

WSR 23-17-142
POLICY STATEMENT
HEALTH CARE AUTHORITY
(School Employees Benefits Board)
[Filed August 22, 2023, 9:14 a.m.]

Notice of School Employees Benefits Board (SEBB) Program Administrative Policy Statements

The following is a list of administrative policies published by the SEBB program. These policies are effective January 1, 2024. You can download the complete policy statements on the SEBB program rules and policies page at hca.wa.gov/sebb-rules.

The following policies were amended to support the SEBB program:

Policy 19-1: Termination due to loss of eligibility or enrollment error. This policy applies whenever coverage for a subscriber or a subscriber's dependent is terminated due to loss of eligibility, or because a subscriber or dependent was enrolled when they were not eligible for coverage.

Addendum 19-1A: Termination due to loss of eligibility or enrollment error: School employee.

Addendum 19-1B: Termination due to loss of eligibility or nonpayment: Self-pay subscriber.

Policy 31-1: Verifying dependent eligibility before enrollment. This policy clarifies which documents the SEBB program considers valid for dependent verification and identifies which accounts are included in the dependent verification process.

Policy 31-2: Use of the SEBB spousal plan calculator. This policy provides direction when a SEBB subscriber enrolled in SEBB medical, is determining if a premium surcharge will be applied for a spouse or state registered domestic partner enrolled in SEBB medical.

Policy 36-1: Certifying eligibility for a dependent child with a disability who is age 26 or older. This policy applies whenever a subscriber requests to enroll or continue enrollment for a dependent child with a disability who is age 26 or older on their SEBB program subscriber account.

Policy 37-1: Certifying eligibility for an extended dependent child. This policy applies when a subscriber submits the required forms to enroll an extended dependent child in the subscriber's SEBB health plan coverage.

Policy 45-2: Special open enrollment (SOE). This policy applies whenever a subscriber requests an enrollment change or election change outside of the SEBB program annual open enrollment period.

Addendum 45-2A: SOE matrix: Summary of permitted election changes.

Policy 56-1: Continuation coverage reinstatement for subscribers with mental or physical impairment or incapacitation. This policy applies whenever a subscriber (or another party acting on behalf of the subscriber) requests reinstatement of continuation coverage due to nonpayment of premiums, or applicable premium surcharges, for reason of mental or physical impairment or incapacitation; when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the Internal Revenue Service (IRS) recognizes the emergency for purposes of delaying deadlines, and the emergency prevents a subscriber from making a timely payment.

This policy establishes the methodology that the SEBB program will use to make a determination of mental or physical impairment or

incapacitation for the purpose of reinstatement of coverage terminated due to nonpayment of premiums, or applicable premium surcharges. The policy also establishes the methodology the SEBB program will use to make a determination when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency prevents a subscriber from making a timely payment.

This policy provides timing requirements for requesting reinstatement due to nonpayment of premiums, or applicable premium surcharges, for reason of mental or physical impairment or incapacity; when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency causes a subscriber to be unable to make premium payments and applicable premium surcharges.

Policy 56-2: Election period tolling for applicants with mental or physical impairment or incapacitation. This policy applies whenever an applicant (or another party acting on behalf of the applicant) requests tolling of the continuation coverage, new employee eligibility, regained eligibility, annual open enrollment, or special open enrollment election period. Tolling may be requested for reason of mental or physical impairment or incapacitation, when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency prevents an applicant from making a timely election.

This policy establishes the methodology that the SEBB program and the health care authority's office of legal affairs (OLA) will use to make a determination of mental or physical impairment or incapacitation for the purpose of tolling the election period of continuation coverage, new employee eligibility, regained eligibility, annual open enrollment, or special open enrollment. The policy also establishes the methodology the SEBB program and OLA will use to make a determination when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency prevents an applicant from making a timely election.

This policy provides timing requirements to request tolling of the election period for reason of mental or physical impairment or incapacity.

Policy 91-1: Requesting a reasonable alternative for completing wellness incentive program requirements or avoiding the tobacco use premium surcharge. This policy applies when a subscriber who is eligible to participate in the SEBB wellness incentive program is seeking a reasonable alternative to a wellness incentive program requirement in order to receive a wellness incentive as described in WAC 182-31-190.

This policy also applies when an enrollee on a SEBB medical plan is seeking a reasonable alternative so that a subscriber can avoid paying the tobacco use premium surcharge as described in WAC 182-30-050 (1) (c) (iii).

Policy 91-2: Tobacco as it relates to religious or ceremonial use. This policy applies whenever a SEBB subscriber is attesting to an

enrolled member's tobacco use status and clarifies the exception for the religious or ceremonial use of tobacco.

Policy 91-3: Washington wellness worksite designation program incentive requirements. This policy provides a set of requirements for the SEBB organizations to use when offering wellness incentives under the Washington wellness worksite designation program.

Policy 94-1: Accessing SEBB program salary reduction plan document. This policy clarifies where a subscriber may access the SEBB program's salary reduction plan document.

Policy 94-2: Accessing SEBB program wellness plan document. This policy clarifies where a subscriber may access the SEBB program's wellness plan document.

Policy 94-3: Subscriber mistake—Factor test. This policy applies whenever a school employee makes a mistake electing a medical flexible spending arrangement (FSA), a limited purpose FSA, a dependent care assistance program, or a school employee or continuation coverage subscriber requests a health plan change when they or their dependent experiences a disruption of medical care because of a mistake, which impacts a documented, ongoing course of treatment.