## FINAL BILL REPORT SSB 6051

## C 196 L 20

Synopsis as Enacted

**Brief Description**: Concerning health coverage supplementing medicare part D provided through a federally authorized employer group waiver plan.

**Sponsors**: Senate Committee on Health & Long Term Care (originally sponsored by Senators Cleveland, O'Ban, Becker and Wilson, C.).

## Senate Committee on Health & Long Term Care House Committee on Health Care & Wellness

**Background**: <u>Health Plans</u>. Health plans are policies, contracts, or agreements offered by a health carrier to provide, arrange, reimburse, or pay for health care services. Health plans must comply with various insurance regulations including rate review, guaranteed issue requirements, prohibitions on rescission of coverage, minimum coverage and mandated benefits requirements, and other filing and reporting requirements. Health plans do not include:

- long-term care insurance;
- Medicare supplemental insurance;
- certain federal health insurance programs offered to members of the military and to veterans:
- limited health care services offered by limited health care service contractors;
- disability income;
- worker's compensation;
- accident only coverage;
- certain fixed payment insurance;
- employer-sponsored self-funded health plans;
- dental only and vision only coverage; and
- plans deemed to have a short-term limited purpose or duration.

Medicare Part D. Citizens and permanent residents of the United States who are age 65 or older, or under 65 with disabilities or end stage renal disease are generally eligible for Medicare. Medicare Part D is an optional part of the federal Medicare program allowing for the purchase of a prescription drug benefit. Individuals who are eligible for Medicare are eligible for Part D if they are enrolled in Part A, hospital coverage, or Part B, primary care and outpatient services.

Senate Bill Report - 1 - SSB 6051

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

<u>Supplemental Prescription Drug Coverage.</u> Employers and unions are permitted under a federal group waiver program to offer prescription drug coverage under the employer's or union's sponsored health coverage to retirees who are eligible for Medicare Part D. Employers offering supplemental Part D coverage must follow all Medicare Part D prescription drug requirements, except those explicitly waived by the Centers for Medicare and Medicaid Services.

**Summary**: A health plan does not include coverage supplemental to the coverage provided under an employer or union-sponsored prescription drug plan that exclusively supplements Medicare Part D coverage.

## **Votes on Final Passage:**

Senate 47 0 House 96 0

Effective: March 27, 2020