

CERTIFICATION OF ENROLLMENT  
**ENGROSSED SUBSTITUTE SENATE BILL 6016**

Chapter 84, Laws of 2014

63rd Legislature  
2014 Regular Session

HEALTH BENEFIT EXCHANGE--ENROLLEES--GRACE PERIOD

EFFECTIVE DATE: 06/12/14 - Except for section 3, which is contingent.

Passed by the Senate March 10, 2014  
YEAS 45 NAYS 4

BRAD OWEN

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**President of the Senate**

Passed by the House March 5, 2014  
YEAS 92 NAYS 6

FRANK CHOPP

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**Speaker of the House of Representatives**

Approved March 27, 2014, 10:31 a.m.

JAY INSLEE

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**Governor of the State of Washington**

CERTIFICATE

I, Hunter G. Goodman, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE SENATE BILL 6016** as passed by the Senate and the House of Representatives on the dates hereon set forth.

HUNTER G. GOODMAN

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**Secretary**

FILED

March 27, 2014

**Secretary of State  
State of Washington**

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**ENGROSSED SUBSTITUTE SENATE BILL 6016**

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AS AMENDED BY THE HOUSE

Passed Legislature - 2014 Regular Session

**State of Washington                      63rd Legislature                      2014 Regular Session**

**By** Senate Health Care (originally sponsored by Senators Rivers, Keiser, Cleveland, Tom, Kline, and McAuliffe)

READ FIRST TIME 02/07/14.

1            AN ACT Relating to the grace period for enrollees of the Washington  
2 health benefit exchange; amending RCW 48.43.---; adding a new section  
3 to chapter 43.71 RCW; adding a new section to chapter 48.43 RCW; and  
4 providing a contingent effective date.

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

6            NEW SECTION.    **Sec. 1.** A new section is added to chapter 43.71 RCW  
7 to read as follows:

8            (1) The exchange must support the grace period by providing  
9 electronic information to an issuer of a qualified health plan or a  
10 qualified dental plan that complies with 45 C.F.R. Sec. 156.270 (2013)  
11 and 45 C.F.R. Sec. 155.430 (2013).

12            (2) If the health benefit exchange notifies an enrollee that he or  
13 she is delinquent on payment of premium, the notice must include  
14 information on how to report a change in income or circumstances and an  
15 explanation that such a report may result in a change in the premium  
16 amount or program eligibility.

17            NEW SECTION.    **Sec. 2.** A new section is added to chapter 48.43 RCW  
18 to read as follows:

1 (1) For an enrollee who is in the second or third month of the  
2 grace period, an issuer of a qualified health plan shall:

3 (a) Upon request by a health care provider or health care facility,  
4 provide information regarding the enrollee's eligibility status in  
5 real-time; and

6 (b) Notify a health care provider or health care facility that an  
7 enrollee is in the grace period within three business days after  
8 submittal of a claim or status request for services provided.

9 (2) The information or notification required under subsection (1)  
10 of this section must, at a minimum, indicate "grace period" or use the  
11 appropriate national coding standard as the reason for pending the  
12 claim if a claim is pended due to the enrollee's grace period status.

13 (3) By December 1, 2014, and annually each December 1st thereafter,  
14 the health benefit exchange shall provide a report to the appropriate  
15 committees of the legislature with the following information for the  
16 calendar year: (a) The number of exchange enrollees who entered the  
17 grace period; (b) the number of enrollees who subsequently paid premium  
18 after entering the grace period; (c) the average number of days  
19 enrollees were in the grace period prior to paying premium; and (d) the  
20 number of enrollees who were in the grace period and whose coverage was  
21 terminated due to nonpayment of premium. The report must include as  
22 much data as is available for the calendar year.

23 (4) For purposes of this section, "grace period" means nonpayment  
24 of premiums by an enrollee receiving advance payments of the premium  
25 tax credit, as defined in section 1412 of the patient protection and  
26 affordable care act, P.L. 111-148, as amended by the health care and  
27 education reconciliation act, P.L. 111-152, and implementing  
28 regulations issued by the federal department of health and human  
29 services.

30 **Sec. 3.** RCW 48.43.--- and 2014 c . . . s 2 (section 2 of this act)  
31 are each amended to read as follows:

32 (1) For an enrollee who is in the second or third month of the  
33 grace period, an issuer of a qualified health plan shall:

34 (a) Upon request by a health care provider or health care facility,  
35 provide information regarding the enrollee's eligibility status in  
36 real-time; and

1 (b) Notify a health care provider or health care facility that an  
2 enrollee is in the grace period within three business days after  
3 submittal of a claim or status request for services provided.

4 (2) The information or notification required under subsection (1)  
5 of this section must, at a minimum((7)):

6 (a) Indicate "grace period" or use the appropriate national coding  
7 standard as the reason for pending the claim if a claim is pending due  
8 to the enrollee's grace period status; and

9 (b) Except for notifications provided electronically, indicate that  
10 enrollee is in the second or third month of the grace period.

11 (3) By December 1, 2014, and annually each December 1st thereafter,  
12 the health benefit exchange shall provide a report to the appropriate  
13 committees of the legislature with the following information for the  
14 calendar year: (a) The number of exchange enrollees who entered the  
15 grace period; (b) the number of enrollees who subsequently paid premium  
16 after entering the grace period; (c) the average number of days  
17 enrollees were in the grace period prior to paying premium; and (d) the  
18 number of enrollees who were in the grace period and whose coverage was  
19 terminated due to nonpayment of premium. The report must include as  
20 much data as is available for the calendar year.

21 (4) For purposes of this section, "grace period" means nonpayment  
22 of premiums by an enrollee receiving advance payments of the premium  
23 tax credit, as defined in section 1412 of the patient protection and  
24 affordable care act, P.L. 111-148, as amended by the health care and  
25 education reconciliation act, P.L. 111-152, and implementing  
26 regulations issued by the federal department of health and human  
27 services.

28 NEW SECTION. Sec. 4. Section 3 of this act takes effect January  
29 1st following the issuance of a report under section 2(3) of this act  
30 indicating that coverage was terminated due to nonpayment of premium  
31 for ten thousand or more enrollees who were in the grace period in that  
32 calendar year. In no case may section 3 of this act take effect before  
33 January 1, 2015. The health benefit exchange must provide notice of  
34 the effective date of section 3 of this act to affected parties, the  
35 chief clerk of the house of representatives, the secretary of the

1 senate, the office of the code reviser, and others as deemed  
2 appropriate by the health benefit exchange.

Passed by the Senate March 10, 2014.

Passed by the House March 5, 2014.

Approved by the Governor March 27, 2014.

Filed in Office of Secretary of State March 27, 2014.