

School Employees Benefits Board Retreat

May 5, 2021

School Employees Benefits Board

May 5, 2021

9:00 a.m. – 12:15 p.m.

Attendance by Zoom Only

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

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TAB 1

School Employees Benefits Board
May 5, 2021
9:00 a.m. – 12:15 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

9:00 a.m.*	Welcome and Introductions		Lou McDermott, Chair	
9:05 a.m.	Meeting Overview		David Iseminger, Director Employees & Retirees Benefits (ERB) Division	Information
9:15 a.m.	2021-23 Biennial Budget Update	TAB 3	Megan Atkinson, Chief Financial Officer, Financial Services Division	Information/ Discussion
9:30 a.m.	2021 Legislative Session	TAB 4	Cade Walker, Special Executive Assistant, ERB Division	Information/ Discussion
9:45 a.m.	ESSB 6189 Legislative Report: Variable Funding Rates	TAB 5	Molly Christie, Fiscal Information & Data Analyst, ERB Rates & Finance	Information/ Discussion
10:15 a.m.	COBRA Subsidy Support for Benefits Administrators & Members	TAB 6	Jesse Paulsboe, Outreach & Training Manager, ERB Division Stacy Grof-Tisza, Customer Service Operations Manager, ERB Division	Information/ Discussion
10:35 a.m.	Public Comment			
10:55 a.m.	Transition to Executive Session			
11:00 a.m.	Executive Session			
12:15 p.m.	Adjourn			

***All Times Approximate**

The School Employees Benefits Board will meet Wednesday, May 5, 2021. Due to COVID-19 and out of an abundance of caution, all Board Members and public attendees will attend this meeting virtually.

The Board will consider all matters on the agenda plus any items that may normally come before them.

Pursuant to RCW 42.30.110(1)(I), the Board will meet in Executive Session to consider proprietary or confidential nonpublished information related to the development, acquisition, or implementation of state purchased health care services as provided in RCW 41.05.026. The Executive Session will begin at 11:00 a.m. and conclude no later 12:15 p.m.

No "action," as defined in RCW 42.30.020(3), will be taken at the Executive Session.

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

Direct e-mail to: SEBboard@hca.wa.gov.

Materials posted by close of business on May 3, 2021 at:

<https://www.hca.wa.gov/about-hca/school-employees-benefits-board-sebb-program>

Join Zoom Meeting

<https://zoom.us/j/91801888641?pwd=RU9mRU1tdXpJYXRoaGg0UzdQVE45UT09>

Meeting ID: 918 0188 8641

Passcode: 919947

One tap mobile

+12532158782,,91801888641# US (Tacoma)

+16699006833,,91801888641# US (San Jose)

Dial by your location

+1 253 215 8782 US (Tacoma)

+1 669 900 6833 US (San Jose)

+1 346 248 7799 US (Houston)

+1 301 715 8592 US (Washington DC)

+1 312 626 6799 US (Chicago)

+1 929 205 6099 US (New York)

Meeting ID: 918 0188 8641

Find your local number: <https://zoom.us/u/adCtIdAhAq>

SEB Board Members

Name	Representing
Lou McDermott, Deputy Director Health Care Authority 626 8 th Ave SE PO Box 42720 Olympia, WA 98504-2720 V 360-725-0891 louis.mcdermott@hca.wa.gov	Chair
Kerry Schaefer 1405 N 10 th ST Tacoma, WA 98403 C 253-227-3439 SEBBoard@hca.wa.gov	Employee Health Benefits Policy and Administration
Pete Cutler 7605 Ostrich DR SE Olympia, WA 98513 C 360-789-2787 SEBBoard@hca.wa.gov	Employee Health Benefits Policy and Administration
Dawna Hansen-Murray 9932 Jackson ST Yelm, WA 98597 C 360-790-4961 SEBBoard@hca.wa.gov	Classified Employees
Dan Gossett 603 Veralene Way SW Everett, WA 98203 C 425-737-2983 SEBBoard@hca.wa.gov	Certificated Employees

SEB Board Members

Name

Representing

Katy Henry
230 E Montgomery AVE
Spokane, WA 99207
V 509-655-2350
SEBBoard@hca.wa.gov

Certificated Employees

Terri House
Marysville School District
4220 80th ST NE
Marysville, WA 98270
V 360-965-0010
SEBBoard@hca.wa.gov

Classified Employees

Wayne Leonard
Assistant Superintendent of
Business Services
Mead School District
608 E 19th Ave
Spokane, WA 99203
V 509-465-6017
SEBBoard@hca.wa.gov

Employee Health Benefits Policy
and Administration
(WASBO)

Alison Poulsen
12515 South Hangman Valley RD
Valleyford, WA 99036
C 509-499-0482
SEBBoard@hca.wa.gov

Employee Health Benefits Policy
and Administration

Legal Counsel

Katy Hatfield, Assistant Attorney General
7141 Cleanwater Dr SW
PO Box 40124
Olympia, WA 98504-0124
V 360-586-6561
Katy.Hatfield@atg.wa.gov

3/14/21



STATE OF WASHINGTON
HEALTH CARE AUTHORITY

626 8th Avenue SE • P.O. Box 45502 • Olympia, Washington 98504-5502

SEB BOARD MEETING SCHEDULE

2021 School Employees Benefits (SEB) Board Meeting Schedule

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

January 28, 2021 - 9:00 a.m. – 4:00 p.m.

March 4, 2021 - 9:00 a.m. – 2:00 p.m.

April 7, 2021 - 9:00 p.m. – 2:00 p.m.

May 5, 2021 - 9:00 a.m. – 2:00 p.m.

June 3, 2021 - 9:00 a.m. – 2:00 p.m.

June 24, 2021 - 9:00 a.m. – 2:00 p.m.

July 15, 2021 - 9:00 a.m. – 2:00 p.m.

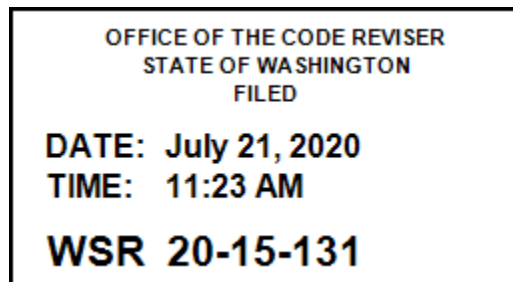
July 22, 2021 - 9:00 a.m. – 2:00 p.m.

July 29, 2021 - 9:00 a.m. – 2:00 p.m.

*Meeting times are tentative

If you are a person with a disability and need a special accommodation, please contact Connie Bergener at 360-725-0856

6/12/20



TAB 2

SCHOOL EMPLOYEES BENEFITS BOARD BY-LAWS

ARTICLE I

The Board and Its Members

1. Board Function—The School Employees Benefits Board (hereinafter “the SEBB” or “Board”) is created pursuant to RCW 41.05.740 within the Health Care Authority; the SEBB’s function is to design and approve insurance benefit plans for school district, educational service district, and charter school employees, and to establish eligibility criteria for participation in insurance benefit plans.
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 41.05.740. A Board member whose term has expired but whose successor has not been appointed by the Governor may continue to serve until replaced.
4. Board Composition—The composition of the nine-member Board shall be in accordance with RCW 41.05.740. All nine members may participate in discussions, make and second motions, and vote on motions.
5. 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 Director or his or her designee shall serve as Chair of the Board and shall conduct meetings of the Board. The Chair shall have all powers and duties conferred by law and the Board’s By-laws. If the regular Chair cannot attend a regular or special meeting, the Health Care Authority Director may designate another person to serve as temporary Chair for that meeting. A temporary Chair designated for a single meeting has all of the rights and responsibilities of the regular Chair.
2. Vice Chair of the Board—In December 2017, and each January beginning in 2019, the Board shall select from among its members a Vice Chair. If the Vice Chair position becomes vacant for any reason, the Board shall select a new Vice Chair for the remainder of the year. The Vice Chair shall preside at any regular or special meeting of the Board in the absence of a regular or temporary Chair.

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 shall be conducted in accordance with the Open Public Meetings Act, Chapter 42.30 RCW, but the Board may enter into an executive session as permitted by the Open Public Meetings Act.
2. Regular and Special Board Meetings—The Chair shall propose an annual schedule of regular Board meetings for adoption by the Board. 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 each 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 in 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 SEBB 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 the 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 temporary Chair designated by the Health Care Authority Director from voting.
8. 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.
9. 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 Newly Revised. Board staff shall ensure a copy of *Robert’s Rules* is available at all Board meetings.
10. 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.

ARTICLE VI
Amendments to the By-Laws and Rules of Construction

1. Two-thirds majority required to amend—The SEBB 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.

TAB 3



2021-23 Biennial Budget Update

Megan Atkinson
Chief Financial Officer
Financial Services Division
May 5, 2021

Final Funding Rate

School Year 2021–22: \$968
School Year 2022–23: \$1,032

Per employee per month

Adequate to maintain current level of benefits

No significant concerns with funding rates and
underlying assumptions

Final Conference Budget Funding

\$6.1 M

Third Party Administrator Fees - Increased spending authority to align with the increased self-insured medical and dental enrollment.

\$261,000

UMP Member Support – 1.0 FTE to provide support for member escalated issues due to higher UMP enrollment than originally projected.

\$15,000

Scheduling Tool Replacement - Funds to replace the staff scheduling tool for the customer service center.

\$524,000

Benefit Administrator Customer Support – 2.5 FTE to increase Outreach & Training staffing levels to support school districts.

Collective Bargaining

- Employer Medical Contribution (EMC) remains at 85% of UMP Achieve 2
 - *“The Employer Medical Contribution (EMC) will be an amount equal to eighty-five percent (85%) of the monthly premium for the self-insured SEBB-branded Uniform Medical Plan (UMP) with an estimated value of eighty-eight percent (88%).”*
- Wellness deductible incentive will be \$125
 - Eligible employees who are enrolled as a subscriber in a SEBB medical plan will have the option to earn an annual one hundred twenty-five dollar (\$125) wellness incentive in the form of a reduction in the medical deductible or deposit into the Health Savings Account
- The Benefit Allocation Factor (BAF)
 - The BAF remains 1.02 for Certificated staff and 1.43 for Classified staff

Questions?

Megan Atkinson, Chief Financial Officer

Financial Services Division

Megan.Atkinson@hca.wa.gov

TAB 4



2021 Legislative Session

Cade Walker, Executive Special Assistant
Employees & Retirees Benefits (ERB) Division
May 5, 2021

Number of 2021 Bills Analyzed by ERB Division

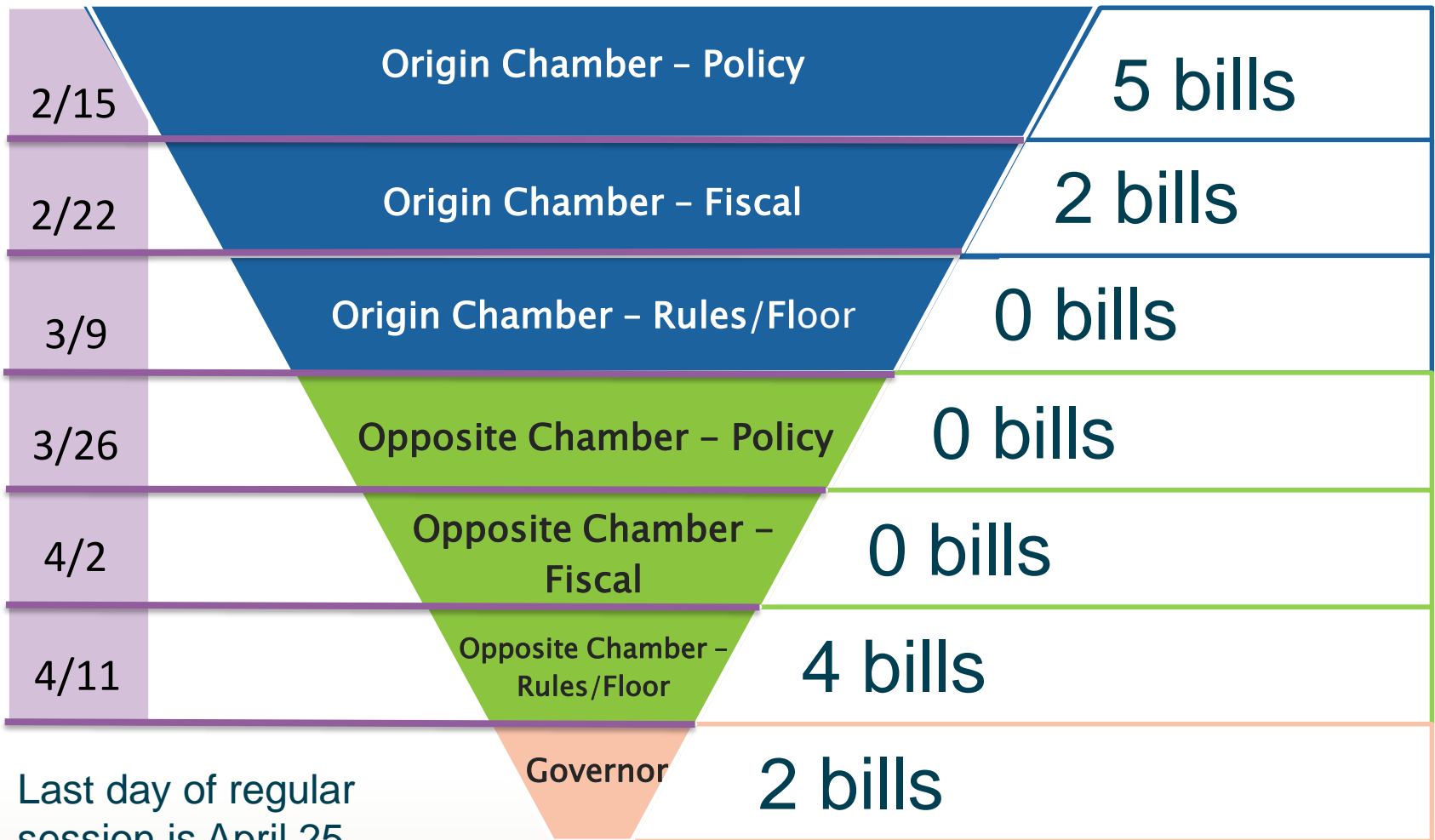
	ERB Lead	ERB Support	
High Priority	14	41	55
Low Priority	17	89	106
	31	130	161

Hearings (High Priority Only)

74

Data as of 4/28/21

2021 Legislative Session – ERB High Lead Bills



Upcoming Session – Agency Request Legislation

- SB 5322: Prohibiting dual enrollment between SEBB and PEBB Programs
 - Sponsored by Sen. Robinson
 - Clarification to 2020 ESSB 6180(4).
 - Would require an eligible member to enroll in the health benefits (medical/dental/vision) in a single program.
 - Currently, the legislation prohibits dual enrollment but it is unclear whether an eligible member could enroll in different health benefits across the two programs.

PASSED & SIGNED

HB 1052 – Group Insurance Contracts

- HCA submitted written testimony in support
- Aligns the insurance code with long-standing HCA statutory requirements that state agencies engage in performance-based contracting
- Performance standards (or performance guarantees) allow HCA to hold carriers accountable for service to PEBB/SEBB Program members
- Examples:
 - Health care claim processing timeliness/accuracy
 - Customer service metrics

Topical Areas of Introduced Legislation

- Paid Family & Medical Leave
 - HB 1073
 - SSB 5097
- Pharmacy
 - ~~SB 5020 – Rx drug price increases~~
 - ~~SB 5075 – Access to pharmacy services~~
 - ~~SB 5076 – Mail order Rx services~~
 - SB 5195 – Opioid overdose medication
- Eligibility
 - ~~HB 1040 – Health care coverage for retired or disabled school employees~~

Topical Areas of Introduced Legislation (*cont.*)

- Provider/health care services
 - SB 5018 – Acupuncture and Eastern medicine
 - ~~SB 5088 – Naturopath scope of practice~~
 - ~~SB 5222 – ARNP reimbursement rates~~
 - HB 1196/~~SB 5326~~ – Audio-only telemedicine
 - 2SSB 5313 – Health insurance discrimination
- Expanded DME
 - ~~HB 1047 – Hearing instruments for children~~
- Open Public Meetings Act
 - ~~HB 1056 – Public meetings/emergencies~~



Questions?

Cade Walker, Executive Special Assistant
Employees and Retirees Benefits Division

cade.walker@hca.wa.gov

TAB 5



ESSB 6189 Legislative Report: Variable Funding Rates

Molly Christie
Fiscal Information & Data Analyst
ERB Rates & Finance
May 5, 2021

ESSB 6189 Legislative Report

Section 2 of ESSB 6189 (2020) directs HCA to analyze the estimated impacts to the projected future funding rates and amounts billed to each school district of allowing SEBB Organizations to pay variable funding rates based on the benefits employees select. Specifically:

- For employees waiving **medical only**;
- For employees waiving coverage for **employer-paid benefits**; and
- Any **other options** considered by HCA or the SEB Board.

Historical Pooling Arrangements

- Prior to the SEBB Program, districts or local bargaining units could pool unused benefits funding related to employees who waived or were ineligible for benefits to subsidize costs for other covered employees
- While this reduced costs for *some* employees, disparities remained for others
 - Districts with higher waiver rates could have more generous benefits or lower premiums
 - Employees with covered dependents often paid substantially more than individual coverage

The SEBB Program Approach

- Redistributes funds for waived benefits across school districts through a **single funding rate**
- No more local pooling arrangements
 - Employee premiums don't change mid-year
- Eligibility, benefits, and employer/employee contribution amounts **standardized statewide**
- Waivers do not represent an incentive or barrier to employees' enrollment decisions

Waiving Doesn't Mean Saving

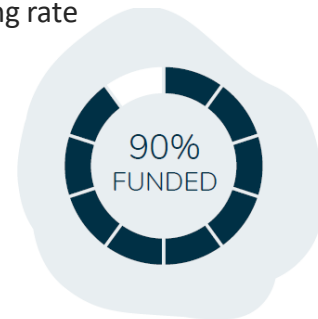
- The funding rate formula includes an estimated projected rate of employee medical waivers
- Without the waiver assumption:
 - Per employee funding rate would increase
 - Adds administrative complexity

Program Costs for 9 enrollments: \$10,000



If no payment for waivers *and* no funding rate adjustment to avoid underfunding

$$\begin{array}{r} 9 \text{ EMPLOYEES} \\ \times \quad \$1,000 \\ \hline \$9,000 \end{array}$$



With funding rate adjustment to avoid underfunding

$$\begin{array}{r} 9 \text{ EMPLOYEES} \\ \times \quad \$1,111.12 \\ \hline \$10,000 \end{array}$$

Scenario A: Medical Waivers

Approach

- Use SEBB Projection Model to estimate separate funding rates for **1) full benefits** and **2) medical waived**
- Apply average 2020 waiver rates to illustrate annual cost impact per school district

General Findings

- School districts with waiver rates below the SEBB average will have **increased costs**
- School districts with waiver rates above the average will have **decreased costs**
- **No change** to state or school employee costs

Scenario A: Illustration

Single Funding Rate - Current Methodology

District	Total Eligible Employees	% Waived	Annual Billed Amount Funding Rate \$1,000
A	10,000	20.0%	\$120,000,000
B	10,000	15.0%	\$120,000,000
C	10,000	10.0%	\$120,000,000
D	10,000	5.0%	\$120,000,000
E	10,000	0.0%	\$120,000,000
Total	50,000	10.0%	\$600,000,000

↑
Average Waiver Rate

Scenario A: Illustration (*cont.*)

Two Funding Rates – Modeled Scenario

District	% Waived	Medical Waived Funding Rate \$181	Full Package Funding Rate \$1,091	Annual Billed Amount	Annual Difference (Increased District Expenditures)
A	20%	\$4,344,000	\$104,736,000	\$109,080,000	(\$10,920,000)
B	15%	\$3,258,000	\$111,282,000	\$114,540,000	(\$5,460,000)
C	10%	\$2,172,000	\$117,828,000	\$120,000,000	\$0
D	5%	\$1,086,000	\$124,374,000	\$125,460,000	\$5,460,000
E	0%	\$0	\$130,920,000	\$130,920,000	\$10,920,000
Total	10%	\$10,860,000	\$589,140,000	\$600,000,000	\$0

Scenario B: Employer-paid Benefits Waivers

Approach

- 32 funding rates to cover every combination of medical and employer-paid benefits (dental, vision, life and AD&D, and LTD)
- Interviewed employer-paid benefits carriers to estimate waiver rates and potential pricing impacts
- Use SEBB Projection Model to estimate funding rates for **1) full benefits; and 2) employer-paid waived**
- Assume no financial incentive/“credit” to employees for waiving

Scenario B: Employer-paid Benefits Waivers (*cont.*)

General Findings

- Anticipate **very low** waiver rate for employer-paid benefits
- **Variable** cost impacts to districts
- **No change** to state or school employee costs

Implementation & Other Considerations

- Implementation costs
 - Actuarial
 - Technology (PAY1, SEBB MyAccount)
 - Communications
 - Administrative
- Prototypical School Funding Model
- PEBB/SEBB Consolidation

Questions or Concerns?

More Information:

<http://lawfilesexternal.wa.gov/biennium/2019-20/Pdf/Bills/Session%20Laws/Senate/6189-S.SL.pdf?q=20210412095901>

Molly Christie, Fiscal Information & Data Analyst
Financial Services Division

molly.christie@hca.wa.gov

TAB 6



COBRA Subsidy Support for Benefits Administrators & Members

Jesse Paulsboe
Employer Outreach & Training Manager
Employees and Retirees Benefits (ERB) Division
May 5, 2021

Stacy Grof-Tisza
Customer Service Operations Manager
Employees and Retirees Benefits (ERB) Division

Overview of the American Rescue Plan Act of 2021

The Act includes a 100% COBRA premium subsidy:

- Available to Assistance Eligible Individuals (AEI) defined as employees and their dependents who:
- Lose (or already lost) health coverage due to involuntary termination or reduction in hours (voluntary or involuntary); and
- Are federally eligible for COBRA
- Cannot be eligible for Medicare or group health coverage

Outreach & Training (O&T)

- Supports SEBB Organizations' Benefits Administrator (BA) staff by providing over-the-phone assistance, secure online correspondence, training presentations, a dedicated employer website, eligibility and enrollment training materials, and guidance
- This ensures that employers achieve accurate eligibility and enrollment decisions for their employees' accounts

Implementation of the COBRA Subsidy

- Distribution of spreadsheets to each organization, which will help HCA identify those who were involuntarily terminated or whose hours were reduced
- Utilization of existing communication channels to collect the spreadsheet and ensure proper format of the information
- Follow-up with any organizations who have not submitted necessary information
- Ongoing implementation alerts and guidance to BAs via GovDelivery

Timeline of COBRA Subsidy Implementation

- O&T began distributing spreadsheets to organizations
(May 3 – May 6, 2021)
- Organizations fill out and return spreadsheets
(May 7 – May 21, 2021)
- O&T ensures completeness and proper formatting of returned spreadsheets
(May 7 – May 21, 2021)
- O&T follows up with organizations that have not returned spreadsheets
(May 19 – May 23, 2021)

COBRA Subsidy Readiness

- O&T Unit will identify the Assistance Eligible Individuals (AEI) with the Benefits Administrators
- Use information gathered by O&T and Benefits Administrators to determine AEI eligibility
- Benefits Administrators' work is complete with O&T
- Refer individuals with questions to the 1-800 toll free line

COBRA Subsidy Customer Service Implementation

- Customer Service's scope of work includes processing COBRA and Continuation Coverage forms
- Work is underway to prepare for this initiative including:
 - Training staff on new eligibility and processes
 - Prioritizing COBRA Subsidy forms for staff to process
 - Reviewing forms for eligibility
 - Enrolling eligible AEIs and sending approval letters
 - Sending denial letters with appeal rights to ineligible applicants

COBRA Subsidy Eligibility

- We have identified three different scenarios of continuation coverage where individuals would be eligible for the subsidy:
 - Currently enrolled
 - Still eligible, but not currently enrolled
 - Newly eligible

COBRA Subsidy Eligibility

Scenario 1: Currently Enrolled

- Sally is currently enrolled in COBRA coverage and she is potentially eligible for the subsidy April 1-September 30
- HCA will mail an initial subsidy eligibility letter and a *Request for Treatment as an AEI* form
- The *Request for Treatment as an AEI* form must be returned to HCA, so we can review for eligibility
- If Sally is eligible, premiums and applicable surcharges are covered at 100% throughout the subsidy period as long as she is within her 18-month eligibility window of Federal COBRA. However, she will continue to receive invoices, if her covered dependents are not eligible for the subsidy.
- If she is ineligible, HCA will send a denial letter with appeal rights

COBRA Subsidy Eligibility: Scenario 2: Still eligible/not enrolled

- Dave was eligible for COBRA coverage as of November 1, 2020, but he is not currently enrolled. Yet, he is still within his 18-month eligibility period.
- HCA will mail the initial subsidy eligibility letter, a *2021 COBRA Subsidy Election Form for SEBB Continuation Coverage (COBRA)*, and a *Request for Treatment as an AEI* form
- Dave can enroll himself and his dependents who lost coverage on either the date he first became eligible for SEBB Continuation Coverage (COBRA) and pay all premiums and applicable surcharges retroactive to that date OR enroll from April 1

COBRA Subsidy Eligibility: Scenario 2: Still eligible/not enrolled (*cont.*)

Dave has two options:

- Enroll in COBRA coverage on November 1, 2020
 - Pay premiums and all applicable surcharges from November 1, 2020 through March 2021
 - Effective April 1, 2021, his premiums and surcharges would be covered at 100% throughout the subsidy period
- Enroll starting April 1, 2021. His premiums and surcharges would be covered at 100% throughout the subsidy period.
- Dave can enroll in medical, vision, or dental coverage or all of them
- If Dave is ineligible, HCA will send a denial letter with appeal rights

COBRA Subsidy Eligibility Scenario 3: Newly Eligible

- Scott is newly eligible for COBRA coverage through the SEBB Program effective April 1, 2021
- HCA will mail the initial subsidy eligibility letter, a *2021 COBRA Subsidy Election Form for SEBB Continuation Coverage (COBRA)*, and a *Request for Treatment as an AEI* form
- Scott can choose to enroll himself and his dependents who lost coverage in medical, vision, or dental coverage or all of them
- Premiums and applicable surcharges would be covered at 100% throughout the subsidy period
- If Scott is ineligible, HCA will send a denial letter with appeal rights

Deadlines

HCA must receive the required forms no later than 60 days from the date of the initial subsidy eligibility letter

- Currently enrolled
 - *Request for Treatment as an AEI* form
- Still eligible, but not currently enrolled
 - *2021 COBRA Subsidy Election Form for SEBB Continuation Coverage (COBRA)*
 - *Request for Treatment as an AEI* form
- Newly eligible
 - *2021 COBRA Subsidy Election Form for SEBB Continuation Coverage (COBRA)*
 - *Request for Treatment as an AEI* form

Questions?

Stacy Grof-Tisza

Customer Service Operations Manager
Employees and Retirees Benefits Division

stacy.grof-tisza@hca.wa.gov

Jesse Paulsboe

Employer Outreach & Training Manager
Employees and Retirees Benefits Division

Jesse.Paulsboe@hca.wa.gov