SENATE BILL 5841

State of Washington 61st Legislature 2009 Regular Session

By Senator Keiser; by request of Health Care Authority

Read first time 02/04/09. Referred to Committee on Health & Long-Term Care.

AN ACT Relating to the health insurance partnership; amending RCW 70.47A.030, 70.47A.040, and 70.47A.070; and repealing 2007 c 260 s 11 (uncodified).

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

5 Sec. 1. RCW 70.47A.030 and 2008 c 143 s 2 are each amended to read 6 as follows:

7 (1) To the extent funding is appropriated in the operating budget for this purpose, the health insurance partnership is established. 8 The 9 administrator shall be responsible for the implementation and operation 10 of the health insurance partnership, directly or by contract. The administrator shall offer premium subsidies to eligible partnership 11 participants under RCW 70.47A.040. 12 ((The partnership shall begin to 13 offer coverage no later than March 1, 2009.))

14 (2) Consistent with policies adopted by the board under RCW15 70.47A.110, the administrator shall, directly or by contract:

16 (a) Establish and administer procedures for enrolling small 17 employers in the partnership, including publicizing the existence of 18 the partnership and disseminating information on enrollment, and 19 establishing rules related to minimum participation of employees in

small groups purchasing health insurance through the partnership. 1 2 Opportunities to publicize the program for outreach and education of small employers on the value of insurance shall explore the use of 3 online employer guides. As a condition of participating in the 4 partnership, a small employer must agree to establish a cafeteria plan 5 б under section 125 of the federal internal revenue code that will enable 7 employees to use pretax dollars to pay their share of their health 8 The partnership shall provide technical benefit plan premium. 9 assistance to small employers for this purpose;

10 (b) Establish and administer procedures for health benefit plan 11 enrollment by employees of small employers during open enrollment 12 periods and outside of open enrollment periods upon the occurrence of 13 any qualifying event specified in the federal health insurance portability and accountability act of 1996 or applicable state law. 14 Except to the extent authorized in RCW 70.47A.110(1)(e), neither the 15 employer nor the partnership shall limit an employee's choice of 16 17 coverage from among the health benefit plans offered through the 18 partnership;

19 (c) Establish and manage a system of collecting and transmitting to 20 the applicable carriers all premium payments or contributions made by 21 behalf of partnership participants, including or on employer automatic for 22 contributions, payroll deductions partnership 23 participants, premium subsidy payments, and contributions from 24 philanthropies;

(d) Establish and manage a system for determining eligibility for
and making premium subsidy payments under chapter 259, Laws of 2007;

27 (e) Establish a mechanism to apply a surcharge to each health 28 benefit plan purchased through the partnership, which shall be used 29 only to pay for administrative and operational expenses of the 30 The surcharge must be applied uniformly to all health partnership. benefit plans purchased through the partnership. Any surcharge amount 31 32 may be added to the premium, but shall not be considered part of the small group community rate, and shall be applied only to the coverage 33 purchased through the partnership. Surcharges may not be used to pay 34 35 any premium assistance payments under this chapter. The surcharge 36 shall reflect administrative and operational expenses remaining after 37 any appropriation provided by the legislature to support administrative

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1 or operational expenses of the partnership during the year the 2 surcharge is assessed;

3 (f) Design a schedule of premium subsidies that is based upon gross 4 family income, giving appropriate consideration to family size and the 5 ages of all family members based on a benchmark health benefit plan designated by the board. The amount of an eligible partnership б participant's premium subsidy shall be determined by applying a sliding 7 8 scale subsidy schedule with the percentage of premium similar to that developed for subsidized basic health plan enrollees under RCW 9 10 70.47.060. The subsidy shall be applied to the employee's premium obligation for his or her health benefit plan, so that employees 11 12 benefit financially from any employer contribution to the cost of their 13 coverage through the partnership.

14 (3) The administrator may enter into interdepartmental agreements 15 with the office of the insurance commissioner, the department of social 16 and health services, and any other state agencies necessary to 17 implement this chapter.

18 Sec. 2. RCW 70.47A.040 and 2008 c 143 s 3 are each amended to read 19 as follows:

20 Beginning January 1, ((2009)) 2011, or earlier, subject to 21 sufficient state or federal funding being provided specifically for 22 this purpose, the administrator shall accept applications from eligible 23 partnership participants, on behalf of themselves, their spouses, and their dependent children, to receive premium subsidies through the 24 25 health insurance partnership. Every effort shall be made to coordinate 26 premium subsidies for dependent children with federal funding available 27 under Title XIX and Title XXI of the federal social security act, consistent with the requirements established in RCW 74.09.470(4) for 28 29 the employer-sponsored insurance program at the department of social 30 and health services.

31 **Sec. 3.** RCW 70.47A.070 and 2008 c 143 s 4 are each amended to read 32 as follows:

<u>Upon implementation of the health insurance partnership program,</u> <u>the administrator shall report biennially((, beginning November 1,</u> <u>2010,</u>)) to the relevant policy and fiscal committees of the legislature on the effectiveness and efficiency of the health insurance partnership

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program, including enrollment trends, the services and benefits covered under the purchased health benefit plans, consumer satisfaction, and other program operational issues.

4 <u>NEW SECTION.</u> Sec. 4. 2007 c 260 s 11 (uncodified) is repealed.

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