

Title 182 WAC

STATE EMPLOYEES BENEFITS BOARD

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Chapter 182-04 WAC PUBLIC RECORDS

WAC

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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**
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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.
- 182-08-140 New dependents' life coverage after enrollment. [Order 7228, § 182-08-140, filed 12/8/76.] Repealed by 84-09-043 (Resolution No. 2-84), filed 4/16/84. Statutory Authority: Chapter 41.05 RCW.
- 182-08-150 Reduction or cancellation of optional insurance coverages. [Order 3-77, § 182-08-150, filed 11/17/77; Order 7228, § 182-08-150, filed 12/8/76.] Repealed by 84-09-043 (Resolution No. 2-84), filed 4/16/84. Statutory Authority: Chapter 41.05 RCW.

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 plans. In the absence of any federal or state statute to the contrary, the board may approve one or more state certified health maintenance organizations within a service area, during a contract term. Where more than one such organization seeks approval within the same service area, the board shall approve those 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.

[Statutory Authority: RCW 41.05.010 and 41.05.025. 87-21-069 (Resolution No. 87-6), § 182-08-060, filed 10/19/87; 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, and dental coverage, 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. 86-16-061 (Resolution No. 86-3), § 182-08-120, filed 8/5/86; 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 182-08-160 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, 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. Provided, that with respect to medical and dental coverages, this twenty-nine month period shall be reduced by the number of months of self-pay allowed under WAC 182-12-210. Provided further, that part-time faculty may self-pay their life, medical and dental coverages between periods of employer paid coverage for a maximum of eighteen months. Medical only or medical and dental coverage may be self-paid but not dental only coverage. 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. 86-16-061 (Resolution No. 86-3), § 182-08-160, filed 8/5/86; 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 182-08-165 Other group coverage option. The following shall apply to employees during any period of approved educational leave. In order to avoid duplication of group medical coverage, such employees who obtain coverage under another group medical plan may interrupt continuance of their SEBB self-pay medical coverage for each full calendar month in which they maintain coverage under the other group medical plan, with the right to reinstate SEBB self-pay medical/dental coverage in the month following termination of the other group medical coverage. Provided, that the furnishing of evidence of such other group medical coverage may be required by the Washington state health care authority. Provided further, that the option to continue self-pay SEBB dental coverage shall be suspended for the same period that SEBB self-pay medical is suspended.

[Statutory Authority: RCW 41.05.065. 89-05-013 (Resolution No. 89-1), § 182-08-165, filed 2/9/89.]

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, by self-payment of premium for a maximum of eighteen months for life insurance and as provided in WAC 182-12-210 for medical and dental coverage. During such period, the reverted employee is ineligible to receive credit for the employer premium contribution. However, if a reverted employee moves to a noneligible position, e.g.; 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. 86-16-061 (Resolution No. 86-3), § 182-08-170, filed 8/5/86; 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 182-08-195 Retroactive employer and employee contributions restricted. Withdrawals from the

SEIB revolving fund will not be allowed without written approval of the trustee or his designee. Withholding of previously paid employee or employer contribution from transmittals will be similarly restricted.

[Statutory Authority: Chapter 41.05 RCW. 84-09-043 (Resolution No. 2-84), § 182-08-195, filed 4/16/84.]

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 182-08-220 Advertising or promotion of SEIB sponsored benefit plans. In order to assure equal and unbiased representation of SEIB sponsored or approved benefit plans, any promotion of these plans by insurance representatives shall comply with the following:

(1) All materials describing plan benefits are to be prepared by or approved by the SEIB.

(2) Distribution or mailing of all plan benefit descriptions is to be performed by or under the direction of the SEIB.

(3) No media announcement or advertising by a carrier may include any mention of the "state employees insurance board" or any reference to coverage for "state employees or retirees."

Failure to comply with these requirements may result in contract termination by the SEIB and/or SEIB refusal to consider continued or renewed contracting with the noncomplying party.

[Statutory Authority: Chapter 41.05 RCW. 86-16-061 (Resolution No. 86-3), § 182-08-220, filed 8/5/86.]

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

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182-12-115	Eligible employees, retirees, and dependents.
182-12-121	Change in eligibility status.
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182-12-130	Retirees eligible for Medicare.
182-12-132	Retirees returning to state employment.
182-12-145	Insurance eligibility for higher education.
182-12-151	Dependent life insurance.
182-12-160	Elected officials.
182-12-165	State contribution for permanent employees appointed to instructional year or seasonal positions.
182-12-190	Retirees changing medical plans at retirement.
182-12-200	Retirees may change enrollment in approved SEIB insurance plans.
182-12-210	Extended self-pay medical and dental coverage.
182-12-220	Eligibility during appeal of dismissal.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

182-12-120	Noneligible employees. [Order 5646, § 182-12-120, filed 2/9/76.] Repealed by 88-12-034 (Resolution No. 88-1), filed 5/26/88, effective 7/1/88. Statutory Authority: RCW 41.05.010.
182-12-125	Employee or dependents become ineligible for state group coverage. [Statutory Authority: Chapter 41.05 RCW. 84-09-043 (Resolution No. 2-84), § 182-12-125, filed 4/16/84; Order 5646, § 182-12-125, filed 2/9/76.] Repealed by 84-14-058 (Order 5-84), filed 6/29/84. Statutory Authority: Chapter 41.05 RCW.
182-12-126	Extension of retiree dependents' eligibility. [Statutory Authority: Chapter 41.05 RCW. 86-16-061 (Resolution No. 86-3), § 182-12-126, filed 8/5/86.] Repealed by 87-21-069 (Resolution No. 87-6), filed 10/19/87. Statutory Authority: RCW 41.05.010 and 41.05.025.
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.
182-12-140	New eligible employees. [Order 4-77, § 182-12-140, filed 11/17/77; Order 5646, § 182-12-140, filed 2/9/76.] Repealed by 89-05-013 (Resolution No. 89-1), filed 2/9/89. Statutory Authority: RCW 41.05.065.
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, retirees, and dependents. The following definitions of eligible employees, retirees, and dependents of an eligible entity, as defined in WAC 182-12-111, shall apply for all SEBB approved plans except as otherwise stated in this chapter:

- (1) "Permanent employees." Those who are scheduled to work at least half-time per month and are expected to be employed for more than six months. Such employees shall be eligible effective with their first day of employment.
- (2) "Nonpermanent employees." Those who are scheduled to work at least half-time and are expected to be employed for no more than six months. Such employees shall be eligible effective the first day of the seventh calendar month of employment.
- (3) "Seasonal employees." Those who work at least half-time per month during a designated season for a minimum of three months but less than nine months per year and who have an understanding of continued employment with their agency season after season. These employees become eligible on the first day of such employment, however, they are not eligible for the employer contribution during the break between seasons of employment.

(4) "Part-time faculty." Faculty who are employed on a quarter/semester to quarter/semester basis become eligible beginning with the second consecutive quarter/semester of half-time or more employment at one or more state institutions of higher education, provided that:

(a) For determining eligibility, spring and fall may be considered consecutive quarters/semesters; and

(b) "Half-time or more employment" will be determined based on each institution's definition of "full-time"; and

(c) At the beginning of each quarter/semester, the employers of part-time faculty shall notify, in writing, all current and newly hired part-time faculty of their potential right to benefits under this section. The employee shall have the responsibility, each quarter, to notify the employers, in writing, of the employee's multiple employment. In no case will there be a requirement for retroactive coverage or employer contribution if a part-time faculty member fails to inform all of his/her employing institutions about employment at all institutions within the current quarter; and

(d) Where concurrent employment at more than one state higher education institution is used to determine total part-time faculty employment of half-time or more, the employing institutions will arrange to prorate the cost of the employer insurance contribution based on the employment at each institution. However, if the part-time faculty member would be eligible by virtue of employment at one institution, that institution will pay the entire cost of the employer contribution regardless of other higher education employment. In cases where the cost of the contribution is prorated between institutions, one institution will forward the entire contribution monthly to SEBB; and

(e) Once enrolled, if a part-time faculty member does not work at least a total of half-time in one or more state institutions of higher education, eligibility for the employer contribution ceases.

(5) "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.

(6) "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.

(7) "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 SEBB active employee coverage ends. Persons retiring who do not have waiver of premium coverage from any SEBB 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 SEBB program at the time of retirement or disability.

(8) "Eligible dependents." The following are eligible as dependents under the medical and dental plans:

(a) Lawful spouse.

(b) Dependent children through age twenty.

(c) Dependent children age twenty-one through age twenty-four who are dependent upon the employee/retiree for maintenance and support, and who are registered students in full-time attendance at an accredited secondary school, college, university, vocational school, or school of nursing. Dependent student eligibility continues year-round for those who attend three of the four school quarters and for the quarter following graduation provided the employee/retiree is covered at the same time, provided that the dependent limiting age has not been exceeded.

(d) Dependent children of any age who are incapable of self-support due to developmental disability or physical handicap are also eligible, provided such condition occurs prior to age twenty-one or during the time the dependent was covered under an SEBB plan as a full-time student. Proof of such disability and dependency must be furnished prior to the dependent's attainment of age twenty-one or loss of eligibility for student coverage, and as periodically requested thereafter.

(e) "Children" includes natural children, stepchildren, adopted children, and approved foster children. A foster child must be under age twenty-one at the time of approval. "Children" also includes married children if dependent upon the employee/retiree within the meaning of the Internal Revenue Code.

(f) "Dependent parents." Parents of the employee/retiree or their spouse are eligible subject to Internal Revenue Code dependency status and qualification. Eligibility is subject to making application to the health care authority and verification.

(9) Notwithstanding any of the foregoing, employees who are not mandatorily, by election, or otherwise covered by industrial insurance under Title 51 RCW shall not be considered "eligible employees" within the meaning of this section.

[Statutory Authority: RCW 41.05.065. 89-12-045 (Resolution No. 89-2), § 182-12-115, filed 6/2/89; 89-01-053 (Resolution No. 88-6), § 182-12-115, filed 12/15/88. Statutory Authority: RCW 41.05.010.

88-19-078 (Resolution No. 88-4), § 182-12-115, filed 9/19/88; 88-12-034 (Resolution No. 88-1), § 182-12-115, filed 5/26/88, effective 7/1/88. Statutory Authority: Chapter 41.05 RCW. 86-21-042 (Resolution No. 86-6), § 182-12-115, filed 10/10/86; 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 182-12-121 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 medical and dental coverages 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 these coverages 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 these coverages 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. Application for surviving dependents coverage must be made within sixty 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. 86-16-061 (Resolution No. 86-3), § 182-12-122, filed 8/5/86; 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 182-12-127 Extension of retiree dependents' eligibility. In accordance with federal law, the Consolidated Omnibus Budget Reconciliation Act (COBRA), covered dependents of retirees not otherwise enrolled in SEBB employer-funded coverage may continue their SEBB retiree medical and dental coverage by self-payment of premium according to the following guidelines:

(1) In addition to coverage extended to surviving dependents under WAC 182-12-122, enrolled dependents of retirees may continue their coverage for up to thirty-

six months following the month in which one of the following qualifying events occur: (a) The retiree becomes divorced, or (b) a child ceases to be a dependent child under the requirements of the plan.

(2) Continuation of coverage may be for medical only or for medical and dental, but not dental only, and each enrolled family member is entitled to make a separate election of these options.

(3) Continued coverage will be terminated when (a) the plan terminates, (b) premium is not paid within the grace period stated in subsection (6) of this section, or (c) the person becomes covered in SEBB employer-funded coverage.

(4) NOTICE REQUIREMENTS:

(a) At the time their coverage commences under the retiree plan, the employer shall provide to each new retiree written notice of the option to continue coverage as stated in this section.

(b) It is the retiree's or dependent's responsibility to notify the employer of the retiree's death, divorce or of a child ceasing to be an eligible dependent within sixty days of the qualifying event.

(c) When the employer learns of any qualifying event the employer must notify the retiree (or surviving dependent) of the rights of this section within fourteen days of the receipt of this information.

(5) ELECTION TO CONTINUE COVERAGE: Enrolled persons must make their election to continue coverage within a period of sixty days following a qualifying event or following the date notice is received from the employer, whichever is later.

(6) PREMIUM REQUIREMENTS: Payment of premium for continued coverage must be made within forty-five days of the date of election. Premium must be paid retroactive to the first of the month following the qualifying event. Thereafter, premiums are due on the first of each month, subject to a thirty-day grace period.

[Statutory Authority: RCW 41.05.065. 89-12-045 (Resolution No. 89-2), § 182-12-127, filed 6/2/89. Statutory Authority: RCW 41.05.010. 88-19-078 (Resolution No. 88-4), § 182-12-127, filed 9/19/88. Statutory Authority: RCW 41.05.010 and 41.05.025. 87-21-069 (Resolution No. 87-6), § 182-12-127, filed 10/19/87.]

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 182-12-145 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 Elected officials. All elected officials of any SEIB participating entity, as defined in WAC 182-12-111, who voluntarily or involuntarily leave public office shall be considered as retired employees, whether or not they receive a benefit from a state retirement system.

[Statutory Authority: Chapter 41.05 RCW. 86-06-003 (Resolution No. 86-1), § 182-12-160, filed 2/20/86; Order 5646, § 182-12-160, filed 2/9/76.]

WAC 182-12-165 State contribution for permanent employees appointed to instructional year or seasonal positions. Eligible employees appointed to work half-time or more on an instructional year (school year) or equivalent nine month seasonal basis, shall be eligible to receive the state contribution for insurance during the off-season following each period of seasonal employment.

[Statutory Authority: RCW 41.05.010. 88-12-034 (Resolution No. 88-1), § 182-12-165, filed 5/26/88, effective 7/1/88; 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.]

WAC 182-12-210 Extended self-pay medical and dental coverage. In accordance with federal law, the Consolidated Omnibus Budget Reconciliation Act (COBRA), employees and dependents not otherwise enrolled in SEBB employer-funded coverage may continue their SEBB medical and dental coverage by self-payment of premium according to the following guidelines:

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(1) Employees and/or their enrolled dependents may continue coverage for up to eighteen months following the month in which either of the following qualifying events occur: (a) The employee is terminated (other than by reason of gross misconduct – see WAC 182-12-220 for appeal of dismissal) or (b) the employee would otherwise lose coverage due to reduction in hours of employment.

(2) Enrolled dependents of employees may continue their coverage for up to thirty-six months following the month in which the first of any of the following qualifying events occur: (a) The employee dies (except as provided under WAC 182-12-122), (b) the employee becomes divorced, or (c) a child ceases to be a dependent child under the requirements of the plan. Should more than one qualifying event occur, the maximum period a dependent may continue coverage under this section shall be thirty-six months.

(3) Continuation of coverage may be for medical only or for medical and dental, but not dental only, and each enrolled family member is entitled to make a separate selection of these options.

(4) Continued coverage will be terminated when (a) the plan terminates, (b) premium is not paid within the grace period stated in subsection (7) of this section, or (c) the person becomes covered in SEBB employer-funded coverage.

(5) NOTICE REQUIREMENTS:

(a) At the time their coverage commences under the plan, the employer shall provide to each new employee written notice of the option to continue coverage as stated in this section.

(b) It is the employee's or dependent's responsibility to notify the employer of the employee's divorce or of a child ceasing to be an eligible dependent within sixty days of the qualifying event.

(c) When the employer learns of any qualifying event the employer must notify the employee (or surviving dependent) of the rights of this section within fourteen days of the receipt of this information.

(6) ELECTION TO CONTINUE COVERAGE: Enrolled persons must make their election to continue coverage within a period of sixty days following a qualifying event or following the date notice is received from the employer, whichever is later.

(7) PREMIUM REQUIREMENTS: Payment of premium for continued coverage must be made within forty-five days of the date of election. Premium must be paid retroactive to the first of the month following the qualifying event. Thereafter, premiums are due on the first of each month, subject to a thirty-day grace period.

[Statutory Authority: RCW 41.05.065. 89-12-045 (Resolution No. 89-2), § 182-12-210, filed 6/2/89. Statutory Authority: RCW 41.05-.010. 88-19-078 (Resolution No. 88-4), § 182-12-210, filed 9/19/88. Statutory Authority: Chapter 41.05 RCW. 87-07-034 (Resolution No. 87-2), § 182-12-210, filed 3/13/87; 86-16-061 (Resolution No. 86-3), § 182-12-210, filed 8/5/86.]

WAC 182-12-220 Eligibility during appeal of dismissal. Employees awaiting hearing of a dismissal action before the personnel appeals board, higher education

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personnel board or court may continue their SEIB coverages by self-payment of premium on the same terms as an employee who is granted leave without pay. If the hearing board or court upholds the dismissal, coverages shall terminate at the end of the month in which the board or court's decision is made. If the hearing board or court sustains the employee in the appeal and directs the SEIB employer to reinstate employer paid coverages retroactively, the employer must forward to the SEIB the full employer contribution for the period directed by the hearing board or court. SEIB will refund to the employee any premiums the employee paid for coverages provided by the employer contribution. All optional life and long term disability insurance which was in force at the time of dismissal shall be reinstated retroactively, provided the employee makes retroactive payment of premium for any such optional coverage which was not continued by self-payment during the appeal process. If the employee chooses not to pay retroactive premium, evidence of insurability will be required to obtain such optional coverage.

[Statutory Authority: Chapter 41.05 RCW. 86-16-061 (Resolution No. 86-3), § 182-12-220, filed 8/5/86.]