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SENATE BILL 6519

State of Washington 63rd Legislature 2014 Regular Session

By Senators Litzow, Hobbs, Keiser, and McAuliffe

Read first time 01/31/14. Referred to Committee on Health Care .

- 1 AN ACT Relating to the reporting of public school employees'
- 2 insurance benefits; amending RCW 48.02.210, 41.05.655, and 42.56.400;
- 3 reenacting and amending RCW 42.56.400; providing an effective date; and
- 4 providing an expiration date.

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- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 6 **Sec. 1.** RCW 48.02.210 and 2012 2nd sp.s. c 3 s 5 are each amended to read as follows:
 - (1) For purposes of this section, "benefit provider" has the same meaning as provided in RCW 28A.400.270.
- (2)(a) By December 1, 2013, and December 1st of each year 10 thereafter, the commissioner shall submit a report to the governor, the 11 health care authority, and the legislature on school district health 12 13 insurance benefits. The report shall be available to the public on the 14 commissioner's web site. The confidentiality of 15 identifiable district employee data shall be safeguarded consistent 16 with the provisions of RCW 42.56.400(21).
- 17 (b) The report shall include a summary of each school district's
- 18 health insurance benefit plans and each district's aggregated financial
- 19 data and other information as required in RCW 28A.400.275.

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(3) The commissioner shall collect data from school districts or their benefit providers to fulfill the requirements of this section. The commissioner may adopt rules necessary to implement the data submission requirements under this section and RCW 28A.400.275, including, but not limited to, the format, timing of data reporting, data elements, data standards, instructions, definitions, and data sources.

- (4) In fulfilling the duties under chapter 3, Laws of 2012 2nd sp. sess., the commissioner shall consult with school district representatives to ensure that the data and reports from benefit providers will give individual school districts sufficient information to enhance districts' ability to understand, manage, and seek competitive alternatives for health insurance coverage for their employees.
- (5) If the commissioner determines that a school district has not substantially complied with the reporting requirements of RCW 28A.400.275, and the failure is due to the action or inaction of the school district, the commissioner will inform the superintendent of public instruction of the noncompliance.
- (6) The office of the insurance commissioner shall share all data, information, and documents collected pursuant to this section with the health care authority.
- (7) Data, information, and documents, other than those described in subsection (2) of this section, that are provided by a school district or an entity providing coverage pursuant to this section are exempt from public inspection and copying under chapter 3, Laws of 2012 2nd sp. sess. and chapters 42.17A and 42.56 RCW.
- $((\frac{1}{2}))$ (8) If a school district or benefit provider does not comply with the data reporting requirements of this section or RCW 28A.400.275, and the failure is due to the actions of an entity providing coverage authorized under this title $((\frac{48 \text{ RCW}}{1}))$, the commissioner may take enforcement actions under this chapter.
- 33 (((8))) <u>(9)</u> The commissioner may enter into one or more personal 34 services contracts with third-party contractors to provide services 35 necessary to accomplish the commissioner's responsibilities under 36 chapter 3, Laws of 2012 2nd sp. sess.

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Sec. 2. RCW 41.05.655 and 2012 2nd sp.s. c 3 s 6 are each amended to read as follows:

By June 1, 2015, the health care authority must report to the governor, legislature, and joint legislative audit and review committee the following duties and analyses, based on two years of reports and other data, information, and documents collected by the office of the insurance commissioner, on school district health benefits submitted to it by the office of the insurance commissioner under this section or RCW 48.02.210:

- (1) The director shall establish a specific target to realize the goal of greater equity between premium costs for full family coverage and employee only coverage for the same health benefit plan. In developing this target, the director shall consider the appropriateness of the three-to-one ratio of employee premium costs between full family coverage and employee only coverage, and consider alternatives based on the data and information received from the office of the insurance commissioner.
- (2) The director shall also study and report the advantages and disadvantages to the state, local school districts, and district employees:
- (a) Whether better progress on the legislative goals could be achieved through consolidation of school district health insurance purchasing through a single consolidated school employee health benefits purchasing plan;
- (b) Whether better progress on the legislative goals could be achieved by consolidating K-12 health insurance purchasing through the public employees' benefits board program, and whether consolidation into the public employees' benefits board program would be preferable to the creation of a consolidated school employee health benefits purchasing plan; and
- (c) Whether certificated or classified employees, as separate groups, would be better served by purchasing health insurance through a single consolidated school employee health benefits purchasing plan or through participation in the public employees' benefits board program((; and

(d)).

37 <u>(3)</u> Analyses shall include implications of taking any of the 38 actions described in <u>subsection (2)(a)</u> through (c) of this

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- 1 ((subsection)) section to include, at a minimum, the following: The 2 costs for the state and school employees, impacts for existing 3 purchasing programs, a proposed timeline for the implementation of any 4 recommended actions.
- 5 (4) Data, information, and documents that are provided to the authority by a school district, an entity providing coverage, the office of the insurance commissioner, or the joint legislative audit and review committee, pursuant to this section or RCW 48.02.210 are exempt from public inspection and copying under chapters 42.17A and 42.56 RCW.
- 11 **Sec. 3.** RCW 42.56.400 and 2013 c 277 s 5 and 2013 c 65 s 5 are each reenacted and amended to read as follows:
- The following information relating to insurance and financial institutions is exempt from disclosure under this chapter:
 - (1) Records maintained by the board of industrial insurance appeals that are related to appeals of crime victims' compensation claims filed with the board under RCW 7.68.110;
 - (2) Information obtained and exempted or withheld from public inspection by the health care authority under RCW 41.05.026, whether retained by the authority, transferred to another state purchased health care program by the authority, or transferred by the authority to a technical review committee created to facilitate the development, acquisition, or implementation of state purchased health care under chapter 41.05 RCW;
 - (3) The names and individual identification data of either all owners or all insureds, or both, received by the insurance commissioner under chapter 48.102 RCW;
 - (4) Information provided under RCW 48.30A.045 through 48.30A.060;
- 29 (5) Information provided under RCW 48.05.510 through 48.05.535, 30 48.43.200 through 48.43.225, 48.44.530 through 48.44.555, and 48.46.600 31 through 48.46.625;
- 32 (6) Examination reports and information obtained by the department 33 of financial institutions from banks under RCW 30.04.075, from savings 34 banks under RCW 32.04.220, from savings and loan associations under RCW 35 33.04.110, from credit unions under RCW 31.12.565, from check cashers 36 and sellers under RCW 31.45.030(3), and from securities brokers and

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- investment advisers under RCW 21.20.100, all of which is confidential 1 2 and privileged information;
- 3 (7) Information provided to the insurance commissioner under RCW 4 48.110.040(3);

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- (8) Documents, materials, or information obtained by the insurance commissioner under RCW 48.02.065, all of which are confidential and 7 privileged;
- 8 (9) Confidential proprietary and trade secret information provided to the commissioner under RCW 48.31C.020 through 48.31C.050 and 9 10 48.31C.070;
- 11 (10) Data filed under RCW 48.140.020, 48.140.030, 48.140.050, and 12 7.70.140 that, alone or in combination with any other data, may reveal 13 the identity of a claimant, health care provider, health care facility, 14 insuring entity, or self-insurer involved in a particular claim or a collection of claims. For the purposes of this subsection: 15
 - (a) "Claimant" has the same meaning as in RCW 48.140.010(2).
- 17 (b) "Health care facility" has the same meaning as in RCW 48.140.010(6). 18
- 19 "Health care provider" has the same meaning in RCW as 48.140.010(7). 20
 - (d) "Insuring entity" has the same meaning as in RCW 48.140.010(8).
 - (e) "Self-insurer" has the same meaning as in RCW 48.140.010(11);
- 23 (11) Documents, materials, or information obtained by the insurance 24 commissioner under RCW 48.135.060;
 - (12) Documents, materials, or information obtained by the insurance commissioner under RCW 48.37.060;
- 27 (13) Confidential and privileged documents obtained or produced by the insurance commissioner and identified in RCW 48.37.080; 28
- 29 (14) Documents, materials, or information obtained by the insurance 30 commissioner under RCW 48.37.140;
- (15) Documents, materials, or information obtained by the insurance 31 32 commissioner under RCW 48.17.595;
 - (16) Documents, materials, or information obtained by the insurance commissioner under RCW 48.102.051(1) and 48.102.140 (3) and (7)(a)(ii);
 - (17) Documents, materials, or information obtained by the insurance commissioner in the commissioner's capacity as receiver under RCW 48.31.025 and 48.99.017, which are records under the jurisdiction and control of the receivership court. The commissioner is not required to

p. 5 SB 6519 search for, log, produce, or otherwise comply with the public records act for any records that the commissioner obtains under chapters 48.31 and 48.99 RCW in the commissioner's capacity as a receiver, except as directed by the receivership court;

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- (18) Documents, materials, or information obtained by the insurance commissioner under RCW 48.13.151;
- (19) Data, information, and documents provided by a carrier pursuant to section 1, chapter 172, Laws of 2010;
- (20) Information in a filing of usage-based insurance about the usage-based component of the rate pursuant to RCW 48.19.040(5)(b);
- 11 (21) Data, information, and documents, other than those described 12 in RCW 48.02.210(2), that are submitted to the office of the insurance 13 commissioner by an entity providing health care coverage pursuant to 14 RCW 28A.400.275, 41.05.655, and 48.02.210; ((and))
- 15 (22) Data, information, and documents obtained by the insurance 16 commissioner under RCW 48.29.017; and
- 17 (23) Information not subject to public inspection or public 18 disclosure under RCW 48.43.730(5).
- 19 **Sec. 4.** RCW 42.56.400 and 2013 c 65 s 5 are each amended to read 20 as follows:
- The following information relating to insurance and financial institutions is exempt from disclosure under this chapter:
 - (1) Records maintained by the board of industrial insurance appeals that are related to appeals of crime victims' compensation claims filed with the board under RCW 7.68.110;
 - (2) Information obtained and exempted or withheld from public inspection by the health care authority under RCW 41.05.026, whether retained by the authority, transferred to another state purchased health care program by the authority, or transferred by the authority to a technical review committee created to facilitate the development, acquisition, or implementation of state purchased health care under chapter 41.05 RCW;
 - (3) The names and individual identification data of either all owners or all insureds, or both, received by the insurance commissioner under chapter 48.102 RCW;
 - (4) Information provided under RCW 48.30A.045 through 48.30A.060;

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1 (5) Information provided under RCW 48.05.510 through 48.05.535, 2 48.43.200 through 48.43.225, 48.44.530 through 48.44.555, and 48.46.600 3 through 48.46.625;

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- (6) Examination reports and information obtained by the department of financial institutions from banks under RCW 30.04.075, from savings banks under RCW 32.04.220, from savings and loan associations under RCW 33.04.110, from credit unions under RCW 31.12.565, from check cashers and sellers under RCW 31.45.030(3), and from securities brokers and investment advisers under RCW 21.20.100, all of which is confidential and privileged information;
- 11 (7) Information provided to the insurance commissioner under RCW 12 48.110.040(3);
- 13 (8) Documents, materials, or information obtained by the insurance 14 commissioner under RCW 48.02.065, all of which are confidential and 15 privileged;
- 16 (9) Confidential proprietary and trade secret information provided 17 to the commissioner under RCW 48.31C.020 through 48.31C.050 and 18 48.31C.070;
- 19 (10) Data filed under RCW 48.140.020, 48.140.030, 48.140.050, and 7.70.140 that, alone or in combination with any other data, may reveal the identity of a claimant, health care provider, health care facility, insuring entity, or self-insurer involved in a particular claim or a collection of claims. For the purposes of this subsection:
 - (a) "Claimant" has the same meaning as in RCW 48.140.010(2).
- 25 (b) "Health care facility" has the same meaning as in RCW 48.140.010(6).
- 27 (c) "Health care provider" has the same meaning as in RCW 28 48.140.010(7).
 - (d) "Insuring entity" has the same meaning as in RCW 48.140.010(8).
 - (e) "Self-insurer" has the same meaning as in RCW 48.140.010(11);
- 31 (11) Documents, materials, or information obtained by the insurance 32 commissioner under RCW 48.135.060;
- 33 (12) Documents, materials, or information obtained by the insurance 34 commissioner under RCW 48.37.060;
- 35 (13) Confidential and privileged documents obtained or produced by 36 the insurance commissioner and identified in RCW 48.37.080;
- 37 (14) Documents, materials, or information obtained by the insurance 38 commissioner under RCW 48.37.140;

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1 (15) Documents, materials, or information obtained by the insurance commissioner under RCW 48.17.595;

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- (16) Documents, materials, or information obtained by the insurance commissioner under RCW 48.102.051(1) and 48.102.140(3) and (7)(a)(ii);
- (17) Documents, materials, or information obtained by the insurance commissioner in the commissioner's capacity as receiver under RCW 48.31.025 and 48.99.017, which are records under the jurisdiction and control of the receivership court. The commissioner is not required to search for, log, produce, or otherwise comply with the public records act for any records that the commissioner obtains under chapters 48.31 and 48.99 RCW in the commissioner's capacity as a receiver, except as directed by the receivership court;
- 13 (18) Documents, materials, or information obtained by the insurance 14 commissioner under RCW 48.13.151;
- 15 (19) Data, information, and documents provided by a carrier 16 pursuant to section 1, chapter 172, Laws of 2010;
- 17 (20) Information in a filing of usage-based insurance about the usage-based component of the rate pursuant to RCW 48.19.040(5)(b);
- 19 (21) Data, information, and documents, other than those described 20 in RCW 48.02.210(2), that are submitted to the office of the insurance 21 commissioner by an entity providing health care coverage pursuant to 22 RCW 28A.400.275, 41.05.655, and 48.02.210; and
- 23 (22) Data, information, and documents obtained by the insurance 24 commissioner under RCW 48.29.017.
- NEW SECTION. Sec. 5. Section 3 of this act expires July 1, 2017.
- NEW SECTION. Sec. 6. Section 4 of this act takes effect July 1, 27 2017.

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