

WSR 24-17-043
POLICY STATEMENT
HEALTH CARE AUTHORITY
(School Employees Benefits Board)
[Filed August 13, 2024, 4:59 p.m.]

**Notice of School Employees Benefits Board (SEBB) Program
Administrative Policy Statements**

The following is a list of administrative policies published by the SEBB program. These policies are effective January 1, 2025. You can download the complete policy statements on the SEBB program rules and policies page at hca.wa.gov/sebb-rules.

The following policies were amended to support the SEBB program:

Policy 11-3: Correcting SEBB organization and contracted vendor enrollment errors. This policy clarifies the requirements on a SEBB organization or contracted vendor when they correct their own enrollment errors as described in WAC 182-30-060.

Policy 19-1: Termination due to loss of eligibility or enrollment error. This policy applies whenever coverage for a subscriber or a subscriber's dependent is terminated due to loss of eligibility, or because a subscriber or dependent was enrolled when they were not eligible for coverage.

Addendum 19-1A: Termination due to loss of eligibility or enrollment error: School employee.

Addendum 19-1B: Termination due to loss of eligibility or nonpayment: Self-pay subscriber.

Policy 31-2: Use of the SEBB spousal plan calculator. This policy provides direction when a SEBB subscriber enrolled in SEBB medical, determining if a premium surcharge will be applied for a spouse or state registered domestic partner enrolled in SEBB medical.

Policy 36-1: Certifying eligibility for a dependent child with a disability who is age 26 or older. This policy applies whenever a subscriber requests to enroll or continue enrollment for a dependent child with a disability who is age 26 or older on their SEBB subscriber account.

Policy 37-1: Certifying eligibility for an extended dependent child. This policy applies when a subscriber submits the required forms to enroll an extended dependent child in the subscriber's SEBB health plan coverage.

Policy 56-1: Reinstatement for subscribers with mental or physical impairment or incapacitation. This policy applies whenever a subscriber (or another party acting on behalf of the subscriber) requests reinstatement of continuation coverage or school board member coverage due to nonpayment of premiums, or applicable premium surcharges. The policy applies when the nonpayment was for the reason of mental or physical impairment or incapacitation; when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the Internal Revenue Service (IRS) recognizes the emergency for purposes of delaying deadlines, and the emergency prevents a subscriber from making a timely payment.

This policy establishes the methodology that the SEBB program will use to make a determination of mental or physical impairment or incapacitation for the purpose of reinstatement of coverage terminated due to nonpayment of premiums or applicable premium surcharges. The policy also establishes the methodology the SEBB program will use to make a determination when a state of emergency is declared by the gov-

error of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency prevents a subscriber from making a timely payment.

This policy provides timing requirements for requesting reinstatement due to nonpayment of premiums, or applicable premium surcharges, for reason of mental or physical impairment or incapacity; when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency causes a subscriber to be unable to make premium payments and applicable premium surcharges.

Policy 56-2: Election period tolling for applicants with mental or physical impairment or incapacitation. This policy applies whenever an applicant (or another party acting on behalf of the applicant) requests tolling of enrollment, annual open enrollment, or special open enrollment election periods. Tolling may be requested for reason of mental or physical impairment or incapacitation, when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency prevents an applicant from making a timely election.

This policy establishes the methodology that the SEBB program and the health care authority's (HCA) office of legal affairs (OLA) will use to make the SEBB program decision regarding mental or physical impairment or incapacitation for the purpose of tolling the election period of enrollment, annual open enrollment, or special open enrollment. The policy also establishes the methodology the SEBB program and OLA will use to make the SEBB program decision when a state of emergency is declared by the governor of Washington state, as described in chapter 43.06 RCW, or when a federal emergency is declared under 44 C.F.R. Part § 206, Subpart B, the IRS recognizes the emergency for purposes of delaying deadlines, and the emergency prevents an applicant from making a timely election.

This policy provides timing requirements to request tolling of the election period for reason of mental or physical impairment or incapacity.

Policy 90-1: Allowable mid-year termination for an employer group. This policy clarifies when an employer group may terminate their participation in SEBB insurance coverage mid-year.

Policy 90-2: What authority do employer groups need before contracting with HCA for participation in SEBB for insurance coverage? This policy clarifies what authority is required from employer groups as part of the application process for benefits with HCA and the SEBB program.

Policy 90-3: Determining if an employer group requesting eligibility criteria different from SEBB program rules shall be approved. This policy clarifies the criteria used by HCA to approve or deny requests to use eligibility criteria that are different from the eligibility criteria used by the SEBB program received from an employer group.

Policy 90-4: Terms and conditions set by HCA for an employer group and school employees of an employer group. This policy clarifies that all employer groups and school employees of an employer group

that are eligible for SEBB benefits are subject to the terms and conditions set forth by HCA.

Policy 91-3: Washington wellness worksite designation program incentive requirements. This policy provides a set of requirements for the SEBB organizations to use when offering wellness incentives under the Washington wellness worksite designation program.

Policy 93-2: SEBB program payment plans. This policy describes the process HCA will use when authorizing a payment plan request from a subscriber or a subscriber's legal representative for a continuation coverage account or school board member account.

Policy 94-3: Subscriber mistake—Factor test. This policy applies whenever a school employee makes a mistake electing a flexible spending arrangement (FSA), limited purpose FSA, dependent care assistance program, or a school employee, school board member, or continuation coverage subscriber requests a health plan change when they or their dependent experiences a disruption of medical care because of a mistake, which impacts a documented, ongoing course of treatment.