School Employees Benefits Board
July 16, 2020
9:00 a.m. – 12:00 p.m.
Health Care Authority
Sue Crystal A & B
626 8th Avenue SE
Olympia, Washington

THIS MEETING IS BY TELEPHONE ONLY

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TAB 1
AGENDA

School Employees Benefits Board  
July 16, 2020  
9:00 a.m. – 12:00 p.m.  

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

To attend telephonically:  
Call-in Number: 1-866-374-5136  
Participant PIN Code: 60995706#  

Join Skype Meeting  
(Visual Only)

<table>
<thead>
<tr>
<th>Time</th>
<th>Item</th>
<th>Presenter/Leader</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 a.m.*</td>
<td>Welcome and Introductions</td>
<td>Lou McDermott, Chair</td>
<td></td>
</tr>
<tr>
<td>9:05 a.m.</td>
<td>Meeting Overview</td>
<td>David Iseminger, Director Employees &amp; Retirees Benefits (ERB) Division</td>
<td>Information</td>
</tr>
<tr>
<td>9:15 a.m.</td>
<td>Follow up from June 24, 2020 Meeting</td>
<td>David Iseminger, Director ERB Division</td>
<td>Information/Discussion</td>
</tr>
<tr>
<td>9:20 a.m.</td>
<td>Policy Resolution</td>
<td>TAB 3 Rob Parkman, Rules and Policy Coordinator, ERB Division</td>
<td>Action</td>
</tr>
<tr>
<td>9:35 a.m.</td>
<td>COVID-19 Potential Eligibility Impacts Update</td>
<td>TAB 4 Rob Parkman, Rules and Policy Coordinator, ERB Division</td>
<td>Information/Discussion</td>
</tr>
<tr>
<td>9:55 a.m.</td>
<td>Vision Benefit Design Resolution</td>
<td>TAB 5 Lauren Johnston, SEBB Program Procurement Manager, ERB Division</td>
<td>Information/Discussion</td>
</tr>
<tr>
<td>10:05 a.m.</td>
<td>2021 Rates Overview</td>
<td>TAB 6 Tanya, Deuel, ERB Finance Manager Financial Services Division</td>
<td>Information/Discussion</td>
</tr>
<tr>
<td>10:35 a.m.</td>
<td>SEB Board Clinical Update</td>
<td>TAB 7 Emily Transue, MD, MHA Associate Medical Director Clinical Quality and Care Transformation Division</td>
<td>Information/Discussion</td>
</tr>
<tr>
<td>11:05 a.m.</td>
<td>Supplemental Long-Term Disability (LTD) Benefits Options</td>
<td>TAB 8 Jean Bui, Manager, Portfolio, Management, &amp; Monitoring Section Marcia Peterson, Manager, Benefits Strategy &amp; Design Section, ERB Division</td>
<td>Information/Discussion</td>
</tr>
<tr>
<td>11:35 a.m.</td>
<td>2021 SEB Board Meeting Dates</td>
<td>TAB 9 David Iseminger, Director ERB Division</td>
<td>Information/Discussion</td>
</tr>
<tr>
<td>11:40 a.m.</td>
<td>Public Comment</td>
<td></td>
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<tr>
<td>12:00 p.m.</td>
<td>Adjourn</td>
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*All Times Approximate
The School Employees Benefits Board will meet Thursday, July 16, 2020. Due to COVID-19 and out of an abundance of caution, all Board Members will attend this meeting by telephone. All attendees will also attend by telephone.

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.

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

# SEB Board Members

<table>
<thead>
<tr>
<th>Name</th>
<th>Representing</th>
</tr>
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<tbody>
<tr>
<td>Lou McDermott, Deputy Director</td>
<td>Health Care Authority  Chair</td>
</tr>
<tr>
<td>626 8th Ave SE</td>
<td>20 Olympia, WA  98504-2720</td>
</tr>
<tr>
<td>V 360-725-0891</td>
<td><a href="mailto:louis.mcdermott@hca.wa.gov">louis.mcdermott@hca.wa.gov</a></td>
</tr>
<tr>
<td>Vacant</td>
<td>Employee Health Benefits Policy and Administration</td>
</tr>
<tr>
<td>Pete Cutler</td>
<td>Employee Health Benefits Policy and Administration</td>
</tr>
<tr>
<td>7605 Ostrich DR SE</td>
<td>360-789-2787</td>
</tr>
<tr>
<td>Olympia, WA  98513</td>
<td><a href="mailto:pete.cutler@hca.wa.gov">pete.cutler@hca.wa.gov</a></td>
</tr>
<tr>
<td>Dawna Hansen-Murray</td>
<td>Classified Employees</td>
</tr>
<tr>
<td>9932 Jackson ST</td>
<td>360-790-4961</td>
</tr>
<tr>
<td>Yelm, WA  98597</td>
<td><a href="mailto:dawna.hansen-murray@hca.wa.gov">dawna.hansen-murray@hca.wa.gov</a></td>
</tr>
<tr>
<td>Dan Gossett</td>
<td>Certificated Employees</td>
</tr>
<tr>
<td>603 Veralene Way SW</td>
<td>425-737-2983</td>
</tr>
<tr>
<td>Everett, WA  98203</td>
<td><a href="mailto:dan.gossett@hca.wa.gov">dan.gossett@hca.wa.gov</a></td>
</tr>
<tr>
<td>Katy Henry</td>
<td>Certificated Employees</td>
</tr>
<tr>
<td>230 E Montgomery AVE</td>
<td>509-324-2167</td>
</tr>
<tr>
<td>Spokane, WA 99207</td>
<td><a href="mailto:katy.henry@hca.wa.gov">katy.henry@hca.wa.gov</a></td>
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### SEB Board Members

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Terri House</td>
<td>Classified Employees</td>
</tr>
<tr>
<td>Marysville School District</td>
<td>4220 80th ST NE Marysville, WA 98270</td>
</tr>
<tr>
<td>V 360-965-0010</td>
<td><a href="mailto:terri.house@hca.wa.gov">terri.house@hca.wa.gov</a></td>
</tr>
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<thead>
<tr>
<th>Wayne Leonard</th>
<th>Employee Health Benefits Policy and Administration (WASBO)</th>
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<tbody>
<tr>
<td>Assistant Superintendent of Business Services</td>
<td>Mead School District</td>
</tr>
<tr>
<td>608 E 19th Ave</td>
<td>Spokane, WA 99203</td>
</tr>
<tr>
<td>V 509-465-6017</td>
<td><a href="mailto:wayne.leonard@hca.wa.gov">wayne.leonard@hca.wa.gov</a></td>
</tr>
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<table>
<thead>
<tr>
<th>Alison Poulsen</th>
<th>Employee Health Benefits Policy and Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>12515 South Hangman Valley RD</td>
<td>Valleyford, WA 99036</td>
</tr>
<tr>
<td>C 509-499-0482</td>
<td><a href="mailto:alison.poulsen@hca.wa.gov">alison.poulsen@hca.wa.gov</a></td>
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### Legal Counsel

<table>
<thead>
<tr>
<th>Katy Hatfield, Assistant Attorney General</th>
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<tbody>
<tr>
<td>7141 Cleanwater Dr SW</td>
</tr>
<tr>
<td>PO Box 40124</td>
</tr>
<tr>
<td>Olympia, WA 98504-0124</td>
</tr>
<tr>
<td>V 360-586-6561</td>
</tr>
<tr>
<td><a href="mailto:Katy.Hatfield@atg.wa.gov">Katy.Hatfield@atg.wa.gov</a></td>
</tr>
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3/27/20
SEBB MEETING SCHEDULE

2020 School Employees Benefits Board (SEBB) 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 27, 2020 - 9:00 a.m. – 3:30 p.m.
March 5, 2020 - 9:00 a.m. – 3:30 p.m.
April 2, 2020 - 9:00 p.m. – 3:30 – p.m.
May 7, 2020 - 9:00 a.m. – 3:30 p.m.
June 4, 2020 - 9:00 a.m. – 3:30 p.m.
June 24, 2020 - 9:00 a.m. – 3:30 p.m.
July 16, 2020 - 9:00 a.m. – 3:30 p.m.
July 23, 2020 - 9:00 a.m. – 3:30 p.m.
July 30, 2020 - 9:00 a.m. – 3:30 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
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 Board approves 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
SEB Board Resolution

- SEBB 2020-09  Amending SEBB 2018-36
Clarification Needed

At the May 7, 2020 SEB Board Meeting, during public comment, a question was raised about when a full- or part-time teacher moves to a substitute position in the next school year, why their prior teacher work is not included in a two-year look-back eligibility determination?
Discussion and Recommendation

• SEBB 2018-36, the resolution establishing the two-year look back eligibility applies to a school employee returning to the “same type of position”
• The type of work performed by two different positions may be the same or similar, but the positions are not the same if the work pattern is not the same (e.g., consistent schedule compared to an intermittent schedule)
• Working a consistent schedule in a prior school year is not predictive of the amount of work in a future intermittent position
• Based on this, we recommend clarifying the policy to reinforce how it’s currently being administered by SEBB Organizations:
  – School employees working a consistent schedule and school employees working an intermittent schedule are not working in the same type of position for the purpose of determining eligibility using the two-year look back method
Resolved that, SEBB 2018-36 is amended to add the following to the end of the second bullet: To count as the same type of position, both the type of work and the work pattern (consistent schedule compared to an intermittent schedule) must be similar between positions or combinations of positions from one year to the next. SEBB 2018-36 now reads:

A school employee is presumed eligible if they:
– worked at least 630 hours in each of the previous two school years; and
– are returning to the same type of position (teacher, paraeducator, food service worker, custodian, etc.) or combination of positions with the same SEBB Organization. To count as the same type of position, both the type of work and the work pattern (consistent schedule compared to an intermittent schedule) must be similar between positions or combinations of positions from one year to the next.

A SEBB Organization rebuts this presumption by notifying the school employee, in writing, of the specific reasons why the employee is not anticipated to work at least 630 hours in the current school year and how to appeal the eligibility determination.
Eligibility Presumed Based on Hours Worked the Previous To School Years

Example #1
(As presented on November 8, 2018)

Rescind

**Example:** Classified Employee (part-time bus driver)

A part-time bus driver earned eligibility in April during each of the prior two school years and is returning to a part-time bus driver position for the third year.

- Is she eligible for the employer contribution toward SEBB benefits when she returns to work in the same bus driver position for the third school year? Yes, unless the SEBB Organization informs the bus driver, in writing, of the specific reasons why she is not anticipated to work at least 630 hours in the current school year.
Eligibility Presumed Based on Hours Worked the Previous Two School Years

Example #2
(As presented on November 8, 2018)

Rescind

Example: Classified Employee (part-time food service worker)

A part-time food service worker earned eligibility in April during each of the prior two school years and is returning to a part-time food service worker type position for the third year.

- Is he eligible for the employer contribution toward SEBB benefits when he returns to work in the same food service position for the third school year? Yes, unless the SEBB Organization informs the food service worker, in writing, of the specific reasons why he is not anticipated to work at least 630 hours in the current school year.
Eligibility Presumed Based on Hours Worked the Previous Two School Years

Example #1

Example: A bus driver (working an intermittent schedule)

A substitute bus driver working an intermittent schedule earned eligibility in April during each of the prior two school years and is returning to a substitute bus driver position for the third year working an intermittent schedule.

• Is she eligible for the employer contribution toward SEBB benefits when she returns to work in the same bus driver position for the third school year? Yes, unless the SEBB Organization informs the bus driver, in writing, of the specific reasons why she is not anticipated to work at least 630 hours in the current school year.
Eligibility Presumed Based on Hours Worked the Previous Two School Years

Example #3

Example: Paraeducator moving from working an intermittent schedule to working a consistent schedule

A substitute paraeducator working an intermittent schedule earned eligibility in April during each of the prior two school years. He is returning to work for the same SEBB Organization in the upcoming year, but instead of working as a substitute, he has accepted a position to work a consistent schedule of four hours each school day as a paraeducator.

• Is he returning to work in the same type of position? No, he went from an intermittent schedule to consistent schedule.

• Is he eligible for the employer contribution toward SEBB benefits? Yes, he is eligible because he is anticipated to work at least 630 hours in the school year, so the SEBB Organization would not use the two year look back eligibility rule to determine his eligibility.
Eligibility Presumed Based on Hours Worked the Previous Two School Years

Example #4

Example: Teacher moving from working a consistent schedule to working an intermittent schedule

A teacher worked a consistent schedule the previous ten school years and was eligible for benefits. The teacher will be working as a substitute teacher with an intermittent schedule during the upcoming school year at the same SEBB Organization and is not anticipated to work 630 hours.

- Is the teacher returning to work in the same type of position? No, the teacher went from a consistent schedule to an intermittent schedule.
- Is he eligible for the employer contribution toward SEBB benefits when he returns to work an intermittent schedule for the next school year? No, because the teacher is not anticipated to work 630 hours.
Eligibility Presumed Based on Hours Worked the Previous Two School Years

Example #5

Example: Food service worker moving to new SEBB Organization

A substitute food service worker who worked an intermittent schedule earned eligibility in April during each of the prior two school years and is moving to a substitute food service worker type position with an intermittent schedule for the third year at a new SEBB Organization and is not anticipated to work 630 hours.

- Is the food service worker returning to work in the same type of position? Yes.
- Is she eligible for the employer contribution toward SEBB benefits when she returns to work in a food service position at a different SEBB Organization for the third school year? No, because the employee moved to a new SEBB Organization and is not anticipated to work 630 hours.
Eligibility Presumed Based on Hours Worked the Previous Two School Years
Example #6

Example: Teacher retiring and then returning to work
A teacher who worked a consistent schedule for the last twenty years with benefits, is going to retire on June 30, 2021, and she will return to the same SEBB Organization as a substitute teacher who works an intermittent schedule starting on the first day of school in September 2021, and is not anticipated to work 630 hours.

• Is the teacher returning to work in the same type of position? No, she went from a consistent schedule to an intermittent schedule.

• Is she eligible for the employer contribution toward SEBB benefits when she returns to work in the substitute teacher position with an intermittent schedule for the next school year? No, not using the two-year look back rules and she is not anticipated to work 630 hours.
Next Steps

• Issue guidance to SEBB Organizations on this subject
• Incorporate approved resolution into SEBB Program rules in 2021
Questions?

Rob Parkman, Policy and Rules Coordinator
Policy, Rules, and Compliance Section
Employees and Retirees Benefits Division

Rob.Parkman@hca.wa.gov
Appendix

Resolution SEBB 2018-36
As approved / presented to the SEB Board on November 8, 2018
Resolved that, a school employee is presumed eligible if they:

- worked at least 630 hours in each of previous two school years; and
- are returning to the same type of position (teacher, paraeducator, food service worker, custodian, etc.) or combination of positions with the same SEBB Organization.

A SEBB Organization rebuts this presumption by notifying the school employee, in writing, of the specific reasons why the employee is not anticipated to work at least 630 hours in the current school year and how to appeal the eligibility determination.
Example: Classified Employee (part-time bus driver)

A part-time bus driver earned eligibility in April during each of the prior two school years and is returning to a part-time bus driver position for the third year.

- Is she eligible for the employer contribution toward SEBB benefits when she returns to work in the same bus driver position for the third school year? Yes, unless the SEBB Organization informs the bus driver, in writing, of the specific reasons why she is not anticipated to work at least 630 hours in the current school year.
Eligibility Presumed Based on Hours Worked the Previous Two School Years
Example #2
(As presented on November 8, 2018)

**Example:** Classified Employee (part-time food service worker)
A part-time food service worker earned eligibility in April during each of the prior two school years and is returning to a part-time food service worker type position for the third year.

- Is he eligible for the employer contribution toward SEBB benefits when he returns to work in the same food service position for the third school year?  
  Yes, unless the SEBB Organization informs the food service worker, in writing, of the specific reasons why he is not anticipated to work at least 630 hours in the current school year.
TAB 4
Introduction of Proposed Resolution

- SEBB 2020-10  Amending SEBB 2018-36
(6) The school employees' benefits board shall [...] 

d) **Determine the terms and conditions of school employee and dependent eligibility criteria, enrollment policies, and scope of coverage. At a minimum**, the eligibility criteria established by the school employees' benefits board shall address the following:

(i) The effective date of coverage following hire;

(ii) The benefits eligibility criteria, but the school employees' benefits board's criteria shall be **no more restrictive than requiring that a school employee be anticipated to work at least six hundred thirty hours per school year to be benefits eligible**; and

(iii) Coverage for dependents, including criteria for legal spouses; children up to age twenty-six; children of any age with disabilities, mental illness, or intellectual or other developmental disabilities; and state registered domestic partners, as defined in RCW 26.60.020, and others authorized by the legislature; [...]
Background

• At the June 24th Board Meeting, the agency presented information about COVID-19 school closure impacts for the 2019-2020 school year as that school year relates to the two-year look back policy.

• The agency recommended the Board not take action to adjust the current look back policy.
Board Input Received

• Received input from Dan Gossett and Katy Henry on a resolution they would like to sponsor related to the COVID-19 state of emergency and eligibility impacts on the two-year look back eligibility method.

• Although the agency continues to recommend no policy change, HCA provided support to draft and stakeholder a policy proposal to achieve Dan’s and Katy’s policy goals.

• Stakeholder review of a draft resolution began on July 9.
Proposed Resolution SEBB 2020-10
Amending Resolution SEBB 2018-36
Eligibility Presumed Based on Hours Worked the Previous Two School Years

SEBB 2018-36 is amended to add the following to a new third bullet: For purposes of this policy only, a SEBB Organization must count the 2019-2020 school year as having met the 630 hours requirement if the school employee (a) worked at least 630 hours during the 2019-20 school year or (b) worked at least 500 hours between September 1, 2019 and March 16, 2020. SEBB 2018-36 now reads:

A school employee is presumed eligible if they:
– worked at least 630 hours in each of the previous two school years; and
– are returning to the same type of position (teacher, paraeducator, food service worker, custodian, etc.) or combination of positions with the same SEBB Organization. To count as the same type of position, both the type of work and the work pattern (consistent schedule compared to an intermittent schedule) must be similar between positions or combinations of positions from one year to the next. [Text in italics is pending board approval at the July 16, 2020 meeting.]

– For purposes of this policy only, a SEBB Organization must count the 2019-2020 school year as having met the 630 hours requirement if the school employee (a) worked at least 630 hours during the 2019-20 school year or (b) worked at least 500 hours between September 1, 2019 and March 16, 2020.

A SEBB Organization rebuts this presumption by notifying the school employee, in writing, of the specific reasons why the employee is not anticipated to work at least 630 hours in the current school year and how to appeal the eligibility determination.
Discussion

• Thoughts from the Board on this proposal

• The deadline for stakeholder feedback is Monday, July 20
Next Steps

• Incorporate Board feedback into the proposed resolution *(if needed)*

• Provide additional stakeholder comments related to this resolution at next Board Meeting *(if needed)*

• Bring policy resolution to the Board for discussion and any action at the July 23, 2020 Board Meeting *(if needed)*
Questions?

Rob Parkman, Policy and Rules Coordinator
Policy, Rules, and Compliance Section
Employees and Retirees Benefits Division

Rob.Parkman@hca.wa.gov
Appendix

Resolution SEBB 2018-36
As Presented to the SEB Board on July 16, 2020
Resolve that, SEBB 2018-36 is amended to add the following to the end of the second bullet: To count as the same type of position, both the type of work and the work pattern (consistent schedule compared to an intermittent schedule) must be similar between positions or combinations of positions from one year to the next. SEBB 2018-36 now reads:

A school employee is presumed eligible if they:
– worked at least 630 hours in each of the previous two school years; and
– are returning to the same type of position (teacher, paraeducator, food service worker, custodian, etc.) or combination of positions with the same SEBB Organization. To count as the same type of position, both the type of work and the work pattern (consistent schedule compared to an intermittent schedule) must be similar between positions or combinations of positions from one year to the next.

A SEBB Organization rebuts this presumption by notifying the school employee, in writing, of the specific reasons why the employee is not anticipated to work at least 630 hours in the current school year and how to appeal the eligibility determination.
TAB 5
Vision Benefit Design Resolution

Lauren Johnston
SEBB Program Procurement Manager
Employees and Retirees Benefits (ERB) Division
July 16, 2020
Objective

Introduce a resolution for future Board action to proceed with adding a fourth tier to Davis Vision’s Progressive lens and anti-reflective benefits.
2021 Davis Vision Benefit Change

• A fourth coverage tier proposed for Progressive lenses with a $175 copay
  – Member currently pays full retail price

• A fourth coverage tier proposed for anti-reflective coating with an $85 copay
  – Member currently pays full retail price

• No rate increase; rate guarantee remains in effect
Proposed Resolution SEBB 2020-11
Davis Vision – Benefit Change

The SEB Board endorses Davis Vision’s addition, with no rate increase to the SEBB Program, of a fourth coverage tier to the:

• Progressive lens benefit for which SEBB members will have a $175 copay

• Anti-reflective coating benefit for which SEBB Program members will have an $85 copay
Next Steps

- Present resolution on July 23 for vote
- Stakeholdering is not anticipated at this time for this resolution because it is a positive change with no additional costs to members or the Program.
Questions?

Lauren Johnston
SEBB Program Procurement Manager
ERB Division
Lauren.johnston@hca.wa.gov
2021 Rates Overview

Tanya Deuel
ERB Finance Manager
Financial Services Division
July 16, 2020
Overview

• Employee Premium Contributions
  – Determining Employee Premiums (Sample Illustration)
  – Medical

• Employer Contributions
  – Dental, Vision, Basic Life and AD&D, and Basic Long-Term Disability

• Supplemental Benefits
  – Supplemental Life and AD&D, and Supplemental Long-Term Disability

• Proposed Resolutions
Employee Premium Contributions: Medical
Employer Medical Contribution (EMC)

Sample Illustration

**UMP Achieve 2 Bid Rate**

\[ \text{EMP} \times 85\% = \text{Employee Contribution} \]

- **EMP** $588
- **($500)**
- **$88**
Determining Employee Premiums
Sample Illustration

Plan bid rates

- EMC

Employee contribution

<table>
<thead>
<tr>
<th>Plan</th>
<th>Bid Rate</th>
<th>Employee Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>$700</td>
<td>$200</td>
</tr>
<tr>
<td>B</td>
<td>$650</td>
<td>($500)</td>
</tr>
<tr>
<td>C</td>
<td>$600</td>
<td>$100</td>
</tr>
</tbody>
</table>

Washington State
Health Care Authority
SCHOOL EMPLOYEES BENEFITS BOARD
### Determining Employee Premiums by Tier

#### Sample Illustration

<table>
<thead>
<tr>
<th>Plan</th>
<th>Tier 1</th>
<th>Tier 2</th>
<th>Tier 3</th>
<th>Tier 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee contribution</td>
<td>1</td>
<td>2</td>
<td>1.75</td>
<td>3</td>
</tr>
<tr>
<td>$</td>
<td>$200</td>
<td>$400</td>
<td>$350</td>
<td>$600</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tier</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1</td>
<td>$200</td>
<td>$150</td>
<td>$100</td>
</tr>
<tr>
<td>Tier 2</td>
<td>$400</td>
<td>$300</td>
<td>$200</td>
</tr>
<tr>
<td>Tier 3</td>
<td>$350</td>
<td>$263</td>
<td>$175</td>
</tr>
<tr>
<td>Tier 4</td>
<td>$600</td>
<td>$450</td>
<td>$300</td>
</tr>
</tbody>
</table>

*Tiers 3 and 4 do not change when you have one child or multiple children covered.*
## Employee / Employer Premium Contributions

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Employee Contribution</th>
<th>EMC (Employer Medical Contribution)</th>
<th>Total Composite Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser Permanente NW 1</td>
<td>$39</td>
<td>$555</td>
<td>$594</td>
</tr>
<tr>
<td>Kaiser Permanente NW 2</td>
<td>$52</td>
<td>$555</td>
<td>$607</td>
</tr>
<tr>
<td>Kaiser Permanente NW 3</td>
<td>$119</td>
<td>$555</td>
<td>$674</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 1</td>
<td>$16</td>
<td>$555</td>
<td>$571</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 2</td>
<td>$21</td>
<td>$555</td>
<td>$576</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 3</td>
<td>$91</td>
<td>$555</td>
<td>$646</td>
</tr>
<tr>
<td>Kaiser Permanente WA SoundChoice</td>
<td>$51</td>
<td>$555</td>
<td>$606</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 1</td>
<td>$66</td>
<td>$555</td>
<td>$621</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 2</td>
<td>$97</td>
<td>$555</td>
<td>$652</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 3</td>
<td>$146</td>
<td>$555</td>
<td>$701</td>
</tr>
</tbody>
</table>

- EMC is on a Per Adult Unit Per Month (PAUPM) basis
- Rounded to the nearest dollar
## Employee / Employer Premium Contributions (cont.)

<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Proposed 2021 Employee Contribution (Single Subscriber)</th>
<th>EMC (Employer Medical Contribution)</th>
<th>Proposed 2021 Total Composite Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premera Blue Cross High PPO</td>
<td>$76</td>
<td>$555</td>
<td>$631</td>
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<tr>
<td>Premera Blue Cross Peak Care EPO</td>
<td>$37</td>
<td>$555</td>
<td>$592</td>
</tr>
<tr>
<td>Premera Blue Cross Standard PPO</td>
<td>$28</td>
<td>$555</td>
<td>$583</td>
</tr>
<tr>
<td>Uniform Medical Plan (UMP) Achieve 1</td>
<td>$33</td>
<td>$555</td>
<td>$588</td>
</tr>
<tr>
<td>UMP Achieve 2</td>
<td>$98</td>
<td>$555</td>
<td>$653</td>
</tr>
<tr>
<td>UMP High Deductible (with a health savings account)</td>
<td>$25</td>
<td>$555</td>
<td>$580</td>
</tr>
<tr>
<td>UMP Plus</td>
<td>$68</td>
<td>$555</td>
<td>$623</td>
</tr>
</tbody>
</table>

- EMC is on a Per Adult Unit Per Month (PAUPM) basis
- Total Composite Rate for the SEBB UMP High Deductible includes an employer HSA contribution of $375 per year for Tier 1 and $750 per year for all other tiers
- Rounded to the nearest dollar
# Employee Premium Contributions

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>2020</th>
<th>Proposed 2021</th>
<th>%</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser Permanente NW 1</td>
<td>$28</td>
<td>$39</td>
<td>39.3%</td>
<td>$11</td>
</tr>
<tr>
<td>Kaiser Permanente NW 2</td>
<td>$41</td>
<td>$52</td>
<td>26.8%</td>
<td>$11</td>
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<tr>
<td>Kaiser Permanente NW 3</td>
<td>$106</td>
<td>$119</td>
<td>12.3%</td>
<td>$13</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 1</td>
<td>$13</td>
<td>$16</td>
<td>23.1%</td>
<td>$3</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 2</td>
<td>$19</td>
<td>$21</td>
<td>10.5%</td>
<td>$2</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 3</td>
<td>$89</td>
<td>$91</td>
<td>2.2%</td>
<td>$2</td>
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<tr>
<td>Kaiser Permanente WA SoundChoice</td>
<td>$49</td>
<td>$51</td>
<td>4.1%</td>
<td>$2</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 1</td>
<td>$39</td>
<td>$66</td>
<td>69.2%</td>
<td>$27</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 2</td>
<td>$69</td>
<td>$97</td>
<td>40.6%</td>
<td>$28</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 3</td>
<td>$116</td>
<td>$146</td>
<td>25.9%</td>
<td>$30</td>
</tr>
</tbody>
</table>
## Employee Premium Contributions (cont.)

<table>
<thead>
<tr>
<th>Plan</th>
<th>2020</th>
<th>Proposed 2021</th>
<th>%</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premera Blue Cross High PPO</td>
<td>$70</td>
<td>$76</td>
<td>8.6%</td>
<td>$6</td>
</tr>
<tr>
<td>Premera Blue Cross Peak Care EPO</td>
<td>$31</td>
<td>$37</td>
<td>19.4%</td>
<td>$6</td>
</tr>
<tr>
<td>Premera Blue Cross Standard PPO</td>
<td>$22</td>
<td>$28</td>
<td>27.3%</td>
<td>$6</td>
</tr>
<tr>
<td>Uniform Medical Plan (UMP) Achieve 1</td>
<td>$33</td>
<td>$33</td>
<td>0.0%</td>
<td>$0</td>
</tr>
<tr>
<td>UMP Achieve 2</td>
<td>$98</td>
<td>$98</td>
<td>0.0%</td>
<td>$0</td>
</tr>
<tr>
<td>UMP High Deductible (with a health savings account)</td>
<td>$25</td>
<td>$25</td>
<td>0.0%</td>
<td>$0</td>
</tr>
<tr>
<td>UMP Plus</td>
<td>$68</td>
<td>$68</td>
<td>0.0%</td>
<td>$0</td>
</tr>
</tbody>
</table>
# Employee Contribution by Tier

<table>
<thead>
<tr>
<th>Tier Ratios</th>
<th>Subscriber</th>
<th>Subscriber &amp; Spouse/SRDP*</th>
<th>Subscriber &amp; Child(ren)</th>
<th>Subscriber, Spouse/SRDP*, and Child(ren)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.00</td>
<td>2.00</td>
<td>1.75</td>
<td>3.00</td>
</tr>
<tr>
<td>Kaiser Permanente NW 1</td>
<td>$39</td>
<td>$78</td>
<td>$68</td>
<td>$117</td>
</tr>
<tr>
<td>Kaiser Permanente NW 2</td>
<td>$52</td>
<td>$104</td>
<td>$91</td>
<td>$156</td>
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<tr>
<td>Kaiser Permanente NW 3</td>
<td>$119</td>
<td>$238</td>
<td>$208</td>
<td>$357</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 1</td>
<td>$16</td>
<td>$32</td>
<td>$28</td>
<td>$48</td>
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<tr>
<td>Kaiser Permanente WA Core 2</td>
<td>$21</td>
<td>$42</td>
<td>$37</td>
<td>$63</td>
</tr>
<tr>
<td>Kaiser Permanente WA Core 3</td>
<td>$91</td>
<td>$182</td>
<td>$159</td>
<td>$273</td>
</tr>
<tr>
<td>Kaiser Permanente WA SoundChoice</td>
<td>$51</td>
<td>$102</td>
<td>$89</td>
<td>$153</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 1</td>
<td>$66</td>
<td>$132</td>
<td>$116</td>
<td>$198</td>
</tr>
<tr>
<td>Kaiser Permanente WA Options Access PPO 2</td>
<td>$97</td>
<td>$194</td>
<td>$170</td>
<td>$291</td>
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<tr>
<td>Kaiser Permanente WA Options Access PPO 3</td>
<td>$146</td>
<td>$292</td>
<td>$256</td>
<td>$438</td>
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</tbody>
</table>

- State-Registered Domestic Partner (SRDP)
- Rounded to the nearest dollar
Employee Contribution by Tier (cont.)

<table>
<thead>
<tr>
<th>Tier Ratios</th>
<th>Subscriber</th>
<th>Subscriber &amp; Spouse/SRDP*</th>
<th>Subscriber &amp; Child(ren)</th>
<th>Subscriber, Spouse/SRDP*, and Child(ren)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premera Blue Cross High PPO</td>
<td>$76</td>
<td>$152</td>
<td>$133</td>
<td>$228</td>
</tr>
<tr>
<td>Premera Blue Cross Peak Care EPO</td>
<td>$37</td>
<td>$74</td>
<td>$65</td>
<td>$111</td>
</tr>
<tr>
<td>Premera Blue Cross Standard PPO</td>
<td>$28</td>
<td>$56</td>
<td>$49</td>
<td>$84</td>
</tr>
<tr>
<td>Uniform Medical Plan (UMP) Achieve 1</td>
<td>$33</td>
<td>$66</td>
<td>$58</td>
<td>$99</td>
</tr>
<tr>
<td>UMP Achieve 2</td>
<td>$98</td>
<td>$196</td>
<td>$172</td>
<td>$294</td>
</tr>
<tr>
<td>UMP High Deductible (with a health savings account)</td>
<td>$25</td>
<td>$50</td>
<td>$44</td>
<td>$75</td>
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<tr>
<td>UMP Plus</td>
<td>$68</td>
<td>$136</td>
<td>$119</td>
<td>$204</td>
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</tbody>
</table>

Subscribers may be subject to the following surcharges

<table>
<thead>
<tr>
<th></th>
<th>Subscriber</th>
<th>Subscriber &amp; Spouse/SRDP*</th>
<th>Subscriber &amp; Child(ren)</th>
<th>Subscriber, Spouse/SRDP*, and Child(ren)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco Surcharge</td>
<td>$25</td>
<td>$25</td>
<td>$25</td>
<td>$25</td>
</tr>
<tr>
<td>Spousal Surcharge</td>
<td>N/A</td>
<td>$50</td>
<td>N/A</td>
<td>$50</td>
</tr>
</tbody>
</table>

- State-Registered Domestic Partner (SRDP)
- Total Composite Rate for the SEBB UMP High Deductible includes an employer HSA contribution of $375 per year for Tier 1 and $750 per year for all other tiers
- Rounded to the nearest dollar
Employer Contributions:
Dental, Vision, Basic Life and AD&D, and Basic Long-Term Disability
## Dental Premiums

<table>
<thead>
<tr>
<th></th>
<th>Subscriber</th>
<th>Subscriber &amp; Spouse</th>
<th>Subscriber &amp; Child(ren)</th>
<th>Full Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>DeltaCare</td>
<td>$ 41.33</td>
<td>$ 82.66</td>
<td>$ 82.66</td>
<td>$ 123.99</td>
</tr>
<tr>
<td>Uniform Dental Plan</td>
<td>$ 47.63</td>
<td>$ 95.26</td>
<td>$ 95.26</td>
<td>$ 142.89</td>
</tr>
<tr>
<td>Willamette</td>
<td>$ 49.90</td>
<td>$ 99.80</td>
<td>$ 99.80</td>
<td>$ 149.70</td>
</tr>
</tbody>
</table>

- Employee premiums are paid 100% by the employer for all tiers.
## Vision Premiums

<table>
<thead>
<tr>
<th></th>
<th>Subscriber Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Davis Vision</td>
<td>$ 4.36</td>
</tr>
<tr>
<td>EyeMed</td>
<td>$ 5.96</td>
</tr>
<tr>
<td>MetLife</td>
<td>$ 6.66</td>
</tr>
</tbody>
</table>

- Employee premiums are paid 100% by the employer for all tiers
Basic Life/AD&D and Basic Long-Term Disability

<table>
<thead>
<tr>
<th>Subscriber Rate</th>
<th>Life and AD&amp;D</th>
<th>LTD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 3.96</td>
<td>$ 2.10</td>
</tr>
</tbody>
</table>

- Employee premiums are paid 100% by the employer
Proposed Resolutions
Proposed Resolution SEBB 2020-12
KPNW Medical Premiums

The SEB Board endorses the Kaiser Foundation Health Plan of the Northwest employee premiums.
Proposed Resolution SEBB 2020-13
KPWA Medical Premiums

The SEB Board endorses the Kaiser Foundation Health Plan of Washington employee premiums.
Proposed Resolution SEBB 2020-14
KPWAO Medical Premiums

The SEB Board endorses the Kaiser Foundation Health Plan of Washington Options, Inc. employee premiums.
Proposed Resolution SEBB 2020-15
Premera Medical Premiums

The SEB Board endorses the Premera employee premiums.
Proposed Resolution SEBB 2020-16
UMP Medical Premiums

The SEB Board endorses the Uniform Medical Plan employee premiums.
Next Steps

We will ask the Board to take action on these premium resolutions at the July 23, 2020 meeting.
Questions?

Tanya Deuel, ERB Finance Manager
Financial Services Division
Tanya.Deuel@hca.wa.gov
TAB 7
SEB Board Clinical Update

Emily Transue, MD, MHA, FACP
Medical Director for ERB
July 16, 2020
Roles and Opportunities

• Improving care, experience, and value for PEBB Program and SEBB Program patients

• Market transformation: using HCA’s influence and market share to improve health care for all Washingtonians
Some Areas of Focus

- Telehealth
- Primary Care
- Shared Decision Making
- Public Option/Cascade Care
Telehealth
Telehealth

• Telehealth has been slowly expanding in recent years
  – Access for patients in rural areas
  – Convenience for urgent/minor issues
  – Behavioral health

• Limiting factors
  – Patient and provider comfort
  – Billing processes
  – Privacy
  – Limited physical exam
Telehealth (*cont.*)

- COVID-19 greatly accelerated existing trends toward increased telehealth use
  - Safety: Avoid exposure risks of in-person care
  - Limit PPE use and provider exposure
  - Increased awareness that virtual care can meet needs well in many situations

- Strong incentive to address/overcome barriers for providers, patients, and payers
Telehealth: COVID-19 Driven Changes

• Payment for virtual visits (video or phone) at parity with in-person visits
• Increased use of specialized telehealth platforms/vendors as well as traditional providers doing virtual care
• Temporary relaxation of some requirements (such as HIPAA-compliant platforms)
Telehealth: Post-COVID Future

• Greatly increased telehealth is expected to continue
• Active discussions of when virtual care is appropriate vs when an in-person visit is preferred
  – When is a detailed physical exam needed?
• Evolving patient and provider preferences
Primary Care
Primary Care: What should it look like?

• “Primary Care Medical Home” (PCMH) and similar models
• Whole-person approach, first contact for all needs
• “Quarterback” directing and coordinating care, communicating with specialists if needed (not a “gatekeeper”)
• Prevention and health maintenance, chronic disease management, acute care management
• Proactive, team-based approach to care
Challenges in Primary Care

- Workforce: Longer hours for lower pay, more stress than many specialties
- Not enough time to spend with patients
- Inadequate funding to staff primary care team
- Positive changes in health reform (quality measurement/improvement, cost containment, increased out-of-office contact) have often landed on the shoulders of primary care without compensation
Primary Care Associated with Higher Quality...

EXHIBIT 8
Relationship Between Provider Workforce And Quality: General Practitioners Per 10,000 And Quality Rank In 2000

Quality rank

1

26

51

General practitioners per 10,000

SOURCES: Medicare claims data; and Area Resource File, 2003.

NOTES: For quality ranking, smaller values equal higher quality. Total physicians held constant.

Source: Baicker & Chandra, Health Affairs, April 7, 2004

Slides in this section adapted from Chris Koller, Milbank Fund, and from Lisa M. Letourneau’s presentation at Richard Engel Primary Care Symposium, 3/2019
...And Lower Costs

EXHIBIT 9
Relationship Between Provider Workforce And Medicare Spending: General Practitioners Per 10,000 And Spending Per Beneficiary In 2000

SOURCES: Medicare claims data; and Area Resource File, 2003.
NOTE: Total physicians held constant.
Source: Baicker & Chandra, Health Affairs, April 7, 2004
But... A Fundamental Disconnect

- Hospital Care
- All Other Physician and Professional Services
- Prescription Drugs and Other Medical Nondurables
- Nursing Home Care
- Dental Services
- Home Health Care
- Medical Durables
- Other Health, Residential, and Personal Care

Source: CMS Actuary. All Payments
Primary Care
Washington and HCA Efforts

• Measuring how much is spent on primary care
  – Office of Financial Management 2019
  – Reporting requirements in HCA contracts
  – Future directions: Possible legislation to require spending levels

• Bree Collaborative
  – Workgroup on Primary Care in 2020
  – Addressing primary care spend and other issues
  – Chaired by Judy Zerzan, MD, HCA CMO
WA State Primary Care Program

• HCA is working with primary care and health plan stakeholders to develop a Washington primary care model

• WA Primary Care Program may include a new payment model, workforce changes, health IT strategy, accreditation

• HCA has been convening primary care providers and stakeholders since early 2019; additional meetings scheduled through fall 2020
Shared Decision Making
What is Shared Decision Making?

A process in which clinicians and patients work together to make decisions and select tests, treatments, and care plans based on clinical evidence that balances risks and expected outcomes with patient preferences and values.

- National Learning Consortium HealthIT.gov, 2013
Don’t providers already do this?

• At first glance, most providers say “Yes”
• Good shared decision making (SDM) involves specific skills
  – Reviewing all appropriate options, including risks and benefits
  – Eliciting values
  – Helping the patient think about the implications of the choice in light of their options
  – Sharing control with the patient
What *is/isn’t* Shared Decision Making?

More than one clinically appropriate treatment option,
Preference sensitive,
(Individualized Decisions)

Evidence For
(encourage the intervention for all or almost all)
- e.g., MMR vaccine,
  Setting a broken bone

Evidence Against
(Do not offer the intervention)
- e.g., Antibiotics for a common cold

Shared Decision Making
- e.g., Hip or knee osteoarthrosis,
  Advance care planning, prostate-specific antigen test
Health Care Authority Role in SDM

- Certification of Patient Decision Aids (PDAs)
  - Tools to educate patients and elucidate values
- Promotion of SDM and PDA use in HCA’s role as purchaser (Medicaid, PEBB, SEBB)
- Providing training and support to providers
- Convening statewide discussion around spread and sustainability
Bree SDM Workgroup 2019

• Focus on increasing implementation of SDM statewide
• Endorsed frameworks for provider implementation
• Defined roles for different stakeholders
  – Providers, patients/community, health plans, employers, etc.
• Identified high-priority clinical focus areas
Bree SDM: Areas of Focus

• Surgical/Procedural:
  – Knee and Hip Osteoarthritis*
  – Spine Surgery*
  – Abnormal Uterine Bleeding
  – Trial of Labor After Cesarean Section*

• Advance Care Planning*

• Screening:
  – Prostate-Specific Antigen Testing
  – Breast Cancer Screening
  – Colon Cancer Screening

• Behavioral health:
  – Depression Treatment
  – Attention Deficit Hyperactivity Disorder Treatment
  – Opioid Use Disorder Treatment

*HCA certified PDAs available
Shared Decision Making

• Next steps/future efforts
  – Summit Fall 2020
  – Future contract requirements
  – Support for implementation efforts
Bree Collaborative
Bree Collaborative Update

• 2020 Topics:
  – Primary Care
  – Colon cancer screening
  – Oncology treatment and inpatient care
  – Reproductive health

• Possible 2021 Topics:
  – Telehealth
  – Cervical Cancer screening
  – Opioid use in the elderly
  – Re-review of total joint bundles
Cascade Care/Public Option
Cascade Care (Senate Bill 5526) Three Main Parts

- **Standard Plans**
  - Lower deductibles, increase cost-sharing transparency, increase pre-deductible services

- **Public Option Plans**
  - Standard plans that also include additional quality and value requirements

- **Subsidy Study**
  - Create a proposal for premium subsidies through HBE for individuals up to 500% federal poverty level (FPL) (currently up to 400% under Affordable Care Act)
Multi-agency Joint Effort

Health Care Authority, Health Benefit Exchange, and the Office of the Insurance Commissioner

• Interdependent parts and phases of the development
• Joint workgroup, multiple sub-groups, and multiple stakeholder groups
Develop RFP criteria including value, quality, care management, and reimbursement rate requirements, in consultation with HBE

Participate in standard plan stakeholder group

HCA procurement process

Review RFP submissions and negotiate contracts for 2021 public option plans
Quality, Value, and Affordability Standards for Cascade Care

• Affordability: caps/floors for provider payment
  – Overall cap: < 160% of Medicare
  – Primary care physicians > 135% of Medicare
  – Rural critical access hospitals/sole community hospitals > 101% of Medicare

• Quality and value participation requirements:
  – Bree recommendations and health technology assessment implementation
  – Value-based purchasing (VBP), focus on maintaining and improving health
Guiding Principles for Program Development

• Increase affordability and value, while aligning with state purchasing standards

• Success is dependent on carrier and provider participation; minimize administrative barriers

• Program development and refinement will be a continual process; initial development will lay the groundwork for phasing in additional requirements/standards
Questions?

Emily Transue, MD, MHA, FACP
Associate Medical Director
emily.transue@hca.wa.gov
TAB 8
Supplemental Long-Term Disability (LTD) Benefits Options

Jean Bui, Manager
Portfolio Management & Monitoring Section
Employees & Retirees Benefits Division
July 16, 2020

Marcia Peterson, Manager
Benefits Strategy & Design Section
Employees & Retirees Benefits Division
Overview

• Basic LTD benefit is inadequate to cover needs of SEBB Program subscribers

• Low likelihood of improving the Basic LTD benefit soon
  o No additional funding received for 2019-2021 Biennium
  o Significant fiscal challenges through fiscal year 2023

• Supplemental benefit is available but only 18.4% of SEBB Program subscribers have enrolled

• How to increase the percentage who enroll in supplemental?
Three Types of Group Disability Coverage

**Short-term covers an employee’s salary**

- During a short term disability
- Prevents the employee from being able to work *their usual job*
- Includes events such as a pregnancy, accidental injuries and illnesses.
- Replaced by the Washington State Paid Family and Medical Leave Program—12 weeks off with pay

**Long-term covers an employee’s salary**

- During a longer term disability
- Employee is unable to perform *with reasonable continuity* the duties of their job
- Sickness, injury or pregnancy during the benefit waiting period and the first 24 months for which LTD benefits are paid
Three Types of Group Disability Coverage (cont.)

Social Security Administration

- Inability to engage in any substantial gainful activity
- Any medically determinable physical or mental impairment
- Expected to result in death or to last for at least 12 months

These three types of disability benefits, along with an employee’s sick leave and vacation leave, comprise a form of income protection for employees facing a disability making them unable to work.
Nationwide Disability Facts

• 1 in 4 people now age 20 will experience a disability during their career*

• Only about 20% of people have disability insurance**

• Approximately 50% of adults could not cover their salary for three months ***

• 40% of adults don’t have enough cash on hand to cover a $400 emergency expense***

* Social Security Administration

** LIMRA, 2019

*** Federal Reserve Board, 2018
Factors in Whether to Select Disability Insurance

- Product is not well understood
  - Do not understand what is considered a disability
  - Product descriptions aren’t relatable enough
- Unlikely to understand the incidence of disability
- LTD products are often complex and hard to understand
  - Likely to default to no choice at all, especially if the value is questionable; or
  - Relies on the employer selection as their default option. In the case of SEBB Program, that would be the Basic benefit of $400 maximum monthly benefit.

Source: Delbase, 2012
## Current SEBB Program LTD Benefit

<table>
<thead>
<tr>
<th>Basic</th>
<th></th>
<th>Supplemental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Covers 60% of the first $667 of monthly income</td>
<td></td>
<td>Covers up to 60% of the first $16,667 of monthly income</td>
</tr>
<tr>
<td>$100 up to a maximum benefit of $400/month</td>
<td></td>
<td>$100 up to a maximum benefit of $10,000/month</td>
</tr>
<tr>
<td>100% <em>Employer</em> paid benefit</td>
<td></td>
<td>100% <em>Employee</em> paid benefit</td>
</tr>
</tbody>
</table>
Options to Improve Disability Coverage for SEBB Program Subscribers

• Continue to request funding for increasing the basic benefit to a maximum monthly benefit of $1,500
  o Estimated annual cost to the state for SEBB = approximately $ 7.5 Million

• Increase percentage who opt-in to the supplemental benefit
  o Improve communication regarding the value (for new hires)
  o In PEBB, offered a one-time enrollment period in March 2019 for the supplemental plan
    ▪ We went from 28% to 34% participation – similar to industry experience

• Use automatic enrollment with option to opt-out of the benefit
  o New hires
  o Existing SEBB Program subscribers who are not enrolled in supplemental LTD
Proposing An Opt-out Benefit for LTD Supplemental

• Unlikely to get additional funding to improve the Basic benefit
• Improving communications regarding this benefit doesn’t tend to result in significant increases in enrollment
• Opt-out benefit is proposed as a way to increase enrollment in supplemental benefit and ensure more subscribers have more comprehensive coverage
Automatic Enrollment With Opt-out

- Behavioral economics studies how people make decisions
  - Policy makers use behavioral economics to design programs to nudge people toward making good choices
  - One way is to automatically enroll people in a benefit or program, but give them the option to opt-out
  - Has been shown to increase the percentage of people who take advantage of their employer benefits
  - People tend to stick with the default option
Automatic Enrollment With Opt-out (cont.)

• Could mirror a similar approach recently used by Department of Retirement Systems (DRS) to encourage newly hired full-time state employees to take advantage of the State’s Deferred Compensation Program (DCP)
  
  o 30 days after being hired, employees receive a notification letter re: DCP enrollment and they have 30 days to opt-out
  
  o DRS has maintained a 90% retention rate since implementing this auto enroll approach in 2017
Possible Opt-out Supplemental LTD (Existing Employees)

- Starting January 1, 2022
- All SEBB Program subscribers who have not already enrolled in supplemental LTD coverage would receive a letter in fall 2021 letting them know they are being auto-enrolled in Supplemental LTD
- Subscribers could opt-out, but would be subject to Evidence of Insurability (EOI) if they choose to re-enroll later
- With first payroll deduction in January 2022
Possible Opt-out Supplemental LTD (New Hires)

• Newly hired SEBB Program subscribers *would be automatically enrolled*

• New hires would receive a letter letting them know they have their 31 day new hire period to opt-out
  
  o Coverage would be effective the first calendar day of the following month
    
    ▪ Similar to all other benefits election

• Subscribers could opt-out, but would be subject to Evidence of Insurability (EOI) if they choose to re-enroll later
Questions?

Jean Bui, Manager  
Portfolio Management & Monitoring Section  
Jean.Bui@hca.wa.gov

Marcia Peterson, Manager  
Benefits Strategy & Design Section  
Marcia.peterson@hca.wa.gov
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