care authority.
- NEW SECTION. Sec. 20. A new section is added to Title 43 RCW to read as follows:

For the purpose of accurately describing professional health services purchased by the state, health-related state agencies may develop fee schedules based on billing codes and service descriptions published by the American medical association or the United States federal health care financing administration, or develop agency unique codes and service descriptions.

OPR -21-

Sec. 21. RCW 41.04.230 and 1993 c 2 s 26 are each amended to read as follows:

Any official of the state authorized to disburse funds in payment of salaries and wages of public officers or employees is authorized, upon written request of the officer or employee, to deduct from the salaries or wages of the officers or employees, the amount or amounts of subscription payments, premiums, contributions, or continuation thereof, for payment of the following:

- (1) Credit union deductions: PROVIDED, That twenty-five or more employees of a single state agency or a total of one hundred or more state employees of several agencies have authorized such a deduction for payment to the same credit union. An agency may, in its own discretion, establish a minimum participation requirement of fewer than twenty-five employees.
- (2) Parking fee deductions: PROVIDED, That payment is made for parking facilities furnished by the agency or by the department of general administration.
- (3) U.S. savings bond deductions: PROVIDED, That a person within the particular agency shall be appointed to act as trustee. The trustee will receive all contributions; purchase and deliver all bond certificates; and keep such records and furnish such bond or security as will render full accountability for all bond contributions.
- (4) Board, lodging or uniform deductions when such board, lodging and uniforms are furnished by the state, or deductions for academic tuition or fees or scholarship contributions payable to the employing institution.
- (5) Dues and other fees deductions: PROVIDED, That the deduction is for payment of membership dues to any professional organization formed primarily for public employees or college and university professors: AND PROVIDED, FURTHER, That twenty-five or more employees of a single state agency, or a total of one hundred

OPR -22-

or more state employees of several agencies have authorized such a deduction for payment to the same professional organization.

- (6) Labor or employee organization dues may be deducted in the event that a payroll deduction is not provided under a collective bargaining agreement under the provisions of RCW 41.06.150: PROVIDED, That twenty-five or more officers or employees of a single agency, or a total of one hundred or more officers or employees of several agencies have authorized such a deduction for payment to the same labor or employee organization: PROVIDED, FURTHER, That labor or employee organizations with five hundred or more members in state government may have payroll deduction for employee benefit programs.
- (7) Insurance contributions to the authority for payment of premiums under contracts authorized by the state health care authority. However, enrollment or assignment by the state health care authority to participate in a health care benefit plan, as required by RCW 41.05.065(5), shall authorize a payroll deduction of premium contributions without a written consent under the terms and conditions established by the public employees benefits board.
- (8) Deductions to a bank, savings bank, or savings and loan association if (a) the bank, savings bank, or savings and loan association is authorized to do business in this state; and (b) twenty-five or more employees of a single agency, or fewer, if a lesser number is established by such agency, or a total of one hundred or more state employees of several agencies have authorized a deduction for payment to the same bank, savings bank, or savings and loan association.

Deductions from salaries and wages of public officers and employees other than those enumerated in this section or by other law, may be authorized by the director of financial management for purposes clearly related to state employment or goals and objectives of the agency and for plans authorized by the state health care authority.

OPR -23-

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The authority to make deductions from the salaries and wages of public officers and employees as provided for in this section shall be in addition to such other authority as may be provided by law: PROVIDED, That the state or any department, division, or separate agency of the state shall not be liable to any insurance carrier or contractor for the failure to make or transmit any such deduction.

- Sec 22. RCW 41.05.050 and 1994 c 309 s 2 are each amended to read as follows:
- (1) Every department, division, or separate agency of state government, and such county, municipal, or other political subdivisions as are covered by this chapter, shall provide contributions to insurance and health care plans for its employees and their dependents, the content of such plans to be determined by Contributions, paid by the county, authority. municipality, or other political subdivision for their employees, shall include an amount determined by the authority to pay such administrative expenses of the authority as are necessary to administer the plans for employees of those groups. Contributions to be paid by school districts or educational service districts shall be adjusted by the authority to reflect that retired school employees are covered under *RCW 41.05.250, and are not covered under RCW 41.05.080. All such contributions will be paid into the public employees' health insurance account.
- (2) The contributions of any department, division, or separate agency of the state government, and such county, municipal, or other political subdivisions as are covered by this chapter, shall be set by the authority, subject to the approval of the governor for availability of funds as specifically appropriated by the legislature for that purpose. Insurance and health care contributions for ferry employees shall be governed by RCW 47.64.270 ((until December 31, 1996. On and after January 1, 1997,

OPR -24-

- ferry employees shall enroll with certified health plans under chapter 492, Laws of 1993)).
- (3) The authority shall transmit a recommendation for the amount of the employer contribution to the governor and the director of financial management for inclusion in the proposed budgets submitted to the legislature.

<u>NEW SECTION.</u> **Sec. 23.** This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and shall take effect July 1, 1995."

Correct the title.

OPR -25-