



RULE-MAKING ORDER PERMANENT RULE ONLY

CR-103P (December 2017) (Implements RCW 34.05.360)

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STATE OF WASHINGTON
FILED

DATE: December 14, 2018

TIME: 9:18 AM

WSR 19-01-054

Agency: Health Care Authority (HCA) Employees and Retirees Benefits Division Admin #2018-02

Effective date of rule:

Permanent Rules

- 31 days after filing.
- Other (specify) _____ (If less than 31 days after filing, a specific finding under RCW 34.05.380(3) is required and should be stated below)

Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?

- Yes No If Yes, explain:

Purpose:

Making technical amendments to:

- Change references from Medicare supplement coverage to Medicare supplemental coverage.
- Revise several definitions in WAC 182-13-020.
- Align eligibility in WAC 182-13-030 with RCW 41.05.197.
- Clarify state residents can apply for Medicare supplemental coverage thirty days before they are enrolled in Parts A and B of Medicare.
- Allow residents to apply within sixty-three days instead of sixty days for coverage after becoming a new resident.
- Include guaranteed issue periods by cross-referencing RCW 48.66.045 and 48.66.055.

Citation of rules affected by this order:

New:
 Repealed:
 Amended: 182-13-010, 182-13-020, 182-13-030, and 182-13-040
 Suspended:

Statutory authority for adoption: RCW 41.05.197, 41.05.160

Other authority:

PERMANENT RULE (Including Expedited Rule Making)

Adopted under notice filed as WSR 18-22-032 on October 29, 2018 (date).
 Describe any changes other than editing from proposed to adopted version: N/A

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

Name:
 Address:
 Phone:
 Fax:
 TTY:
 Email:
 Web site:
 Other:

**Note: If any category is left blank, it will be calculated as zero.
No descriptive text.**

**Count by whole WAC sections only, from the WAC number through the history note.
A section may be counted in more than one category.**

The number of sections adopted in order to comply with:

Federal statute:	New	___	Amended	___	Repealed	___
Federal rules or standards:	New	___	Amended	___	Repealed	___
Recently enacted state statutes:	New	___	Amended	___	Repealed	___

The number of sections adopted at the request of a nongovernmental entity:

New	___	Amended	___	Repealed	___
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The number of sections adopted on the agency's own initiative:

New	___	Amended	___	Repealed	___
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The number of sections adopted in order to clarify, streamline, or reform agency procedures:

New	___	Amended	<u>4</u>	Repealed	___
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The number of sections adopted using:

Negotiated rule making:	New	___	Amended	___	Repealed	___
Pilot rule making:	New	___	Amended	___	Repealed	___
Other alternative rule making:	New	___	Amended	<u>4</u>	Repealed	___

Date Adopted: December 14, 2018

Name: Wendy Barcus

Title: HCA Rules Coordinator

Signature:



AMENDATORY SECTION (Amending WSR 95-07-011, filed 3/3/95, effective 4/3/95)

WAC 182-13-010 Purpose. The purpose of this chapter is to establish criteria for state residents for participation in medicare ((supplement)) supplemental coverage available through the HCA.

AMENDATORY SECTION (Amending WSR 95-07-011, filed 3/3/95, effective 4/3/95)

WAC 182-13-020 Definitions. Unless otherwise specifically provided, the definitions contained in this section apply throughout this chapter.

(1) "HCA" means the Washington state health care authority.

(2) "Health plan," or "plan" means any individual or group: Policy, agreement, or other contract providing coverage for medical, surgical, hospital, or emergency care services, whether issued, or issued for delivery, in Washington or any other state. "Health Plan" or "plan" also includes any group health plan that is maintained by any state and governed by the Public Health Services Act in 42 U.S.C. Chapter 6A, self-insured coverage governed by the federal Employee Retirement Income Security Act of 1974, coverage through the Washington state health insurance ((Access Act)) pool as described in chapter 48.41 RCW, ((coverage through the Basic Health Plan as described in chapter 70.47 RCW, and)) coverage through the medicaid program as described in Title 74 RCW, and coverage through the Washington state health benefit exchange as described in chapter 43.71 RCW. "Health plan" or "plan" does not mean or include: Hospital confinement indemnity coverage as described in WAC 284-50-345; disability income protection coverage as described in WAC 284-50-355; accident only coverage as described in WAC 284-50-360; specified disease and specified accident coverage as described in WAC 284-50-365; limited benefit health insurance coverage as described in WAC 284-50-370; long-term care benefits as described in chapter 48.84 RCW; or limited health care coverage ((such as dental only, vision only, or chiropractic only)) (e.g., dental only).

(3) "Lapse in coverage" means a period of time greater than ((ninety)) sixty-three continuous days without coverage by a health plan.

(4) "Resident" means a person who demonstrates that ((he/she lives)) they live in the state of Washington ((at the time of application for, and issuance of coverage)) by providing evidence of residency.

AMENDATORY SECTION (Amending WSR 95-07-011, filed 3/3/95, effective 4/3/95)

WAC 182-13-030 Eligibility. ((Residents are)) A resident is eligible to apply for medicare ((supplement)) supplemental coverage

~~((arranged by))~~ available through the HCA ~~((when they are))~~ provided the resident is:

(1) ~~((Eligible for))~~ Enrolled in Parts A and B of medicare ~~((7))~~; and

(2) ~~((Actually enrolled in both Parts A and B of medicare not later than the effective date of medicare supplement coverage.))~~ Not eligible to purchase coverage as a retired or disabled employee under RCW 41.05.195.

AMENDATORY SECTION (Amending WSR 95-07-011, filed 3/3/95, effective 4/3/95)

WAC 182-13-040 Application for medicare ~~((supplement))~~ supplemental coverage. Residents meeting eligibility requirements may apply for medicare ~~((supplement))~~ supplemental coverage ~~((arranged by))~~ available through the HCA:

(1) ~~((During the initial open enrollment period of January 1 through June 30, 1995, or))~~ No earlier than thirty days before they are enrolled in both Parts A and B of medicare;

(2) Within ~~((sixty))~~ sixty-three days after becoming a resident ~~((, or~~

~~(3) In the thirty day period before the resident becomes eligible for medicare, or~~

~~(4) Within sixty days of retirement, or~~

~~(5)) of Washington state;~~

(3) During any open enrollment period established by federal or state law ~~((, or~~

~~(6))~~;

(4) During any open enrollment period established by the HCA subsequent to the initial open enrollment period provided that the applicant is replacing a health plan with no lapse in coverage; or

(5) When replacing coverage as described in RCW 48.66.045 or when enrolling during a guaranteed issue period as described in RCW 48.66.055.