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ESB 5773 - H AMD TO WAYS COM AMD (H-2507.1/11) 633 By Representative Schmick

NOT CONSIDERED 04/22/2011

Beginning on line 3 of the amendment, strike sections 1 through 4 2 and insert the following:

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4 "Sec. 1. RCW 41.05.065 and 2009 c 537 s 7 are each amended to 5 read as follows:

6 (1) The board shall study all matters connected with the provision 7 of health care coverage, life insurance, liability insurance, 8 accidental death and dismemberment insurance, and disability income 9 insurance or any of, or a combination of, the enumerated types of 10 insurance for employees and their dependents on the best basis 11 possible with relation both to the welfare of the employees and to the 12 state. However, liability insurance shall not be made available to 13 dependents.

14 (2) The board shall develop employee benefit plans that include 15 comprehensive health care benefits for employees. In developing these 16 plans, the board shall consider the following elements:

17 (a) Methods of maximizing cost containment while ensuring access18 to quality health care;

19 (b) Development of provider arrangements that encourage cost 20 containment and ensure access to quality care, including but not 21 limited to prepaid delivery systems and prospective payment methods;

22 (c) Wellness incentives that focus on proven strategies, such as 23 smoking cessation, injury and accident prevention, reduction of 24 alcohol misuse, appropriate weight reduction, exercise, automobile and 25 motorcycle safety, blood cholesterol reduction, and nutrition 26 education;

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1 (d) Utilization review procedures including, but not limited to a 2 cost-efficient method for prior authorization of services, hospital 3 inpatient length of stay review, requirements for use of outpatient 4 surgeries and second opinions for surgeries, review of invoices or 5 claims submitted by service providers, and performance audit of 6 providers;

7 (e) Effective coordination of benefits; and

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9 (3) To maintain the comprehensive nature of employee health care

(f) Minimum standards for insuring entities.

10 benefits, benefits provided to employees shall be substantially 11 equivalent to the state employees' health benefits plan in effect on 12 January 1, 1993. Nothing in this subsection shall prohibit changes or 13 increases in employee point-of-service payments or employee premium 14 payments for benefits or the administration of a high deductible 15 health plan in conjunction with a health savings account. The board 16 may establish employee eligibility criteria which are not 17 substantially equivalent to employee eligibility criteria in effect on 18 January 1, 1993.

(4) Except if bargained for under chapter 41.80 RCW, the board 20 shall design benefits and determine the terms and conditions of 21 employee and retired employee participation and coverage, including 22 establishment of eligibility criteria subject to the requirements of 23 this chapter. Employer groups obtaining benefits through contractual 24 agreement with the authority for employees defined in RCW 41.05.011(6) 25 (a) through (d) may contractually agree with the authority to benefits 26 eligibility criteria which differs from that determined by the board. 27 The eligibility criteria established by the board shall be no more 28 restrictive than the following:

(a) Except as provided in (b) through (e) of this subsection, an employee is eligible for benefits from the date of employment if the employing agency anticipates he or she will work an average of at least eighty hours per month and for at least eight hours in each month for more than six consecutive months. An employee determined at 1 ineligible for benefits at the beginning of his or her employment
2 shall become eligible in the following circumstances:

3 (i) An employee who works an average of at least eighty hours per 4 month and for at least eight hours in each month and whose anticipated 5 duration of employment is revised from less than or equal to six 6 consecutive months to more than six consecutive months becomes 7 eligible when the revision is made.

8 (ii) An employee who works an average of at least eighty hours per 9 month over a period of six consecutive months and for at least eight 10 hours in each of those six consecutive months becomes eligible at the 11 first of the month following the six-month averaging period.

12 (b) A seasonal employee is eligible for benefits from the date of 13 employment if the employing agency anticipates that he or she will 14 work an average of at least eighty hours per month and for at least 15 eight hours in each month of the season. A seasonal employee 16 determined ineligible at the beginning of his or her employment who 17 works an average of at least half-time, as defined by the board, per 18 month over a period of six consecutive months and at least eight hours 19 in each of those six consecutive months becomes eligible at the first 20 of the month following the six-month averaging period. A benefits-21 eligible seasonal employee who works a season of less than nine months 22 shall not be eligible for the employer contribution during the off 23 season, but may continue enrollment in benefits during the off season 24 by self-paying for the benefits. A benefits-eligible seasonal 25 employee who works a season of nine months or more is eligible for the 26 employer contribution through the off season following each season 27 worked.

28 (c) Faculty are eligible as follows:

(i) Faculty who the employing agency anticipates will work half-30 time or more for the entire instructional year or equivalent nine-31 month period are eligible for benefits from the date of employment. 32 Eligibility shall continue until the beginning of the first full month 33 of the next instructional year, unless the employment relationship is 34 terminated, in which case eligibility shall cease the first month

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1 following the notice of termination or the effective date of the 2 termination, whichever is later.

(ii) Faculty who the employing agency anticipates will not work 3 4 for the entire instructional year or equivalent nine-month period are 5 eligible for benefits at the beginning of the second consecutive 6 quarter or semester of employment in which he or she is anticipated to 7 work, or has actually worked, half-time or more. Such an employee 8 shall continue to receive uninterrupted employer contributions for 9 benefits if the employee works at least half-time in a quarter or 10 semester. Faculty who the employing agency anticipates will not work 11 for the entire instructional year or equivalent nine-month period, but 12 who actually work half-time throughout or more the entire 13 instructional year, are eligible for summer or off-quarter coverage. 14 Faculty who have met the criteria of this subsection (4)(c)(ii), who 15 work at least two quarters of the academic year with an average 16 academic year workload of half-time or more for three quarters of the 17 academic year, and who have worked an average of half-time or more in 18 each of the two preceding academic years shall continue to receive 19 uninterrupted employer contributions for benefits if he or she works 20 at least half- time in a quarter or semester or works two quarters of 21 the academic year with an average academic workload each academic year 22 of half-time or more for three quarters. Eligibility under this 23 section ceases immediately if this criteria is not met.

(iii) Faculty may establish or maintain eligibility for benefits by working for more than one institution of higher education. When faculty work for more than one institution of higher education, those institutions shall prorate the employer contribution costs, or if eligibility is reached through one institution, that institution will pay the full employer contribution. Faculty working for more than one institution must alert his or her employers to his or her potential eligibility in order to establish eligibility.

32 (iv) The employing agency must provide written notice to faculty 33 who are potentially eligible for benefits under this subsection (4)(c) 34 of their potential eligibility.

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1 (v) To be eligible for maintenance of benefits through averaging 2 under (c)(ii) of this subsection, faculty must provide written 3 notification to his or her employing agency or agencies of his or her 4 potential eligibility.

5 (d) A legislator is eligible for benefits on the date his or her 6 term begins. All other elected and full-time appointed officials of 7 the legislative and executive branches of state government are 8 eligible for benefits on the date his or her term begins or they take 9 the oath of office, whichever occurs first.

10 (e) A justice of the supreme court and judges of the court of 11 appeals and the superior courts become eligible for benefits on the 12 date he or she takes the oath of office.

13 (f) Except as provided in (c)(i) and (ii) of this subsection, 14 eligibility ceases for any employee the first of the month following 15 termination of the employment relationship.

16 (g) In determining eligibility under this section, the employing 17 agency may disregard training hours, standby hours, or temporary 18 changes in work hours as determined by the authority under this 19 section.

20 (h) Insurance coverage for all eligible employees begins on the 21 first day of the month following the date when eligibility for 22 benefits is established. If the date eligibility is established is 23 the first working day of a month, insurance coverage begins on that 24 date.

25 (i) Eligibility for an employee whose work circumstances are 26 described by more than one of the eligibility categories in (a) 27 through (e) of this subsection shall be determined solely by the 28 criteria of the category that most closely describes the employee's 29 work circumstances.

30 (j) Except for an employee eligible for benefits under (b) or 31 (c)(ii) of this subsection, an employee who has established 32 eligibility for benefits under this section shall remain eligible for 33 benefits each month in which he or she is in pay status for eight or 34 more hours, if (i) he or she remains in a benefits-eligible position

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1 and (ii) leave from the benefits-eligible position is approved by the 2 employing agency. A benefits-eligible seasonal employee is eligible 3 for the employer contribution in any month of his or her season in 4 which he or she is in pay status eight or more hours during that 5 month. Eligibility ends if these conditions are not met, the 6 employment relationship is terminated, or the employee voluntarily 7 transfers to a noneligible position.

8 (k) For the purposes of this subsection:

9 (i) "Academic year" means summer, fall, winter, and spring 10 quarters or semesters;

(ii) "Half-time" means one-half of the full-time academic workload as determined by each institution, except that half-time for community and technical college faculty employees shall have the same meaning as represent the same meaning as

15 (iii) "Benefits-eligible position" shall be defined by the board.

16 (5) The board may authorize premium contributions for an employee 17 and the employee's dependents in a manner that encourages the use of 18 cost-efficient managed health care systems.

19 (6) For any open enrollment period beginning on or after November 20 <u>1, 2011, the board shall ((develop)) offer</u> a health savings account 21 option for employees that conforms to section 223, Part VII of 22 subchapter B of chapter 1 of the internal revenue code of 1986. The 23 board shall comply with all applicable federal standards related to 24 the establishment of health savings accounts.

25 (7) Notwithstanding any other provision of this chapter, <u>for any</u> 26 <u>open enrollment period beginning on or after November 1, 2011,</u> the 27 board shall ((develop)) <u>offer</u> a high deductible health plan ((to be 28 offered)) in conjunction with a health savings account developed under 29 subsection (6) of this section.

30 (8) Employees shall choose participation in one of the health care 31 benefit plans developed by the board and may be permitted to waive 32 coverage under terms and conditions established by the board.

33 (9) The board shall review plans proposed by insuring entities 34 that desire to offer property insurance and/or accident and casualty

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1 insurance to state employees through payroll deduction. The board may 2 approve any such plan for payroll deduction by insuring entities 3 holding a valid certificate of authority in the state of Washington 4 and which the board determines to be in the best interests of 5 employees and the state. The board shall adopt rules setting forth 6 criteria by which it shall evaluate the plans.

7 (10) Before January 1, 1998, the public employees' benefits board 8 shall make available one or more fully insured long-term care 9 insurance plans that comply with the requirements of chapter 48.84 10 RCW. Such programs shall be made available to eligible employees, 11 retired employees, and retired school employees as well as eligible 12 dependents which, for the purpose of this section, includes the 13 parents of the employee or retiree and the parents of the spouse of 14 the employee or retiree. Employees of local governments, political 15 subdivisions, and tribal governments not otherwise enrolled in the 16 public employees' benefits board sponsored medical programs may enroll 17 under terms and conditions established by the administrator, if it 18 does not jeopardize the financial viability of the public employees' 19 benefits board's long- term care offering.

(a) Participation of eligible employees or retired employees and retired school employees in any long-term care insurance plan made available by the public employees' benefits board is voluntary and shall not be subject to binding arbitration under chapter 41.56 RCW. Participation is subject to reasonable underwriting guidelines and eligibility rules established by the public employees' benefits board and the health care authority.

(b) The employee, retired employee, and retired school employee are solely responsible for the payment of the premium rates developed by the health care authority. The health care authority is authorized to charge a reasonable administrative fee in addition to the premium charged by the long-term care insurer, which shall include the health care authority's cost of administration, marketing, and consumer education materials prepared by the health care authority and the office of the insurance commissioner.

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1 (c) To the extent administratively possible, the state shall 2 establish an automatic payroll or pension deduction system for the 3 payment of the long-term care insurance premiums.

4 (d) The public employees' benefits board and the health care 5 authority shall establish a technical advisory committee to provide 6 advice in the development of the benefit design and establishment of 7 underwriting guidelines and eligibility rules. The committee shall 8 also advise the board and authority on effective and cost-effective 9 ways to market and distribute the long-term care product. The 10 technical advisory committee shall be comprised, at a minimum, of 11 representatives of the office of the insurance commissioner, providers 12 of long-term care services, licensed insurance agents with expertise 13 in long-term care insurance, employees, retired employees, retired 14 school employees, and other interested parties determined to be 15 appropriate by the board.

16 (e) The health care authority shall offer employees, retired 17 employees, and retired school employees the option of purchasing long-18 term care insurance through licensed agents or brokers appointed by 19 the long-term care insurer. The authority, in consultation with the 20 public employees' benefits board, shall establish marketing procedures 21 and may consider all premium components as a part of the contract 22 negotiations with the long-term care insurer.

(f) In developing the long-term care insurance benefit designs, the public employees' benefits board shall include an alternative plan of care benefit, including adult day services, as approved by the office of the insurance commissioner.

(g) The health care authority, with the cooperation of the office of the insurance commissioner, shall develop a consumer education program for the eligible employees, retired employees, and retired school employees designed to provide education on the potential need for long-term care, methods of financing long-term care, and the availability of long-term care insurance products including the products offered by the board.

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1 (11) The board may establish penalties to be imposed by the 2 authority when the eligibility determinations of an employing agency 3 fail to comply with the criteria under this chapter."

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EFFECT: Eliminates provisions relating to direct patientprovider primary care practices, and specifies that the Public Employees' Benefits Board shall offer the option of a high deductible health insurance plan along with a health savings account for any open enrollment period beginning on or after November 1, 2011.

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