Public Employees Benefits Board
March 10, 2022
9:00 a.m. – 12:00 p.m.

Health Care Authority
Sue Crystal A & B
626 8th Avenue SE
Olympia, Washington

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# AGENDA

**Public Employees Benefits Board**  
**March 10, 2022**  
**9:00 a.m. – 12:00 p.m.**

Aligning with **Governor’s Proclamation 20-28**, all Board Members and public attendees will only be able to attend virtually.

## TO JOIN ZOOM MEETING – SEE INFORMATION BELOW

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Speaker(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 a.m.*</td>
<td>Welcome and Introductions</td>
<td>Sue Birch, Chair</td>
</tr>
<tr>
<td>9:05 a.m.</td>
<td>Meeting Overview</td>
<td>Dave Iseminger, Director Employees &amp; Retirees Benefits (ERB) Division</td>
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<tr>
<td>9:10 a.m.</td>
<td>Follow up from January Retreat</td>
<td>Dave Iseminger, Director ERB Division</td>
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<tr>
<td>9:15 a.m.</td>
<td>2022 Legislative Session Update</td>
<td>Cade Walker, Executive Special Assistant, ERB Division</td>
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<tr>
<td>9:30 a.m.</td>
<td>2022 Supplemental Budget Update</td>
<td>Kate LaBelle, Fiscal Information &amp; Data Analyst, Financial Services Division</td>
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<tr>
<td>9:45 a.m.</td>
<td>Policy and Rules Development</td>
<td>Stella Ng, Policy &amp; Rules Coordinator Emily Duchaine, Regulatory Analyst Policy, Rules, &amp; Compliance Section ERB Division</td>
</tr>
<tr>
<td>10:15 a.m.</td>
<td>Break</td>
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<tr>
<td>10:25 a.m.</td>
<td>UMP Pharmacy Benefit Management (PBM) Update</td>
<td>Jenny Switzer, Senior Moda Account Manager Portfolio, Management &amp; Monitoring Section, ERB Division</td>
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<tr>
<td>10:45 a.m.</td>
<td>2024 Uniform Dental Plan Benefit Design Introduction</td>
<td>Ellen Wolfhagen, Senior Account Manager Portfolio, Management &amp; Monitoring Section, ERB Division</td>
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<tr>
<td>11:15 a.m.</td>
<td>Procurement &amp; Benefit Planning Cycles</td>
<td>John Partin, Manager Benefit Strategy &amp; Design Section ERB Division</td>
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<tr>
<td>11:30 a.m.</td>
<td>Public Comment</td>
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<tr>
<td>11:55 a.m.</td>
<td>Closing</td>
<td>Sue Birch, Chair</td>
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<tr>
<td>12:00 p.m.</td>
<td>Adjourn</td>
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*All Times Approximate

The Public Employees Benefits Board will meet Thursday, March 10, 2022. Due to COVID-19 and out of an abundance of caution, all Board Members and attendees will attend this meeting virtually.
The Board will consider all matters on the agenda plus any items that may normally come before them.

This notice is pursuant to the requirements of the Open Public Meeting Act, Chapter 42.30 RCW.

To provide public comment by email, direct e-mail to: board@hca.wa.gov.


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Join Zoom Meeting

https://zoom.us/j/95794723024?pwd=U0N5TFB0b2NISlJyNlp1YWJma2ZGZz09

Meeting ID: 957 9472 3024
Passcode: 316838
One tap mobile
+12532158782,,95794723024#,,,,*316838# US (Tacoma)
+13462487799,,95794723024#,,,,*316838# US (Houston)

Dial by your location
+1 253 215 8782 US (Tacoma)
+1 346 248 7799 US (Houston)
+1 669 900 6833 US (San Jose)
+1 929 205 6099 US (New York)
+1 301 715 8592 US (Washington DC)
+1 312 626 6799 US (Chicago)

Meeting ID: 957 9472 3024
Passcode: 316838
Find your local number: https://zoom.us/u/aesUpUBe7F
# PEB Board Members

<table>
<thead>
<tr>
<th>Name</th>
<th>Representing</th>
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<tbody>
<tr>
<td>Sue Birch, Director</td>
<td>Chair</td>
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<tr>
<td>Health Care Authority</td>
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<tr>
<td>626 8th Ave SE</td>
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<tr>
<td>PO Box 42713</td>
<td></td>
</tr>
<tr>
<td>Olympia WA 98504-2713</td>
<td></td>
</tr>
<tr>
<td>V 360-725-2104</td>
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</tr>
<tr>
<td><a href="mailto:sue.birch@hca.wa.gov">sue.birch@hca.wa.gov</a></td>
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<tr>
<td>Leanne Kunze, Executive Director</td>
<td>State Employees</td>
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<tr>
<td>Washington Federation of State Employees</td>
<td></td>
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<tr>
<td>1212 Jefferson Street, Suite 300</td>
<td></td>
</tr>
<tr>
<td>Olympia WA 98501</td>
<td></td>
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<tr>
<td>V 360-352-7603</td>
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<td><a href="mailto:PEBBoard@hca.wa.gov">PEBBoard@hca.wa.gov</a></td>
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<tr>
<td>Elyette Weinstein</td>
<td>State Retirees</td>
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<tr>
<td>5000 Orvas CT SE</td>
<td></td>
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<tr>
<td>Olympia WA 98501-4765</td>
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<tr>
<td>V 360-705-8388</td>
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<tr>
<td>Tom MacRobert</td>
<td>K-12 Retirees</td>
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<tr>
<td>4527 Waldrick RD SE</td>
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<tr>
<td>Olympia WA 98501</td>
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<tr>
<td>V 360-264-4450</td>
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<tr>
<td>Scott Nicholson, Deputy Assistant Director</td>
<td>Benefits Management/Cost Containment</td>
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<tr>
<td>State Human Resources</td>
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<tr>
<td>Office of Financial Management</td>
<td></td>
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<tr>
<td>PO Box 43113</td>
<td></td>
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<tr>
<td>Olympia WA 98504-3113</td>
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<tr>
<td><a href="mailto:scott.nicholson@ofm.wa.gov">scott.nicholson@ofm.wa.gov</a></td>
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# PEB Board Members

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Yvonne Tate</td>
<td>Benefits Management/Cost Containment</td>
</tr>
<tr>
<td>1407 169th PL NE</td>
<td></td>
</tr>
<tr>
<td>Bellevue WA 98008</td>
<td></td>
</tr>
<tr>
<td>V 425-417-4416</td>
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<td><a href="mailto:PEBBoard@hca.wa.gov">PEBBoard@hca.wa.gov</a></td>
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<tr>
<th>John Comerford*</th>
<th>Benefits Management/Cost Containment</th>
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<tbody>
<tr>
<td>121 Vine ST Unit 1205</td>
<td></td>
</tr>
<tr>
<td>Seattle, WA</td>
<td></td>
</tr>
<tr>
<td>V 206-625-3200</td>
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<tr>
<th>Harry Bossi</th>
<th>Benefits Management/Cost Containment</th>
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<tbody>
<tr>
<td>19619 23rd DR SE</td>
<td></td>
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<tr>
<td>Bothell WA 98012</td>
<td></td>
</tr>
<tr>
<td>V 360-689-9275</td>
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<td><a href="mailto:PEBBoard@hca.wa.gov">PEBBoard@hca.wa.gov</a></td>
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**Legal Counsel**

Michael Tunick, Assistant Attorney General
7141 Cleanwater Dr SW
PO Box 40124
Olympia WA 98504-0124
V 360-586-6495
MichaelT4@atg.wa.gov

*non-voting members

3/12/21
The PEB Board meetings will be held at the Health Care Authority, Sue Crystal Center, Rooms A & B, 626 8th Avenue SE, Olympia, WA 98501.

January 26, 2022  (Board Retreat)  9:00 a.m. – 4:00 p.m.
March 10, 2022    9:00 a.m. – 2:00 p.m.
April 14, 2022    9:00 a.m. – 2:00 p.m.
May 12, 2022      9:00 a.m. – 2:00 p.m.
June 9, 2022      9:00 a.m. – 2:00 p.m.
June 30, 2022     9:00 a.m. – 2:00 p.m.
July 14, 2022     9:00 a.m. – 2:00 p.m.
July 20, 2022     9:00 a.m. – 2:00 p.m.
July 27, 2022    9:00 a.m. – 2:00 p.m.

If you are a person with a disability and need a special accommodation, please contact Connie Bergener at 360-725-0856
| TAB 2 |
PEB BOARD BY-LAWS

ARTICLE I
The Board and its Members

1. **Board Function**—The Public Employees Benefits Board (hereinafter “the PEBB” or “Board”) is created pursuant to RCW 41.05.055 within the Health Care Authority; the PEBB’s function is to design and approve insurance benefit plans and establish eligibility criteria for participation in insurance benefit plans for Higher Education and State employees, State retirees, and school retirees.

2. **Staff**—Health Care Authority staff shall serve as staff to the Board.

3. **Appointment**—The Members of the Board shall be appointed by the Governor in accordance with RCW 41.05.055. Board Members shall serve two-year terms. A Member whose term has expired but whose successor has not been appointed by the Governor may continue to serve until replaced.

4. **Non-Voting Member**—There shall be one non-voting Members appointed by the Governor because of their experience in health benefit management and cost containment.

5. **Privileges of Non-Voting Member**—The non-voting Member shall enjoy all the privileges of Board membership, except voting, including the right to sit with the Board, participate in discussions, and make and second motions.

6. **Board Compensation**—Members of the Board shall be compensated in accordance with RCW 43.03.250 and shall be reimbursed for their travel expenses while on official business in accordance with RCW 43.03.050 and 43.03.060.

ARTICLE II
Board Officers and Duties

1. **Chair of the Board**—The Health Care Authority Administrator shall serve as Chair of the Board and shall preside at all meetings of the Board and shall have all powers and duties conferred by law and the Board’s By-laws. If the Chair cannot attend a regular or special meeting, he or she shall designate a Chair Pro-Tem to preside during such meeting.

2. **Other Officers**—(reserved)
ARTICLE III
Board Committees

(RESERVED)

ARTICLE IV
Board Meetings

1. Application of Open Public Meetings Act—Meetings of the Board shall be at the call of
the Chair and shall be held at such time, place, and manner to efficiently carry out the
Board’s duties. All Board meetings, except executive sessions as permitted by law,
shall be conducted in accordance with the Open Public Meetings Act, Chapter 42.30
RCW.

2. Regular and Special Board Meetings—The Chair shall propose an annual schedule of
regular Board meetings. The schedule of regular Board meetings, and any changes to
the schedule, shall be filed with the State Code Reviser’s Office in accordance with
RCW 42.30.075. The Chair may cancel a regular Board meeting at his or her
discretion, including the lack of sufficient agenda items. The Chair may call a special
meeting of the Board at any time and proper notice must be given of a special meeting
as provided by the Open Public Meetings Act, RCW 42.30.

3. No Conditions for Attendance—A member of the public is not required to register his or
her name or provide other information as a condition of attendance at a Board meeting.

4. Public Access—Board meetings shall be held in a location that provides reasonable
access to the public including the use of accessible facilities.

5. Meeting Minutes and Agendas—The agenda for an upcoming meeting shall be made
available to the Board and the interested members of the public at least 24 hours prior
to the meeting date or as otherwise required by the Open Public Meetings Act.

   Agendas may be sent by electronic mail and shall also be posted on the HCA website.
   An audio recording (or other generally accepted electronic recording) shall be made
   of the meeting. HCA staff will provide minutes summarizing each meeting from the audio
   recording. Summary minutes shall be provided to the Board for review and adoption at
   a subsequent Board meeting.

6. Attendance—Board Members shall inform the Chair with as much notice as possible if
unable to attend a scheduled Board meeting. Board staff preparing the minutes shall
record the attendance of Board Members at the meeting for the minutes.
ARTICLE V
Meeting Procedures

1. Quorum—Five voting members of the Board shall constitute a quorum for the transaction of business. No final action may be taken in the absence of a quorum. The Chair may declare a meeting adjourned in the absence of a quorum necessary to transact business.

2. Order of Business—The order of business shall be determined by the agenda.

3. Teleconference Permitted—A Board Member may attend a meeting in person or, by special arrangement and advance notice to the Chair, by telephone conference call, or video conference when in-person attendance is impracticable.

4. Public Testimony—The Board actively seeks input from the public at large, from enrollees served by the PEBB Program, and from other interested parties. Time is reserved for public testimony at each regular meeting, generally at the end of the agenda. At the direction of the Chair, public testimony at Board meetings may also occur in conjunction with a public hearing or during the Board’s consideration of a specific agenda item. The Chair has authority to limit the time for public testimony, including the time allotted to each speaker, depending on the time available and the number of persons wishing to speak.

5. Motions and Resolutions—All actions of the Board shall be expressed by motion or resolution. No motion or resolution shall have effect unless passed by the affirmative votes of a majority of the Board Members present and eligible to vote, or in the case of a proposed amendment to the By-laws, a 2/3 majority of the Board.

6. Representing the Board’s Position on an Issue—No Board Member may endorse or oppose an issue purporting to represent the Board or the opinion of the Board on an issue unless the majority of the Board approve of such position.

7. Manner of Voting—On motions, resolutions, or other matters a voice vote may be used. At the discretion of the Chair, or upon request of a Board Member, a roll call vote may be conducted. Proxy votes are not permitted, but the prohibition of proxy votes does not prevent a Chair Pro-Tem designated by the Health Care Authority Director from voting.

8. Parliamentary Procedure—All rules of order not provided for in these By-laws shall be determined in accordance with the most current edition of Robert’s Rules of Order. Board staff shall provide a copy of Robert’s Rules at all Board meetings.

9. Civility—While engaged in Board duties, Board Members’ conduct shall demonstrate civility, respect, and courtesy toward each other, HCA staff, and the public and shall be guided by fundamental tenets of integrity and fairness.

10. State Ethics Law and Recusal—Board Members are subject to the requirements of the Ethics in Public Service Act, Chapter 42.52 RCW. A Board Member shall recuse himself or herself from casting a vote as necessary to comply with the Ethics in Public Service Act.
ARTICLE VI
Amendments to the By-Laws and Rules of Construction

1. Two-thirds majority required to amend—The PEBB By-laws may be amended upon a two-thirds (2/3) majority vote of the Board.

2. Liberal construction—All rules and procedures in these By-laws shall be liberally construed so that the public’s health, safety and welfare shall be secured in accordance with the intents and purposes of applicable State laws and regulations.

Last Revised July 15, 2020
TAB 3
2022 Legislative Session Update

Cade Walker, Executive Special Assistant
Employees & Retirees Benefits (ERB) Division
March 10, 2022
## Number of 2022 Bills Analyzed by ERB Division

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<tr>
<th>Priority</th>
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<th>ERB Support</th>
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<td>23</td>
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<tr>
<td>Low Priority</td>
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<td><strong>Total</strong></td>
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As of 3/1/22
## 2022 Legislative Session – ERB High Lead Bills

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<td>2/3</td>
<td>Origin Chamber - Policy</td>
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<td>2/7</td>
<td>Origin Chamber - Fiscal</td>
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<tr>
<td>2/15</td>
<td>Origin Chamber - Rules/Floor</td>
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<td>2/28</td>
<td>Opposite Chamber - Fiscal</td>
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<tr>
<td>3/4</td>
<td>Opposite Chamber - Rules/Floor</td>
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</table>

Last day of regular session is March 10

Governor: 0 bills
Topical Areas of Introduced Legislation

PEBB/SEBB Programs

• HB 1052 (2021) – Performance guarantees
  – Reintroduced and already passed to Senate

• 1757/5562 – ESD employee health care

Retirees

• 1911/5700 – Plan 2 members/insurance
  – Plan 2 members included in definition of “separated employee” in RCW 41.05.011
Topical Areas of Introduced Legislation (cont.)

Rx
• 1713/5610 – Rx drug cost sharing
• 1813 – Pharmacy Choice
• 5794 – Behavioral health Rx drugs

Durable Medical Equipment (DME)
• 1854 – Hearing instruments coverage

Insurance
• 1688 – Out-of-network charges
• 5704 – ARNP reimbursement rate
Topical Areas of Introduced Legislation (cont.)

Medical Services
• 1689/5618 – Biomarker testing
• 1939 – Colonoscopy coverage
• 1730/5647 – Fertility services
• 5702 – Donor breast milk coverage
Questions?

Cade Walker, Executive Special Assistant
Employees and Retirees Benefits Division

cade.walker@hca.wa.gov
2022 Supplemental Budget Update
PEBB

Kate LaBelle
Fiscal Information & Data Analyst
Financial Services Division
March 10, 2022
PEBB Funding Rate

Governor Proposed

FY22 $936
FY23 $1,130

Senate Proposed

FY22 $936
FY23 $1,184

House Proposed

FY22 $936
FY23 $1,130
Proposed Budget Similarities
(Governor, Senate, and House Proposed Budgets)

- **Customer Service Staff** – Funding for 4.5 FTEs is requested to address customer service responsiveness and program complexity within Portfolio Management. $604K

- **Procurement Resources** – Funds are requested to maintain, enhance, and replace contracts with the PEBB Program. $1.4M

- **Mental Health Parity** – Funding to complete an analysis of mental health benefits in the Uniform Medical Plan and implement necessary changes to complete with federal requirements. $350K
Medicare Explicit Subsidy

Current $183

Governor $183
Senate $183
House $183

Note: $183 or 50% of the premium, whichever is less
$250,000 is provided for HCA to conduct a study of the Uniform Medical Plan administration. By June 30, 2023, the HCA must prepare a report that includes:

- Administrative services provided prior to 2010, those that have been procured since, and what elements could be provided by HCA or through discrete provider contracts
- Compare the administrative costs before and after the use of the current contract
- Assumptions on claims’ impacts and performance guarantees
- An implementation plan for the HCA to resume administration of all or some of the administrative services at the end of the current contract
Questions?

Kate LaBelle
Fiscal Information & Data Analyst
Financial Services Division
Kate.LaBelle@hca.wa.gov
TAB 5
Policy and Rules Development

Stella Ng, Policy and Rules Coordinator
Policy, Rules, and Compliance Section
Employees and Retirees Benefits Division
March 10, 2022

Emily Duchaine, Regulatory Analyst
Policy, Rules, and Compliance Section
Employees and Retirees Benefits Division
(1) The public employees' benefits board shall study all matters connected with the provision of health care coverage, life insurance, liability insurance, accidental death and dismemberment insurance, and disability income insurance or any of, or a combination of, the enumerated types of insurance for employees and their dependents on the best basis possible with relation both to the welfare of the employees and to the state. However, liability insurance shall not be made available to dependents.

(2) The public employees' benefits board shall develop employee benefit plans that include comprehensive health care benefits for employees. In developing these plans, the public employees' benefits board shall consider the following elements:

(a) Methods of maximizing cost containment while ensuring access to quality health care;
(b) Development of provider arrangements that encourage cost containment and ensure access to quality care, including but not limited to prepaid delivery systems and prospective payment methods;
(c) Wellness incentives that focus on proven strategies, such as smoking cessation, injury and accident prevention, reduction of alcohol misuse, appropriate weight reduction, exercise, automobile and motorcycle safety, blood cholesterol reduction, and nutrition education;...
(4) Except if bargained for under chapter 41.80 RCW, the public employees' benefits board shall design benefits and determine the terms and conditions of employee and retired or disabled school employee participation and coverage, including establishment of eligibility criteria subject to the requirements of this chapter. Employer groups obtaining benefits through contractual agreement with the authority for employees defined in RCW 41.05.011(6)(a) (i) through (vi) may contractually agree with the authority to benefits eligibility criteria which differs from that determined by the public employees' benefits board. The eligibility criteria established by the public employees' benefits board shall be no more restrictive than the following:...
(1) Every: (a) Department, division, or separate agency of state government; (b) county, municipal, school district, educational service district, or other political subdivisions; and (c) tribal governments as are covered by this chapter, shall provide contributions to insurance and health care plans for its employees and their dependents, the content of such plans to be determined by the authority. Contributions, paid by the county, the municipality, other political subdivision, or a tribal government 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.
Introduction of Proposed Resolutions

PEBB 2022-03  Medicare Advantage Prescription Drug (MAPD) Plan Enrollment During Gap Months

PEBB 2022-04  Deferring PEBB Retiree Insurance Coverage When the Subscriber Becomes Eligible for the Employer Contribution
### Introduction of Proposed Resolutions (cont.)

<table>
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<th>Resolution</th>
<th>Description</th>
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<tbody>
<tr>
<td>PEBB 2022-01</td>
<td>Employees Returning to Work From Active Duty</td>
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<tr>
<td>PEBB 2022-02</td>
<td>Employees May Waive Enrollment in Dental</td>
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</table>
Proposed Medicare Advantage Prescription Drug Plan Resolution
Proposed Resolution PEBB 2022-03
Medicare Advantage Prescription Drug Plan Enrollment During Gap Month(s)

If a subscriber elects to enroll in a Medicare Advantage Prescription Drug (MAPD) plan, and the required forms are received by the PEBB Program after the date the PEBB retiree insurance coverage is to begin, the subscriber will be enrolled in Uniform Medical Plan (UMP) Classic during the gap month(s) prior to when the MAPD coverage begins.
Retiring Employee Requesting to Enroll in MAPD After Their Current Coverage Ends

Example #1

Example: Joan’s retirement date is July 1, 2023. The PEBB Program receives her retiree election forms on August 17, 2023. For medical, Joan selected United HealthCare PEBB Complete, a Medicare Advantage Prescription Drug (MAPD) plan. Because Joan’s enrollment in PEBB retiree insurance coverage must be July 1, 2023 (consistent with her retirement date) and enrollment in the MAPD plan must be prospective, there is a two-month gap in coverage.

Which plan is Joan enrolled in during the gap months? Joan will be enrolled in the Uniform Medical Plan (UMP) Classic for the months of July and August before United HealthCare PEBB Complete begins.
Retiring Employee Requesting to Enroll in MAPD Plan After Their Current Coverage Ends

Example #2

Example: George is currently enrolled in a Kaiser Foundation Health Plan of Washington Classic plan and his retirement date is July 1, 2023. The PEBB Program receives his retiree election forms on August 17, 2023. For medical, George selected United HealthCare PEBB Balance, a Medicare Advantage-Prescription Drug (MAPD) plan. Because George’s enrollment in PEBB retiree insurance coverage must be July 1, 2023 (consistent with his retirement date), and enrollment in the MAPD plan must be prospective, there is a two-month gap in coverage.

Which plan is George enrolled in during the gap months? George will be enrolled in the Uniform Medical Plan (UMP) Classic for the months of July and August before United HealthCare PEBB Complete begins.
Retiring School Employee Requesting to Enroll in MAPD Plan After Their Current Coverage Ends
Example #3

Example: Frances is currently enrolled in a Premera Blue Cross High PPO plan and her retirement date is July 1, 2023. The PEBB Program receives her retiree election forms on August 17, 2023. For medical, Frances selected United HealthCare PEBB Balance, a Medicare Advantage-Prescription Drug (MAPD) plan. Because Frances’s enrollment in PEBB retiree insurance coverage must be July 1, 2023 (consistent with her retirement date), and enrollment in the MAPD plan must be prospective, there is a two-month gap in coverage.

Which plan is Frances enrolled in during the gap months? Frances will be enrolled in the Uniform Medical Plan (UMP) Classic for the months of July and August before the United HealthCare PEBB Balance plan begins.
Proposed Deferring PEBB Retiree Insurance Coverage Resolution
Proposed Resolution PEBB 2022-04
Deferring PEBB Retiree Insurance Coverage
When the Subscriber Becomes Eligible for the Employer Contribution

PEBB retiree insurance coverage will be automatically deferred when the subscriber becomes eligible for the employer contribution towards PEBB benefits. The subscriber will be exempt from the deferral form requirement.
Proposed Resolution PEBB 2022-04
Deferring PEBB Retiree Insurance Coverage
When the Retiree Becomes Eligible for the
Employer Contribution
Example #1

**Example:** Charlie is a retiree enrolled in PEBB retiree insurance coverage. On March 1, 2023, Charlie is rehired as an employee at the Department of Licensing and becomes eligible for the employer contribution towards PEBB benefits.

*When is Charlie’s PEBB retiree insurance coverage deferred?* Charlie will be exempt from the deferral form requirement and his PEBB retiree insurance coverage will be automatically deferred on March 1, 2023. Charlie will be enrolled in PEBB benefits as an employee effective March 1, 2023.
Proposed USERRA Policy Resolution
Uniformed Services Employment and Reemployment Rights Act (USERRA)

Title 20 Chapter IX Part 1002 Subpart D Health Plan Coverage
§ 1002.168
If the employee's coverage was terminated at the beginning of or during service, must his or her coverage be reinstated upon reemployment?

(a) If health plan coverage for the employee or a dependent was terminated by reason of service in the uniformed services, that coverage must be reinstated upon reemployment. An exclusion or waiting period may not be imposed in connection with the reinstatement of coverage upon reemployment, if an exclusion or waiting period would not have been imposed had coverage not been terminated by reason of such service.
Proposed Resolution PEBB 2022-01

Employees Returning to Work From Active Duty

When an employee who is called to active duty in the uniformed services under USERRA loses eligibility for the employer contribution toward PEBB benefits, they regain eligibility for the employer contribution toward PEBB benefits the day they return from active duty. Health plan coverage will begin the first day of the month in which they return from active duty.
**Example #1**

**Example:** Darren works at the Department of Fish and Wildlife. He returned to his job on Wednesday, August 17, 2022, after six months of active duty. When Darren went on active duty, he was eligible for the employer contribution toward PEBB benefits.

**When are employer paid coverages reinstated?**

Employer paid coverages are reinstated August 1.
Example: Jenny works half time (4 hours a day) at the Secretary of State. She returned to her job on Friday, April 29, after eighteen months of active duty. When Jenny went on active duty, she was eligible for the employer contribution toward PEBB benefits.

When do employer paid coverages begin?
Employer paid benefits begin April 1.
Proposed Dual Enrollment Policy Resolutions
Beginning with the 2022 plan year, individuals are limited to a single enrollment in medical, dental, and vision plans in either the school employees' benefits board or the public employees' benefits board. The school employees' benefits board and the public employees' benefits board shall adopt policies to reflect this single enrollment requirement.
(8) Employees shall choose participation in one of the health care benefit plans developed by the public employees' benefits board and may be permitted to waive coverage under terms and conditions established by the public employees' benefits board.
Dual Enrollment Policy Resolution Language

- **Employee**: All employees of state agencies, higher education institutions, employer groups, tribal governments, and other entities described in RCW 41.05.011(6)(a).
- **School employee**: All employees of school districts and charter schools, represented employees of educational service districts, and (beginning January 1, 2024) all employees of educational service districts.
- **PEBB benefits**: One or more insurance coverages or other employee benefits administered by the PEBB Program within the health care authority.
What Did Employees Do During Open Enrollment to Resolve Their Dual Enrollment?

During the open enrollment period in fall 2021 for plan year 2022, employees who were currently dual enrolled could choose either the PEBB Program or SEBB Program for their medical, dental, and vision plans for themselves and for all their covered dependents.
What Can Employees Do to Avoid Dual Enrollment?

Employees who become newly eligible for the employer contribution toward PEBB benefits, or who experience a special open enrollment, and who are already enrolled in a SEBB health plan, can:

• Enroll in a PEBB health plan; or,
• Waive their enrollment in a PEBB health plan.
An employee who is eligible for the employer contribution toward PEBB benefits and who waives enrollment in a PEBB medical plan when they are enrolled in TRICARE, Medicare, or other employer-based group medical, and are not enrolled in SEBB medical, may waive their PEBB dental only if they are enrolled in both a SEBB dental plan and SEBB vision plan as a SEBB eligible dependent.
Proposed Resolution PEBB 2022-02
Example #1

**Example:** Jeanette is a custodian at the University of Washington and is enrolled only in PEBB dental. She waived PEBB medical because she is enrolled in TRICARE.

Jeanette is married to Taylor, who is a teacher at Roosevelt Middle School. Taylor enrolled Jeanette in SEBB dental and SEBB vision during annual open enrollment in 2022.

**Can Jeanette waive her PEBB dental?** Yes. This resolution would enable Jeanette to waive her PEBB dental without having to enroll in SEBB medical, but in order to do so, she must be enrolled in both SEBB dental and SEBB vision as a SEBB eligible dependent.
Next Steps

• Incorporate Board feedback in the proposed policies

• Submit feedback by March 25, 2022

• Bring recommended proposed policy resolutions to the Board for action at the April 14, 2022 Board Meeting
Questions?

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Emily Duchaine, Regulatory Analyst
Policy, Rules, and Compliance Section
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UMP Pharmacy Benefit Management (PBM) Update

Jenny Switzer, Senior Moda Account Manager
Portfolio Management & Monitoring Section
Employees and Retirees Benefits Division
March 10, 2022
The Northwest Prescription Drug Consortium (the Consortium) is jointly administered through the Washington Prescription Drug Program (WPDP) and the Oregon Prescription Drug Program (OPDP).

- Both state governments joined together in 2006 to increase purchasing power.
- Programs participate in the Consortium to purchase or reimburse drugs.
- UMP must use the Consortium for its pharmacy benefit (RCW 70.14.060).

The prior Moda Health contract to administer the Consortium expired on 12/31/21.

After a competitive procurement, Moda was awarded a new contract.

- New contract became effective 1/1/2022.
- 5-year contract with an option to extend the contract in one year increments up to a total of 5 years.
Overview of Moda’s Structure

• Moda administers most aspects of UMP’s prescription drug benefit in-house (Blue)

• Moda subcontracts with another pharmacy benefit manager (PBM) to carry out behind-the-scenes functions (Yellow)
Moda and Navitus Roles

Moda’s PBM subcontractor changed from MedImpact to Navitus
Benefits of Navitus

• More clinical programs to support the health of members
  – Pharmacoadherence programs
• Costco mail order as a potential 2nd mail order option for benefit year 2023
• Greater options for administrative budget flexibility
  – Per Paid Claims
  – Per Member Per Month (PMPM)
• Increased online reporting access
  – 30 user accounts available versus previous 4
• Walgreens added to the pharmacy network
## Member Experience Impacts

<table>
<thead>
<tr>
<th>What stayed the same?</th>
<th>What changed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Benefit design</td>
<td>• New group ID and BIN numbers</td>
</tr>
<tr>
<td>• Prior authorizations</td>
<td>◦ ID cards were issued</td>
</tr>
<tr>
<td>• Customer service</td>
<td>• Refreshed member dashboard</td>
</tr>
<tr>
<td>• Complaints and appeals process</td>
<td>◦ Price check, pharmacy locator, claims history</td>
</tr>
<tr>
<td>• Large pharmacy network</td>
<td>• New address to submit out-of-network claims</td>
</tr>
<tr>
<td>◦ ~53,000 network locations</td>
<td>• Change in drug designation database resulted in changes in some generic and</td>
</tr>
<tr>
<td>• Ardon Health for specialty pharmacy</td>
<td>brand designations</td>
</tr>
<tr>
<td>• Postal Prescription Services for mail order pharmacy</td>
<td>• CVS/Walgreens’ network change</td>
</tr>
</tbody>
</table>
## Net Changes to Network Pharmacies

<table>
<thead>
<tr>
<th>County</th>
<th>CVS</th>
<th>Walgreens</th>
<th>Net Pharmacy Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASOTIN</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>BENTON</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>CHELAN</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>CLALLAM</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>CLARK</td>
<td>2</td>
<td>13</td>
<td>11</td>
</tr>
<tr>
<td>COWLITZ</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>DOUGLAS</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>FRANKLIN</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>GRANT</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>ISLAND</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>KING</td>
<td>22</td>
<td>39</td>
<td>17</td>
</tr>
<tr>
<td>KITSAP</td>
<td>2</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>LEWIS</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>PIERCE</td>
<td>7</td>
<td>21</td>
<td>14</td>
</tr>
<tr>
<td>SKAGIT</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>SNOHOMISH</td>
<td>6</td>
<td>12</td>
<td>6</td>
</tr>
<tr>
<td>SPOKANE</td>
<td>2</td>
<td>12</td>
<td>10</td>
</tr>
<tr>
<td>THURSTON</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>WALLA WALLA</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>WHATCOM</td>
<td>1</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>YAKIMA</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>47</strong></td>
<td><strong>133</strong></td>
<td><strong>86</strong></td>
</tr>
</tbody>
</table>
Net Changes by Zip Code

Walgreens: +133 locations in WA
CVS: -47 locations in WA
Net gain: 86 locations
### Member Communications

<table>
<thead>
<tr>
<th>Title</th>
<th>Published</th>
<th>Audience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rx OE Brochure</td>
<td>9/16/2021</td>
<td>All members</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Available online or mail by request</td>
</tr>
<tr>
<td>What's Changing Publication</td>
<td>9/16/2021</td>
<td>All subscribers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mailed with welcome packet</td>
</tr>
<tr>
<td>PEBB UMP OE Video (recorded)</td>
<td>10/1/2021</td>
<td>Available on-demand to all members</td>
</tr>
<tr>
<td>For Your Benefit Newsletters</td>
<td>10/12/2021</td>
<td>All PEBB Program subscribers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Email or mail per member preference</td>
</tr>
<tr>
<td>UMP Newsletter</td>
<td>10/22/2021</td>
<td>All PEBB Program subscribers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Email or mail per member preference</td>
</tr>
<tr>
<td>PEBB UMP Webinar (recorded)</td>
<td>10/27/2021</td>
<td>Available on-demand to all members</td>
</tr>
<tr>
<td>WSRxS Welcome Postcards</td>
<td>12/7/2021</td>
<td>New UMP members only</td>
</tr>
<tr>
<td>Quick Start Guides</td>
<td>12/20/2021</td>
<td>All subscribers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mailed with welcome packet</td>
</tr>
<tr>
<td>Welcome Letters</td>
<td>12/20/2021</td>
<td>All subscribers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mailed with welcome packet</td>
</tr>
<tr>
<td>Regence.com Web Alert</td>
<td>1/1/2022 – 1/31/2022</td>
<td>All members</td>
</tr>
</tbody>
</table>
Additional Communications

• Certificates of Coverage
• Customized letters to targeted members
  ◦ 13,877 letters to PEBB Program members who had filled a prescription at CVS in previous 6 months notifying them of change in network status. Included 3 closest network pharmacies to member home address.
  ◦ 151,465 letters to PEBB Program subscribers notifying members of new pharmacy numbers
• Custom Customer Service Recorded Greeting
  ◦ Informed callers they will receive a new card in December and to use it when filling prescriptions in 2022
• SmartHealth Activity Tile
  ◦ 858 PEBB Program members participated in this activity
Implementation Related Member Impacts

• No appeals received related to implementation
• Difference in concurrent drug utilization review (DUR) edits caused some claims to deny for high dose when they had previously been approved
• Some compound claims partially rejected for non-formulary ingredients, such as bulk powders
• Price changes due to drug reference source classifications, Maximum Allowable Cost (MAC) list changes, and changes to network financial guarantees
Questions?

Jenny Switzer, Moda Senior Account Manager
Portfolio Management & Monitoring

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TAB 7
2024 Uniform Dental Plan (UDP) Benefit Design Introduction

Ellen Wolfhagen
Senior Account Manager
Employees and Retirees Benefits Division
March 10, 2022
Background

- No significant changes in benefits by PEBB Program for 20 years
- 80% of PEBB Program members use Uniform Dental Plan (UDP)
- SEBB fully leveraged PEBB benefits
Board Timeline

• March
  – Introduction of options

• April
  – Data on utilization and potential costs

• May
  – Reach consensus on priorities
Remaining Benefit Design Cycle

• Summer/Fall 2022
  – HCA Introduction of budget decision package

• September 2022
  – Budget proposals finalized by Governor

• Spring 2023
  – Biennial budget for FYs 2023-2025 finalized

• Benefit introduction
  – January 1, 2024 (earliest) or January 1, 2025
Current UDP Plan Design

- Deductible - $50/person – up to $150/family
- Class I (preventive services) – 100% coverage
- Class II (fillings) – 80% coverage
- Class III (crowns, bridges, etc.) – 50% coverage
- TMJ – 70% coverage and $500 lifetime limit
- Annual *plan* payment - $1,750
## Market Comparison – Plan Coverage

<table>
<thead>
<tr>
<th>Coverage Amount</th>
<th>Uniform Dental Plan</th>
<th>Delta Book of Business</th>
<th>WEA Plan (Pre-SEBB)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The amount the Plan pays towards the covered service.</td>
<td>Class I – Preventive Services 100%</td>
<td>Class I – Preventive Services 100%</td>
<td>Class I – Preventive Services 70% - 100%</td>
</tr>
<tr>
<td>Class II – Restorative (Fillings) 80%</td>
<td>Class II – Restorative (Fillings) 80%</td>
<td>Class II – Restorative (Fillings, Crowns) 70% - 100%</td>
<td></td>
</tr>
<tr>
<td>Class III – Major (Crowns, Bridges, Implants) 50%</td>
<td>Class III – Major (Crowns, Bridges, Implants) 50%</td>
<td>Class III – Major (Bridges, Implants) 50%</td>
<td></td>
</tr>
</tbody>
</table>
2024 UDP Options

- Incentivize preventive services
- Composite materials for fillings
- Annual plan maximum adjustment
- No deductible for children’s benefits
- TMJ lifetime benefit limit adjustment
Incentivize Preventive Services

• Increase Plan percentage coverage (amount plan pays) based on one visit to the dentist

• Can increase by a standard increment per year, based on previous year’s usage, up to a maximum

• Benefits could decrease (for non-use) by standard increment to established floor
Incentive Benefits

• Large employers – Not currently used by larger groups, but interest is increasing

• WEA (Pre-SEBB) – Class I and II starts at 70% plan coverage and increases by 10% up to 100% plan coverage
WEA Plan Incentive Example  
(Source: WEA Plan Summary, 2018)

**How your plan works**

Simply visit your dentist at least once in the benefit year to increase your coverage level by 10% for the **following** year. Repeat until you achieve your maximum benefit levels. Here’s an example:

- **Current benefit period coverage level**
- **Use benefits**
- **One year later coverage goes up 10%**
- **Use benefits**
- **One year later coverage goes up 10%**

On the other hand, if you do not visit the dentist in the benefit year, your coverage level will decrease by 10% the following year.
Amalgam and Composite Comparison

Materials for posterior teeth restoration:

• Amalgam restorations contain elemental mercury and are less commonly used

• Composite materials provide good durability and resistance to fracture
Composite Materials for Fillings

• UDP - currently considered elective in posterior teeth (stainless steel or prefabricated crowns are covered under Class II)

• Large employers –
  – Included in smaller fully insured groups
  – Not included in larger self-insured plans

• WEA (PRE-SEBB) – covers posterior composite fillings (base 70%, subject to increase in incentive plan to 100%); crowns and onlays are covered under Class II
Annual Plan Maximum Adjustment

• Current level is $1,750

• Preventive services count towards plan benefit, even though no cost share

• Same level since 2008
# Annual Plan Maximum Comparisons

<table>
<thead>
<tr>
<th>Annual Plan Maximum</th>
<th>Uniform Dental Plan</th>
<th>Delta Book of Business</th>
<th>WEA Plan (Pre-SEBB)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The most the <strong>Plan</strong> will pay during a coverage period, at which point the member will assume the full responsibility for payment of covered services.</td>
<td>$1,750, regardless of network status (PPO, Premier, and Out-of-Network)</td>
<td>43% of Book of Business has a $2,000 maximum</td>
<td>$2,000 PPO, $1,750 Premier and Out-of-Network</td>
</tr>
</tbody>
</table>
## Market Comparison - Deductibles

<table>
<thead>
<tr>
<th>Annual Deductible</th>
<th>Uniform Dental Plan</th>
<th>Delta Book of Business</th>
<th>WEA Plan (Pre-SEBB)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The amount the <strong>member</strong> must pay before the plan begins to pay for covered services.</td>
<td>No deductible for preventive services</td>
<td>Industry standard - $50/$150 (Waived for Preventive services)</td>
<td>No deductible</td>
</tr>
<tr>
<td>$50/individual $150/family</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Waiving Children’s Deductible

• Reduce financial barriers for pediatric care
• Encourage early preventive visits
• Applies to restorative care as needed
• Develop lifetime habits of good oral care
Differences in Children’s Benefits

**Uniform Dental Plan**
- Children’s coverage same as adults’
- $50 deductible
- Class II benefits – 80% coverage
- Annual plan maximum of $1,750

**WEA Healthy Start**
- Covers children up to age 15
- No deductible for children
- Class II benefits – 100% coverage
- No annual plan maximum
Temporomandibular Joint (TMJ) Benefits

• Clinically – disorders that result in pain in the muscles associated with the TMJ, arthritic problems with the TMJ, or an abnormal range of motion of the TMJ

• Surgical benefits are covered medically (requiring pre-authorization)
## TMJ Benefits Comparison

<table>
<thead>
<tr>
<th>Uniform Dental Plan</th>
<th>Delta Book of Business</th>
<th>WEA Plan (pre-SEBB)</th>
</tr>
</thead>
<tbody>
<tr>
<td>70% up to $500 Lifetime maximum</td>
<td>50% up to $1,000 annual maximum; $5,000 Lifetime maximum</td>
<td>50% up to $1,000 annual maximum; $5,000 Lifetime maximum</td>
</tr>
<tr>
<td>Boeing and Alaska Airlines have NO coverage</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TMJ Lifetime Benefits

• Higher percentage coverage than most large employers

• Covers only non-surgical treatment

• Treatment usually consists of retainers and/or spacers
Next Steps

• April meeting
  – Data on utilization
  – Potential cost impacts (small, medium, large)
  – Additional information as requested
Questions?

Ellen Wolfhagen, Senior Account Manager
Employee and Retiree Benefits Division

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TAB 8
Procurement and Benefit Planning Cycles

John Partin, Manager
Benefit Strategy and Design Section
Employees & Retirees Benefits Division
March 10, 2022
PEBB Procurement Cycle for Benefit Year 2023

- June-July 2021: Board approves 2022 plan
- August 2021: Decision packages sent to OFM
- December 2021: Governor releases budget
- January 2022: Legislature returns, Board retreat
- March 2022: Receive Renewal Responses from current plans
- April 2022: Request renewal via RFR for 2023
- May 2022: Board briefing on renewals, Conduct negotiations
- June 2022: Review proposed changes and rates, Request refinements
- June-July 2022: 2024 benefits design begins
- July 2022: Select plans, Finalize rates, Stakeholder results, Seek Board resolutions
- August 2022: Contract writing, Publish rates, COC building & review, Sign preliminary agreements w/ vendors
- September 2022: Select plans, Finalize rates, Stakeholder results, Seek Board resolutions
- October 2022: Open enrollment prep and communications, Finalize contracts for new plan year
- November 2022: Annual open enrollment and benefits fairs
- December 2022: Governor releases budget
PEBB Benefits Planning Cycle
for Benefit Year 2024

**Start:** March 2022
Identify New Benefit Ideas
(PEBB, Customer Service, Market, others)

**End:** January 2024
Launch of New Benefits

- **Jan – March:**
  - Jan – March
  - April – June
  - July – Sept

- **Oct – Dec:**
  - Oct – Dec
  - Jan – March

- **2022:**
  - Jul – Sept
  - Apr – June

- **2023:**
  - Apr – June
  - Jul – Sept
  - Oct – Dec

- **2023:**
  - Jul – Sept
  - Apr – June
  - Oct – Dec

- **2023 Open Enrollment/Implementation of New Benefits**
- **2023 Legislative Funding**
- **2023 Board Vote**
- **2023 Legislative Funding**
Questions?

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Employees and Retirees Benefits Division
john.partin@hca.wa.gov