

Title: PEBB Program payment plans for continuation coverage and retiree accounts

PEBB Program Administrative Policy 93-2

Contact:	Policy and Rules Coordinator, ERB Division	Effective:	January 1, 2020 0 <u>1</u>
		Rescinded:	
Associated RCW:		Supersedes:	
Associated PEB Board Policy Resolutions:			
Associated WAC:	182-08-180 (1)(b) and (c)		
Assoc. fed law/reg:		Owner:	Policy, Rules, & Compliance Manager, ERB Division
Associated Procedures:			
Associated Forms & Communication		Approved by:	
		Position:	Director of the PEBB Program
		Date approved:	

Purpose:

This policy describes the process ~~through which a subscriber or a subscriber's legal representative may request a payment plan and the criteria~~ the Health Care Authority (HCA) will use when authorizing a payment plan request for a continuation coverage or a retiree account from a subscriber or a subscriber's legal representative.

Policy:

1. The HCA may develop a reasonable payment plan upon agreement with a subscriber or subscriber's legal representative when a subscriber's monthly premiums and applicable premium surcharges are unpaid or underpaid. The payment plan may be authorized by the HCA for up to twelve months in duration.
2. The subscriber or the subscriber's legal representative may call the HCA at 1-800-200-1004 to discuss a payment plan provided the subscriber's insurance coverage is not already terminated.
3. The HCA will provide the subscriber or the subscriber's legal representative with a letter that documents the terms for payment of premiums and applicable premium surcharges upon authorization of a payment plan.
4. Payment must be received by the HCA on the agreed upon due date(s) in the payment plan agreement in addition to the subscriber's monthly insurance coverage premiums and

applicable premium surcharges that are due. All payments received by the HCA will be applied to the oldest month where a premium or applicable premium surcharge is unpaid or underpaid in the following order:

- a. The oldest month owed, first insurance coverage premium and then applicable premium surcharges; and
 - b. The next oldest month owed, first insurance coverage premium and then applicable premium surcharges.
5. If payment is not received by the agreed upon due date(s), then enrollment will be terminated. **Public Employees Benefits Board** insurance coverage ends retroactive to the last day of the month for which the monthly premiums and applicable premium surcharges were paid. Exception: For a subscriber enrolled in a Medicare Advantage or a Medicare Advantage-prescription drug plan, the enrollment will be terminated prospectively to the end of the month after the notice is sent.