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SENATE BILL 6699

State of Washington

58th Legislature

2004 Regular Session

By Senator Benton

Read first time 02/02/2004. Referred to Committee on Health & Long-Term Care.

- AN ACT Relating to providing insurance coverage to dependent children; amending RCW 48.20.420, 48.21.150, 48.44.200, 48.44.210, 48.46.320, 41.05.011, and 41.05.050; adding a new section to chapter 48.20 RCW; adding a new section to chapter 48.21 RCW; adding a new section to chapter 48.44 RCW; and adding a new section to chapter 48.46 RCW.
- 7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 8 **Sec. 1.** RCW 48.20.420 and 1985 c 264 s 10 are each amended to read 9 as follows:
- 10 Any disability insurance contract providing health care services, delivered or issued for delivery in this state more than one hundred 11 12 twenty days after August 11, 1969, ((which)) that provides that coverage of a dependent child shall terminate upon attainment of the 13 limiting age for dependent children ((specified in the contract,)) 14 15 shall also provide in substance that attainment of such limiting age shall not operate to terminate the coverage of such child while the 16 child is and continues to be both (1) incapable of self-sustaining 17 employment by reason of developmental disability or physical handicap 18 19 and (2) chiefly dependent upon the subscriber for support and

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- 1 maintenance, provided proof of such incapacity and dependency is
- 2 furnished to the insurer by the subscriber within thirty-one days of
- 3 the child's attainment of the limiting age and subsequently as may be
- 4 required by the insurer but not more frequently than annually after the
- 5 two year period following the child's attainment of the limiting age.
- 6 <u>NEW SECTION.</u> **Sec. 2.** A new section is added to chapter 48.20 RCW 7 to read as follows:
- Any disability insurance contract that provides coverage for a 9 dependent child must cover any unmarried child of the subscriber or the 10 subscriber's spouse if the child is:
- 11 (1) Under the limiting age of twenty-five; and
- 12 (2) Not an active duty member of the armed forces of the United 13 States.
- 14 **Sec. 3.** RCW 48.21.150 and 1977 ex.s. c 80 s 32 are each amended to read as follows:
- Any group disability insurance contract or blanket disability 16 insurance contract, providing health care services, delivered or issued 17 18 for delivery in this state more than one hundred twenty days after 19 August 11, 1969, ((which)) that provides that coverage of a dependent 20 child of an employee or other member of the covered group shall terminate upon attainment of the limiting age for dependent children 21 22 ((specified in the contract)) shall also provide in substance that 23 attainment of such limiting age shall not operate to terminate the coverage of such child while the child is and continues to be both (1) 24 25 incapable of self-sustaining employment by reason of developmental disability or physical handicap and (2) chiefly dependent upon the 26 employee or member for support and maintenance, provided proof of such 27 incapacity and dependency is furnished to the insurer by the employee 28 29 or member within thirty-one days of the child's attainment of the 30 limiting age and subsequently as may be required by the insurer, but not more frequently than annually after the two year period following 31 32 the child's attainment of the limiting age.
- NEW SECTION. Sec. 4. A new section is added to chapter 48.21 RCW to read as follows:
- 35 Any group disability insurance contract or blanket disability

- insurance contract that provides coverage for a dependent child must cover any unmarried child of the subscriber or the subscriber's spouse if the child is:
 - (1) Under the limiting age of twenty-five; and

5 (2) Not an active duty member of the armed forces of the United 6 States.

Sec. 5. RCW 48.44.200 and 1977 ex.s. c 80 s 33 are each amended to 8 read as follows:

An individual health care service plan contract, delivered or issued for delivery in this state more than one hundred twenty days after August 11, 1969, ((which)) that provides that coverage of a dependent child shall terminate upon attainment of the limiting age for dependent children ((specified in the contract)) shall also provide in substance that attainment of such limiting age shall not operate to terminate the coverage of such child while the child is and continues to be both (1) incapable of self-sustaining employment by reason of developmental disability or physical handicap and (2) chiefly dependent upon the subscriber for support and maintenance, provided proof of such incapacity and dependency is furnished to the health care service plan corporation by the subscriber within thirty-one days of the child's attainment of the limiting age and subsequently as may be required by the corporation but not more frequently than annually after the two year period following the child's attainment of the limiting age.

Sec. 6. RCW 48.44.210 and 1977 ex.s. c 80 s 34 are each amended to read as follows:

A group health care service plan contract, delivered or issued for delivery in this state more than one hundred twenty days after August 11, 1969, ((which)) that provides that coverage of a dependent child of an employee or other member of the covered group shall terminate upon attainment of the limiting age for dependent children ((specified in the contract)) shall also provide in substance that attainment of such limiting age shall not operate to terminate the coverage of such child while the child is and continues to be both (1) incapable of self-sustaining employment by reason of developmental disability or physical handicap and (2) chiefly dependent upon the employee or member for support and maintenance, provided proof of such incapacity and

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- 1 dependency is furnished to the health care service plan corporation by
- 2 the employee or member within thirty-one days of the child's attainment
- 3 of the limiting age and subsequently as may be required by the
- 4 corporation, but not more frequently than annually after the two year
- 5 period following the child's attainment of the limiting age.
- 6 <u>NEW SECTION.</u> **Sec. 7.** A new section is added to chapter 48.44 RCW 7 to read as follows:
- Any individual health care service plan contract or group health care service plan contract that provides coverage for a dependent child must cover any unmarried child of the subscriber or the subscriber's
- 11 spouse if the child is:
- 12 (1) Under the limiting age of twenty-five; and
- 13 (2) Not an active duty member of the armed forces of the United 14 States.
- 15 **Sec. 8.** RCW 48.46.320 and 1985 c 320 s 6 are each amended to read 16 as follows:
- Any health maintenance agreement ((which)) that provides that 17 18 coverage of a dependent child shall terminate upon attainment of the limiting age for dependent children ((specified in the agreement)) 19 20 shall also provide in substance that attainment of such limiting age shall not operate to terminate the coverage of such child while the 21 child is and continues to be both: (1) Incapable of self-sustaining 22 employment by reason of developmental disability or physical handicap; 23 and (2) chiefly dependent upon the subscriber for support and 24 25 maintenance, if proof of such incapacity and dependency is furnished to the health maintenance organization by the enrolled participant within 26 thirty-one days of the child's attainment of the limiting age and 27 28 subsequently as required by the health maintenance organization but not 29 more frequently than annually after the two-year period following the 30 child's attainment of the limiting age.
- NEW SECTION. Sec. 9. A new section is added to chapter 48.46 RCW to read as follows:
- Any health maintenance agreement that provides coverage for a dependent child must cover any unmarried child of the subscriber or the subscriber's spouse if the child is:

1 (1) Under the limiting age of twenty-five; and

- 2 (2) Not an active duty member of the armed forces of the United 3 States.
- **Sec. 10.** RCW 41.05.011 and 2001 c 165 s 2 are each amended to read 5 as follows:

Unless the context clearly requires otherwise, the definitions in this section shall apply throughout this chapter.

- (1) "Administrator" means the administrator of the authority.
- (2) "State purchased health care" or "health care" means medical and health care, pharmaceuticals, and medical equipment purchased with state and federal funds by the department of social and health services, the department of health, the basic health plan, the state health care authority, the department of labor and industries, the department of corrections, the department of veterans affairs, and local school districts.
 - (3) "Authority" means the Washington state health care authority.
- (4) "Insuring entity" means an insurer as defined in chapter 48.01 RCW, a health care service contractor as defined in chapter 48.44 RCW, or a health maintenance organization as defined in chapter 48.46 RCW.
- (5) "Flexible benefit plan" means a benefit plan that allows employees to choose the level of health care coverage provided and the amount of employee contributions from among a range of choices offered by the authority.
- (6) "Employee" includes all full-time and career seasonal employees of the state, whether or not covered by civil service; elected and appointed officials of the executive branch of government, including full-time members of boards, commissions, or committees; and includes any or all part-time and temporary employees under the terms and conditions established under this chapter by the authority; justices of the supreme court and judges of the court of appeals and the superior courts; and members of the state legislature or of the legislative authority of any county, city, or town who are elected to office after February 20, 1970. "Employee" also includes: (a) Employees of a county, municipality, or other political subdivision of the state if the legislative authority of the county, municipality, or other political subdivision of the state if the authority to provide any of its insurance programs by contract with

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- the authority, as provided in RCW 41.04.205; (b) employees of employee organizations representing state civil service employees, at the option of each such employee organization, and, effective October 1, 1995, employees of employee organizations currently pooled with employees of school districts for the purpose of purchasing insurance benefits, at
- school districts for the purpose of purchasing insurance benefits, at the option of each such employee organization; and (c) employees of a school district if the authority agrees to provide any of the school districts' insurance programs by contract with the authority as provided in RCW 28A.400.350.
- 10 (7) "Board" means the public employees' benefits board established 11 under RCW 41.05.055.
 - (8) "Retired or disabled school employee" means:

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- (a) Persons who separated from employment with a school district or educational service district and are receiving a retirement allowance under chapter 41.32 or 41.40 RCW as of September 30, 1993;
- (b) Persons who separate from employment with a school district or educational service district on or after October 1, 1993, and immediately upon separation receive a retirement allowance under chapter 41.32, 41.35, or 41.40 RCW;
- (c) Persons who separate from employment with a school district or educational service district due to a total and permanent disability, and are eligible to receive a deferred retirement allowance under chapter 41.32, 41.35, or 41.40 RCW.
- (9) "Benefits contribution plan" means a premium only contribution plan, a medical flexible spending arrangement, or a cafeteria plan whereby state and public employees may agree to a contribution to benefit costs which will allow the employee to participate in benefits offered pursuant to 26 U.S.C. Sec. 125 or other sections of the internal revenue code.
- (10) "Salary" means a state employee's monthly salary or wages.
- 31 (11) "Participant" means an individual who fulfills the eligibility 32 and enrollment requirements under the benefits contribution plan.
- 33 (12) "Plan year" means the time period established by the 34 authority.
- 35 (13) "Separated employees" means persons who separate from 36 employment with an employer as defined in:
 - (a) RCW 41.32.010(11) on or after July 1, 1996; or
- 38 (b) RCW 41.35.010 on or after September 1, 2000; or

- 1 (c) RCW 41.40.010 on or after March 1, 2002;
- and who are at least age fifty-five and have at least ten years of service under the teachers' retirement system plan 3 as defined in RCW 41.32.010(40), the Washington school employees' retirement system plan 3 as defined in RCW 41.35.010, or the public employees' retirement system plan 3 as defined in RCW 41.40.010.
 - (14) "Emergency service personnel killed in the line of duty" means law enforcement officers and fire fighters as defined in RCW 41.26.030, and reserve officers and fire fighters as defined in RCW 41.24.010 who die as a result of injuries sustained in the course of employment as determined consistent with Title 51 RCW by the department of labor and industries.
- 13 (15) "Dependent child" means any child of an employee or employee's

 14 spouse who is:
- 15 <u>(a)(i) Unmarried;</u>

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- 16 <u>(ii) Under the age of twenty-five; and</u>
- 17 <u>(iii) Not an active duty member of the armed forces of the United</u>
 18 States; or
- 19 (b) One of the following:
- (i) Eligible under the criteria established by the public employees' benefits board for a child who is age twenty-five and older but is incapable of self-support due to developmental or physical disability;
- 24 <u>(ii) If the child is married, qualified as a dependent of the</u> 25 employee under the internal revenue code;
- 26 <u>(iii) Approved by the health care authority as an extended</u> 27 dependent; or
- 28 <u>(iv) Eligible under the criteria established by the public</u> 29 employees' benefits board for any other child.
- 30 **Sec. 11.** RCW 41.05.050 and 2003 c 158 s 1 are each amended to read 31 as follows:
- 32 (1) Every department, division, or separate agency of state 33 government, and such county, municipal, school district, educational 34 service district, or other political subdivisions as are covered by 35 this chapter, shall provide contributions to insurance and health care 36 plans for its employees and their dependents, <u>including dependent</u> 37 <u>children</u> the content of such plans to be determined by the authority.

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Contributions, paid by the county, the municipality, or other political subdivision for their employees, shall include an amount determined by the authority to pay such administrative expenses of the authority as are necessary to administer the plans for employees of those groups, except as provided in subsection (4) of this section.

- (2) If the authority at any time determines that the participation of a county, municipal, or other political subdivision covered under this chapter adversely impacts insurance rates for state employees, the authority shall implement limitations on the participation of additional county, municipal, or other political subdivisions.
- (3) The contributions of any department, division, or separate agency of the state government, and such county, municipal, or other political subdivisions as are covered by this chapter, shall be set by the authority, subject to the approval of the governor for availability of funds as specifically appropriated by the legislature for that purpose. Insurance and health care contributions for ferry employees shall be governed by RCW 47.64.270.
- (4)(a) Beginning September 1, 2003, the authority shall collect from each participating school district and educational service district an amount equal to the composite rate charged to state agencies, plus an amount equal to the employee premiums by plan and family size as would be charged to state employees, for groups of district employees enrolled in authority plans as of January 1, 2003.
- (b) For all groups of district employees enrolling in authority plans for the first time after September 1, 2003, the authority shall collect from each participating school district an amount equal to the composite rate charged to state agencies, plus an amount equal to the employee premiums by plan and by family size as would be charged to state employees, only if the authority determines that this method of billing the districts will not result in a material difference between revenues from districts and expenditures made by the authority on behalf of districts and their employees.
- (c) If the authority determines at any time that the conditions in (b) of this subsection cannot be met, the authority shall offer enrollment to additional groups of district employees on a tiered rate structure until such time as the authority determines there would be no material difference between revenues and expenditures under a composite rate structure for all district employees enrolled in authority plans.

- 1 (d) The authority may charge districts a one-time set-up fee for 2 employee groups enrolling in authority plans for the first time.
 - (e) For the purposes of this subsection:

- (i) "District" means school district and educational service
 district; and
- (ii) "Tiered rates" means the amounts the authority must pay to insuring entities by plan and by family size.
- (f) Notwithstanding this subsection and RCW 41.05.065(3), the authority may allow districts enrolled on a tiered rate structure prior to September 1, 2002, to continue participation based on the same rate structure and under the same conditions and eligibility criteria.
- (5) The authority shall transmit a recommendation for the amount of the employer contribution to the governor and the director of financial management for inclusion in the proposed budgets submitted to the legislature.

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