

SHB 1947 - H AMD 285

By Representative Cody

ADOPTED 03/11/2013

1 On page 3, line 10, after "act." insert "If the exchange is
2 charging an assessment, the exchange shall set forth the amount of the
3 assessment per member per month on monthly billing statements."
4

5 On page 3, line 23, after "installments." insert "Upon
6 determination of the amount of the assessment, the exchange shall
7 notify carriers of the due dates of the quarterly installments."
8

9 On page 3, after line 25, insert the following:

10 "(4) The exchange shall reconcile assessment payments based on
11 actual covered lives at the end of the calendar year of the
12 assessment. At the end of the calendar year, the exchange shall
13 compare the amount of the assessment for each carrier calculated in
14 subsection (2) of this section to the amount of the assessment that
15 would have been collected from each carrier based on each carrier's
16 actual covered lives in qualified health plans and dental plans in the
17 exchange during that calendar year. If a carrier's share of the
18 assessment would have been smaller if it were based on actual covered
19 lives, the exchange shall refund the carrier for the difference
20 between the collected amount of the assessment and the amount of the
21 assessment that would have been collected based on the carrier's
22 actual covered lives. If the carrier's share of the assessment would
23 have been larger if it were based on actual covered lives, the
24 exchange shall collect from the carrier the difference between the
25 collected amount of the assessment and the amount of the assessment
26 that would have been collected based on the carrier's actual covered
27 lives.

1 (5) The assessment described in this section shall be considered a
2 special purpose obligation or assessment in connection with coverage
3 described in this section for the purpose of funding the operations of
4 the exchange."

5
6 Renumber the remaining subsections consecutively and correct any
7 internal references accordingly.

8
9 On page 5, line 6, after "plans" insert "and dental plans"

10
11 On page 5, line 23, after "received" insert "from business
12 conducted outside of the health benefit exchange under chapter 43.71
13 RCW"

14

EFFECT: Requires the Washington Health Benefit Exchange (Exchange) to set forth the amount of the assessment per member per month on monthly billing statements. Requires the Exchange to notify carriers of the due dates of the quarterly installments upon determination of the amount of the assessment. Requires the Exchange to reconcile assessments based on the actual number of covered lives that each carrier covered in the Exchange during the calendar year of the assessment. Specifies that the assessment is a special purpose obligation or assessment for the purpose of funding the operations of the Exchange. Removes the premium tax exemption for dental benefits and dental plans sold through the Exchange.

--- END ---