

Title 182 WAC

STATE EMPLOYEES INSURANCE BOARD

Chapters

182-04	Public records.
182-08	Procedures.
182-12	Eligible and noneligible employees.

Chapter 182-04 WAC PUBLIC RECORDS

WAC

182-04-010	Purpose.
182-04-015	Definitions.
182-04-025	Public records.
182-04-030	Public records officer.
182-04-035	Office hours.
182-04-040	Request for public records.
182-04-045	Copying.
182-04-050	Exemptions.
182-04-055	Review of denials of public records request.
182-04-060	Protection of public records.
182-04-065	Communication with the board.
182-04-070	Adoption of form.

WAC 182-04-010 Purpose. The purpose of this chapter shall be to insure compliance by the Washington state employee insurance board with the provisions of chapter 42.17 RCW dealing with public records. [Order 01-77, § 182-04-010, filed 8/26/77.]

WAC 182-04-015 Definitions. The following definitions shall apply:

(1) "Public record" includes any writing containing information relating to the conduct of government or the performance of any governmental agency or local agency regardless of form or characteristics.

(2) "Writing" means handwriting, typewriting, printing, photostating and every other means of recording any form of communication or representation, including letters, words, pictures, sounds symbols, or combinations thereof, and all papers, maps, magnetic or paper tapes, photographic films and prints, magnetic or punched cards, discs, drums and other documents.

(3) The Washington state employee insurance board, created pursuant to chapter 41.05 RCW. The state employee insurance board shall hereinafter be referred to as the board. For the purposes of WAC 182-04-015 through 182-04-070 inclusive, the term "board" shall also refer to the staff and employees of the Washington state employee insurance board. [Order 01-77, § 182-04-015, filed 8/26/77.]

WAC 182-04-025 Public records. All public records of the board as defined in WAC 182-04-015(1) shall be made available upon public request for inspection and copying pursuant to these rules, except however

as provided by RCW 42.17.310. [Order 01-77, § 182-04-025, filed 8/26/77.]

WAC 182-04-030 Public records officer. The public records officer for the board shall be the insurance benefits supervisor or his designee. He shall be responsible for implementing the rules adopted by the board regarding release of public records in compliance with chapter 42.17 RCW. [Order 01-77, § 182-04-030, filed 8/26/77.]

WAC 182-04-035 Office hours. Public records shall be made available upon request only during working hours of the board. For the purpose of this chapter, the working hours shall be from 8:00 a.m. until noon, and from 1:00 p.m. until 5:00 p.m., Monday through Friday, excluding legal holidays. [Order 01-77, § 182-04-035, filed 8/26/77.]

WAC 182-04-040 Request for public records. In accordance with the requirements of chapter 42.17 RCW that agencies prevent unreasonable invasions of privacy, and to protect public records from damage or disorganization, and to prevent excessive interference with essential functions of the agency, public records may be inspected or copied, or copies of such records, may be obtained by members of the public, upon compliance with the following procedures:

(1) A request shall be made in writing upon a form prescribed by the agency which shall be available at its office. The form shall be presented to the public records officer; or to any member of the agency's staff, if the public records officer is not available, at the office of the agency during customary office hours. The request shall include the following information:

(a) The name, address, and organization represented, if any, of the person requesting the record;

(b) The time of day and calendar date on which the request was made;

(c) The nature of the request;

(d) If the matter requested is referred to within the current index maintained by the records officer, a reference to the requested record as it is described in such current index;

(e) If the requested matter is not identifiable by reference to the agency's current index, an appropriate description of the record requested.

(2) In all cases in which a member of the public is making a request, it shall be the obligation of the public records officer or staff member to assist the member of the public in appropriately identifying the public record requested. [Order 01-77, § 182-04-040, filed 8/26/77.]

WAC 182-04-045 Copying. No fee shall be charged for the inspection of public records. The agency shall charge a reasonable fee for providing copies of public records and for use of the agency's copy equipment. This charge is the amount necessary to reimburse the agency for its actual costs incident to such copying. [Order 01-77, § 182-04-045, filed 8/26/77.]

WAC 182-04-050 Exemptions. (1) The board reserves the right to determine that a public record requested in accordance with the procedures outlined in WAC 182-04-040 is exempted under the provisions of RCW 42.17.310.

(2) Pursuant to RCW 42.17.260, the board reserves the right to delete identifying details when it makes available or publishes any public record, in any case where there is reason to believe that disclosure of such details would be an invasion of personal privacy protected by chapter 42.17 RCW. The public records officer will fully justify such deletion in writing.

(3) All denials of requests for public records shall be accompanied by a written statement specifying the reason for the denial. [Order 01-77, § 182-04-050, filed 8/26/77.]

WAC 182-04-055 Review of denials of public records request. (1) Any person who objects to the denial of request for public record may petition for prompt review of such decision by tendering a written request for review. The written request shall specifically refer to the written statement by the public records officer or other staff member which constituted or accompanied the denial.

(2) Following receipt of a written request for review of a decision denying a public record, the records officer shall immediately consider the matter and either affirm or reverse such denial. The request shall be returned with a final decision within two business days following the receipt of such request. [Order 01-77, § 182-04-055, filed 8/26/77.]

WAC 182-04-060 Protection of public records. Following are guidelines which shall be adhered to by any person inspecting such public records:

(1) Inspection of any public records shall be conducted only during working hours as specified in WAC 182-04-035 with the presence of SEIB employees;

(2) No public record shall be removed from the main office without the approval of the insurance benefit supervisor or without the authorization of the SEIB;

(3) Public records shall not be marked, torn, or otherwise damaged;

(4) Public records must be maintained as they are in file or in a chronological order, and shall not be dismantled except for purposes of copying and then only by SEIB employees or others authorized by the insurance benefit supervisor;

(5) Access to file cabinets and other places where public records are kept is restricted, and shall be used by the board. [Order 01-77, § 182-04-060, filed 8/26/77.]

WAC 182-04-065 Communication with the board. All communications with the board pertaining to the administration or the enforcement of chapter 42.17 RCW and these rules shall be addressed as follows: Insurance Benefits Supervisor, Department of Personnel, State of Washington, 600 South Franklin, Olympia, Washington 98504. [Order 01-77, § 182-04-065, filed 8/26/77.]

WAC 182-04-070 Adoption of form. The board hereby adopts for use by all persons requesting inspection and/or copying or copies of its records, the form set out below, entitled "Request for public records."

State Employees Insurance Board
Department of Personnel
State of Washington
600 South Franklin
Olympia, Washington 98504

We have received your request for copies of our public records. We would appreciate it if you complete the form on the right and return with the amount required. We will forward the requested copies as soon as we receive this form.

Thank You.

Return to:

Insurance Benefits Supervisor
Department of Personnel
600 South Franklin
Olympia, Washington 98504

Request for Public Records

DATE ----- TIME -----

NAME -----

ADDRESS -----

PURPOSE OF REQUEST

I certify that the information obtained through this request for public records will be used only for the reasons stated and will not be used for commercial purposes.

Signature

No. of copies -----

No. of pages -----

Per page charge \$-----

Total charge \$-----

[Order 01-77, § 182-04-070, filed 8/26/77.]

**Chapter 182-08 WAC
PROCEDURES**

WAC	
182-08-010	Declaration of purpose.
182-08-020	Duties and responsibilities.
182-08-030	Scope and construction of terms.
182-08-040	Definitions.
182-08-060	Approval of health maintenance organization or panel plans.
182-08-110	Open enrollments.
182-08-111	Medical plan options between open enrollments.
182-08-120	Employer contribution.
182-08-140	New dependents' life coverage after enrollment.
182-08-150	Reduction or cancellation of optional insurance coverages.
182-08-160	Group coverage when not in pay status.
182-08-170	Insurance status for a reverted employee.
182-08-180	Reimbursement payment of miscalculated premiums.
182-08-190	Employer contribution to the SEIB revolving fund.
182-08-200	Payment of the employer contribution for eligible employees changing agency employment.
182-08-210	Termination of employer paid insurance benefit programs.
182-08-300	Criteria for selection of insurance company for automobile and homeowners insurance.

**DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS
CHAPTER**

182-08-080	Employee to elect option. [Order 7228, § 182-08-080, filed 12/8/76.] Repealed by 79-11-064 (Order 2-79), filed 10/18/79. Statutory Authority: Chapter 41.05 RCW.
182-08-090	Transferred employee. [Order 3-77, § 182-08-090, filed 11/17/77; Order 7228, § 182-08-090, filed 12/8/76.] Repealed by 79-11-064 (Order 2-79), filed 10/18/79. Statutory Authority: Chapter 41.05 RCW.
182-08-130	New dependents' medical coverage after enrollment. [Order 7228, § 182-08-130, filed 12/8/76.] Repealed by Order 3-77, filed 11/17/77.

WAC 182-08-010 Declaration of purpose. The general purpose of these rules is to establish for the state a system of employee benefits administration used by the state employees' insurance board, based on the uniform standards for health and life insurance for state employees and the higher education faculty and staff. All insurance-related contract negotiations shall be made on the basis of the policies hereinafter specified. [Order 7228, § 182-08-010, filed 12/8/76.]

WAC 182-08-020 Duties and responsibilities. (Chapter 41.05 RCW) The following shall be the duties and responsibilities of the state employees' insurance board (SEIB):

(1) Prescribe rules for the conduct of its business and elect a chairman and vice chairman at its first meeting and annually thereafter.

(2) Study all matters connected with the providing of adequate health care coverage, life insurance, liability insurance, accidental death and dismemberment insurance, and disability income insurance or any one of, or a combination of, the enumerated types of insurance and health care plans for state employees and their dependents.

(3) Design benefits, devise specifications, analyze carrier responses to advertisements for bids, determine the

terms and conditions of employee participation and coverage, and decide on the award of contracts which shall be signed by the trustee on behalf of the board.

(4) Develop and provide employee health care benefit plans. At least one plan will provide major medical benefits as its primary feature, at least one plan will provide basic first-dollar benefits as its primary feature plus major medical, either or all of which may be provided through a contract or contracts with regularly constituted insurance carriers or health care service contractors. [Order 7228, § 182-08-020, filed 12/8/76.]

WAC 182-08-030 Scope and construction of terms. Terms used in these SEIB rules will have the meaning given to them except where otherwise defined, and unless where used the context thereof shall clearly indicate another meaning.

Words and phrases used herein in the past, present or future tense shall include the past, present and future tenses; words and phrases used herein in the masculine, feminine, or neuter gender shall include the masculine, feminine and neuter gender; and words and phrases used herein in the singular or plural shall include the singular and plural, unless the context thereof shall indicate another meaning. [Order 7228, § 182-08-030, filed 12/8/76.]

WAC 182-08-040 Definitions. The following definitions apply throughout these rules unless the context clearly indicates another meaning.

ANNIVERSARY DATE – contract renewal date for any employee insurance benefits under chapter 41.05 RCW.

BOARD – state employees' insurance board (SEIB) established under the provisions of chapter 41.05 RCW.

COMMERCIAL CARRIER – mutual or stock insurance company.

HEALTH CARE SERVICE CONTRACTOR (RCW 48.44-.010) – "health care service contractor" means any corporation, cooperative group, or association, which corporation, cooperative group, or association is sponsored by or otherwise intimately connected with a group of doctors licensed by the state of Washington or by a group of hospitals licensed by the state of Washington; or doctor licensed by the state of Washington; or group of doctors licensed by the state of Washington, who or which not otherwise being engaged in the insurance business, accepts prepayment for health care services from or for the benefit of persons or groups of persons as consideration for providing such persons with any health care services.

HEALTH MAINTENANCE ORGANIZATION (HMO) – health care service contractors which also meets the requirements of the state Health Maintenance Organization Act of 1975.

INSURANCE CONTRACT – the written legal document between the insurance company and the purchaser that specifies the benefits, limitations, exclusions, and other terms agreed to under the policy.

MEDICAL SERVICE BUREAUS – Washington physicians service. A health care service contractor who offers

service benefits for physician service and indemnity benefits for hospital services.

OPEN ENROLLMENT – that period of time, set by the SEIB when employees may sign up for coverages of their choice for which they may not have been previously insured, without evidence of insurability.

PANEL PLAN – health care service contractor providing medical facilities and service on a prepaid basis.

PREMIUM – the periodic payment required of a policyholder to keep insurance coverages in force.

SERVICE AREA – that geographical area that has been approved by the SEIB for the operation of the health care service contractor.

STATE CONTRIBUTION – employer-paid monies for premium charges, as appropriated by the legislature. [Order 7228, § 182-08-040, filed 12/8/76.]

WAC 182-08-060 Approval of health maintenance organization or panel plans. In the absence of any federal or state statute to the contrary, the board may approve one individual practice and one group practice and one health maintenance operator or panel plan, within a service area, during a contract term. Where more than one health care service contractor seeks approval within the same service area, the board shall approve the health care service contractor which will best serve the total needs and have the ability to service the proposed benefits with a direct ratio of benefits to premium advantage. [Order 7228, § 182-08-060, filed 12/8/76.]

WAC 182-08-110 Open enrollments. Open enrollment for medical coverages will normally be conducted annually. The board will determine when an open enrollment will be held for life insurance. [Order 7228, § 182-08-110, filed 12/8/76.]

WAC 182-08-111 Medical plan options between open enrollments. The following medical plan options are available between open enrollments:

(1) Enrolled employees or retirees who move to a new home residence area may; (a) continue their present plan with a clear understanding of the out of service area restrictions of such plan, (b) change to a health maintenance organization or panel plan which was not available in their former home residence area, or (c) change from a health maintenance organization or panel plan to the insured plan if their new home residence is outside the service area of their former plan.

(2) Employees or retirees who are terminated from a health maintenance organization or panel plan because of failure to comply with the provisions of such plan may change to another SEIB medical plan which is available in their home residence area.

(3) In the case of a court order requiring an employee or retiree to provide medical coverage for an eligible spouse or child, the employee/retiree may change medical plans and add such dependent without proof of insurability.

Such enrollment changes must be made within 31 days of the date the above reason for change occurs. For subsections (1) and (2) of this section, the change in

coverage becomes effective on the first of the month following the date of application. For subsection (3) of this section, the change is retroactive to the effective date of the court order. [Statutory Authority: Chapter 41.05 RCW. 81-03-014 (Order 1-81), § 182-08-111, filed 1/9/81; 79-11-064 (Order 2-79), § 182-08-111, filed 10/18/79.]

WAC 182-08-120 Employer contribution. The board has utilized the employers' contribution to provide coverage for the basic life insurance benefit, a basic long term disability benefit, medical coverage, dental coverage, and the premium cost for employees age seventy and over who are eligible for Medicare Part "B," and to establish a reserve for any remaining balance. There is no employer contribution available for any other insurance coverages. [Statutory Authority: Chapter 41.05 RCW. 83-22-042 (Resolution No. 6-83), § 182-08-120, filed 10/28/83; Order 3-77, § 182-08-120, filed 11/17/77; Order 7228, § 182-08-120, filed 12/8/76.]

WAC 182-08-140 New dependents' life coverage after enrollment. Newly acquired eligible first dependents may be enrolled in Part "B" (dependent life insurance) of the life insurance program without evidence of insurability within 31 days after they become eligible, except that new born children are not covered for the first 14 days. Otherwise, new dependents are automatically covered if the employee is already enrolled in Part "B" of the life insurance coverage. [Order 7228, § 182-08-140, filed 12/8/76.]

WAC 182-08-150 Reduction or cancellation of optional insurance coverages. The reduction or cancellation of optional insurance coverages would be effective at the end of the last month for which a premium was paid. Reinstatement or replacement of reduced or cancelled insurance may require proof of insurability, except during an open enrollment for that coverage. [Order 3-77, § 182-08-150, filed 11/17/77; Order 7228, § 182-08-150, filed 12/8/76.]

WAC 182-08-160 Group coverage when not in pay status. An employee who is temporarily not in pay status may retain state group coverages, except long term disability and dental, by self-payment of premium during any authorized leave without pay, during a layoff because of a reduction in force, or while receiving time loss benefits under worker's compensation, subject to a maximum self-pay period of twenty-nine months. An employee may retain long term disability coverage by self-payment of premium up to twenty-four months during an authorized leave without pay, but only if such leave is an approved educational leave. Employees not in pay status are ineligible to receive credit for the employer premium contribution. [Statutory Authority: Chapter 41.05 RCW. 83-22-042 (Resolution No. 6-83), § 182-08-160, filed 10/28/83; 80-01-082 (Order 5-79), § 182-08-160, filed 12/27/79; 78-03-021 (Order 3-78), § 182-08-160, filed 2/14/78; Order 7228, § 182-08-160, filed 12/8/76.]

WAC 182-08-170 Insurance status for a reverted employee. Employees who revert and are not successful in regaining pay status during the last month in which their employer contribution is made may continue their state group coverages, except long term disability and dental, by self-payment of premium for a maximum of twelve months. During and up to the end of that twelve month term the reverted employee is ineligible to receive credit for the employer premium contribution. However, if a reverted employee moves to a noneligible position, i.e.; temporary, intermittent or emergency, without a break in service, the employee shall retain eligibility for the employer contribution during such employment. [Statutory Authority: Chapter 41.05 RCW. 78-02-015 (Order 2-78), § 182-08-170, filed 1/10/78; Order 7228, § 182-08-170, filed 12/8/76.]

WAC 182-08-180 Reimbursement payment of miscalculated premiums. Premiums miscalculated will be adjusted by returning the excess charged premium to the employee or retiree. Errors producing an underpayment will be reimbursed by the employee or retiree. The agency will communicate with the employee or retiree and develop a repayment term that will not create undue hardship on the employee or retiree. [Order 01-77, § 182-08-180, filed 8/26/77.]

WAC 182-08-190 Employer contribution to the SEIB revolving fund. An employer contribution in the amount established by the board shall be made to the SEIB revolving fund for each eligible employee in pay status for eight or more hours during a calendar month. [Statutory Authority: Chapter 41.05 RCW. 78-02-015 (Order 2-78), § 182-08-190, filed 1/10/78; Order 3-77, § 182-08-190, filed 11/17/77.]

WAC 182-08-200 Payment of the employer contribution for eligible employees changing agency employment. When an eligible employee's employment ceases with an agency at any time prior to the end of the month for which employer contribution is due and transfers to another agency, the losing agency is responsible for the payment of the employer contribution for that employee for that month. The receiving agency would not be liable for any employer contribution for that eligible employee until the month following the transfer. [Order 3-77, § 182-08-200, filed 11/17/77.]

WAC 182-08-210 Termination of employer paid insurance benefit programs. Coverage for a terminated employee, spouse and dependent children under the employer paid insurance benefit programs shall cease at 12:00 midnight, the last day the employee is in pay status. [Order 3-77, § 182-08-210, filed 11/17/77.]

WAC 182-08-300 Criteria for selection of insurance company for automobile and homeowners insurance. Insurance companies to be considered must meet the following criteria:

(1) Eligibility to include all employees and retirees, and their dependents, except those failing to meet eligibility requirements specified by the board.

(2) Premium cost to be paid entirely by the insured through payroll deduction for active employees and by provisions established by the board for all other eligible persons.

(3) The company must be a financially sound insurance carrier licensed to do business in the state of Washington having at least a B + Best rating.

(4) The board may establish additional criteria as necessary to make an adequate evaluation of the proposals.

(5) The board may approve one or more carriers which meet the above criteria. [Statutory Authority: Chapter 41.05 RCW. 81-03-014 (Order 1-81), § 182-08-300, filed 1/9/81.]

Chapter 182-12 WAC

ELIGIBLE AND NONELIGIBLE EMPLOYEES

WAC

182-12-110	Purpose.
182-12-111	Eligible entities.
182-12-115	Eligible employees and retirees.
182-12-120	Noneligible employees.
182-12-121	Change in eligibility status.
182-12-122	Surviving dependents eligibility.
182-12-125	Employee or dependents become ineligible for state group coverage.
182-12-130	Retirees eligible for Medicare.
182-12-132	Retirees returning to state employment.
182-12-140	New eligible employees.
182-12-145	Insurance eligibility for higher education.
182-12-151	Dependent life insurance.
182-12-160	State legislators.
182-12-165	State contribution for permanent employees appointed to seasonal positions.
182-12-190	Retirees changing medical plans at retirement.
182-12-200	Retirees may change enrollment in approved SEIB insurance plans.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

182-12-135	Eligibility for employees on leave without pay. [Order 4-77, § 182-12-135, filed 11/17/77; Order 5646, § 182-12-135, filed 2/9/76.] Repealed by 80-05-016 (Order 2-80), filed 4/10/80. Statutory Authority: Chapter 41.05 RCW.
182-12-150	Husband and wife are eligible employees. [Order 5646, § 182-12-150, filed 2/9/76.] Repealed by Order 4-77, filed 11/17/77.
182-12-155	Classified employee eligible for employer contribution. [Order 5646, § 182-12-155, filed 2/9/76.] Repealed by Order 4-77, filed 11/17/77.
182-12-170	State contributions for Medicare for actively employed. [Order 7228, § 182-12-170, filed 12/8/76.] Repealed by 83-22-042 (Resolution No. 6-83), filed 10/28/83. Statutory Authority: Chapter 41.05 RCW.

WAC 182-12-110 Purpose. The purpose of this chapter is to establish criteria of employee eligibility for all state employee insurance board approved plans. [Order 5646, § 182-12-110, filed 2/9/76.]

WAC 182-12-111 Eligible entities. Every department, division, or separate agency of state government is

eligible and required to participate in all board approved plans. Participation by any county, municipality, or other political subdivision of this state shall be subject to the board's approval of the political subdivision's application. Conditions under which the board may approve such applications include, but are not limited to, the following; the political subdivision shall:

- (1) Include all eligible employees as a unit.
- (2) Obligate itself to participate in all board approved plans.
- (3) Make employer contributions in the same amount as those provided by the state as employer.
- (4) Furnish the board, employee census data and prior claim experience, if available.
- (5) Agree to maintain its participation in all board approved plans at least to the July 1 following its effective date of participation, and in the event of termination furnish the board written notice at least thirty days prior to its termination date. Provided the board shall:

- (1) Consider and act on all applications received from political subdivisions.
- (2) Hold a public hearing on all applications received. [Statutory Authority: Chapter 41.05 RCW. 78-02-015 (Order 2-78), § 182-12-111, filed 1/10/78.]

WAC 182-12-115 Eligible employees and retirees.

The following definitions of eligible employees and retirees of an eligible entity, as defined in WAC 182-12-111, shall apply for all SEIB approved plans except as otherwise stated in this chapter:

(1) "Full-time employees." Those who work a full-time work week for their agency and are expected to be employed for more than six months.

(2) "Permanent part-time employees." Those who do not work full-time, but who are under continuous employment by an agency, and who are scheduled to work at least 80 hours per month.

(3) "Career seasonal employees." Those who work at least 80 hours per month during a designated season for a minimum of three months per year and who have an understanding of continued employment with their agency season after season. These employees become eligible to enroll when they return to state employment for their second "season" of employment. Employees who work on a seasonal basis and do not elect to self pay during the break between seasons shall be treated as "new" employees on return to work in a following season.

(4) "Appointed and elected officials." Legislators are eligible on the date their term begins. All other elected and full-time appointed officials of the legislative and executive branches of state government are eligible on the date their term begins or they take the oath of office, whichever occurs first.

(5) "Judges." Justices of the supreme court and judges of the court of appeals and the superior courts become eligible on the date they take the oath of office.

(6) "Retirees and disabled employees." Eligible employees who terminate state service after becoming

vested in a Washington state sponsored retirement system are eligible for retiree medical, dental and life coverages provided the person:

- (a) Immediately begins receiving a monthly retirement income benefit from such retirement system; or
- (b) If not retiring under the public employees retirement system (PERS), would have been eligible for a monthly retirement income benefit because of age and years of service had the person been employed under the provisions of PERS I or PERS II for the same period of employment; or
- (c) Must take a lump sum benefit because their monthly benefit would have been under fifty dollars.

Employees who are permanently and totally disabled and eligible for a deferred monthly retirement income benefit are likewise eligible, provided they apply for retiree coverage before their SEIB active employee coverage ends. Persons retiring who do not have waiver of premium coverage from any SEIB life insurance plan are eligible for retiree life insurance, subject to the same qualifications as for retiree medical coverage. Retirees and disabled employees are not eligible for an employer premium contribution. The Federal Civil Service Retirement System shall be considered a Washington state sponsored retirement system for Washington State University cooperative extension service employees who hold a federal civil service appointment and who are covered under the SEIB program at the time of retirement or disability. [Statutory Authority: Chapter 41.05 RCW. 83-12-007 (Order 2-83), § 182-12-115, filed 5/20/83; 80-05-016 (Order 2-80), § 182-12-115, filed 4/10/80; 78-08-071 (Order 5-78), § 182-12-115, filed 7/26/78; Order 5646, § 182-12-115, filed 2/9/76.]

WAC 182-12-120 Noneligible employees. The following definitions of noneligible employees shall apply:

(1) "Intermittent employees." Employees who are hired pursuant to the provisions of the merit system rules, specifically under the definition of "intermittent employees."

(2) "Temporary employees." Employees who are hired pursuant to the provisions of the merit system rules, specifically under the definition of "temporary employment." [Order 5646, § 182-12-120, filed 2/9/76.]

WAC 182-12-121 Change in eligibility status. Employees who voluntarily move from an eligible to an otherwise noneligible position shall retain their eligibility for the employer contribution each month in which they are in pay status eight hours or more, provided, (1) the new position is one in which the employee is scheduled to work half time or more, and (2) the employee did not terminate state service before taking the new position. Layoff because of reduction in force is not considered termination of state service. Proviso (1) above does not apply to employees who are on reduction in force status. [Statutory Authority: Chapter 41.05 RCW. 80-01-082 (Order 5-79), § 182-12-121, filed 12/27/79.]

WAC 182-12-122 Surviving dependents eligibility. The following classes of surviving dependents may continue their coverage in the medical program up to the age limits for dependent children by premium withholding or direct payment of premium: (1) Surviving spouse and/or eligible dependent children of a deceased retiree who were covered as dependents under the SEIB retiree medical plan at the time of the retiree's death, and (2) surviving spouse and/or eligible dependent children of a deceased employee who were covered as dependents under the SEIB employee medical plan at the time of the employee's death and who will immediately begin receiving a monthly retirement income benefit from a Washington state sponsored retirement system. (3) Surviving dependents of a deceased employee who are not eligible for a monthly retirement income benefit may continue their coverage for no more than three months. Application for surviving dependents medical coverage must be made within thirty-one days from the date of death of the retiree/employee. Coverage is retroactive to the date retiree/employee medical coverage terminated. Surviving dependents are not eligible for an employer premium contribution. Surviving dependents are not eligible for retiree life insurance. The Federal Civil Service Retirement System shall be considered a Washington state sponsored retirement system for Washington State University cooperative extension service employees who held a federal civil service appointment and who were covered under the SEIB program at the time of death. [Statutory Authority: Chapter 41.05 RCW. 80-05-016 (Order 2-80), § 182-12-122, filed 4/10/80; 78-08-071 (Order 5-78), § 182-12-122, filed 7/26/78.]

WAC 182-12-125 Employee or dependents become ineligible for state group coverage. All of the state plans have a conversion privilege. However, under the individual conversion plans, coverage and/or premiums will be different than the state plan with the same carrier. Persons wishing to convert must enroll in the appropriate conversion plan within 31 days after state group coverage ends. If a person converts within 31 days, conversion coverage will be effective the day after state coverage ends. [Order 5646, § 182-12-125, filed 2/9/76.]

WAC 182-12-130 Retirees eligible for Medicare. A retiree or retiree's eligible dependent who becomes covered under both Parts A and B of Medicare may enroll in the SEIB Medicare supplement at the appropriate Medicare supplement subscription rate. All other retirees and dependents must pay the full subscription rate for coverage applicable to persons not eligible for Medicare to obtain retiree medical coverage. [Statutory Authority: Chapter 41.05 RCW. 80-05-016 (Order 2-80), § 182-12-130, filed 4/10/80; Order 4-77, § 182-12-130, filed 11/17/77; Order 5646, § 182-12-130, filed 2/9/76.]

WAC 182-12-132 Retirees returning to state employment. Retirees enrolled in the SEIB retiree medical and/or life program, who return to active employment in an otherwise noneligible position, shall be eligible to

continue such coverage on a direct payment basis beginning on the date their eligibility for SEIB retiree coverage would otherwise terminate. [Statutory Authority: Chapter 41.05 RCW. 80-05-016 (Order 2-80), § 182-12-132, filed 4/10/80.]

WAC 182-12-140 New eligible employees. New eligible employees shall be covered for all employer paid insurance coverages effective on the date of hire. [Order 4-77, § 182-12-140, filed 11/17/77; Order 5646, § 182-12-140, filed 2/9/76.]

WAC 182-12-145 Insurance eligibility for higher education. For the purpose of insurance eligibility and experience reporting, the SEIB considers the higher education personnel board, the council for post secondary education, and the state board for community colleges to be higher education agencies. [Order 5646, § 182-12-145, filed 2/9/76.]

WAC 182-12-151 Dependent life insurance. Nothing in these rules shall preclude both husband and wife who are eligible employees from insuring their employed spouse and/or eligible children under dependent life insurance. [Order 01-77, § 182-12-151, filed 8/26/77.]

WAC 182-12-160 State legislators. State legislators who voluntarily or involuntarily leave state office shall be considered as retired employees, whether or not they receive a benefit from a State retirement system. [Order 5646, § 182-12-160, filed 2/9/76.]

WAC 182-12-165 State contribution for permanent employees appointed to seasonal positions. Otherwise eligible employees appointed to seasonal positions including those employees in the higher education institutions who work on an instructional year basis, or those employees having an employment relationship to provide services in successive years or school terms, shall be eligible to receive the state contribution for insurance between periods of active employment. However, otherwise eligible employees appointed to seasonal positions who would otherwise be eligible for the state contribution, who enroll in any other employer paid group insurance program, not under the authority of SEIB, shall not receive the state contribution until they return to active employment. [Order 7228, § 182-12-165, filed 12/8/76.]

WAC 182-12-190 Retirees changing medical plans at retirement. Retirees eligible to continue their medical coverage after retirement may elect to change medical plans at the time of retirement. [Statutory Authority: Chapter 41.05 RCW. 80-05-016 (Order 2-80), § 182-12-190, filed 4/10/80; Order 4-77, § 182-12-190, filed 11/17/77.]

WAC 182-12-200 Retirees may change enrollment in approved SEIB insurance plans. A retiree whose spouse is an eligible employee has the right to enroll in the spouses' SEIB plan. Should the spouse cease to be an eligible employee the retiree may reenroll in the retiree

plan, with the spouse as a dependent. [Order 4-77, §
182-12-200, filed 11/17/77.]