# **Multiple Agency Fiscal Note Summary**

Bill Number: 5696 SB Title: PEBB participation/local entities

## **Estimated Cash Receipts**

NONE

Agency Name	2023	3-25	2025	-27	2027-29		
	GF- State	Total	GF- State	Total	GF- State	Total	
Local Gov. Courts							
Loc School dist-SPI							
Local Gov. Other	No fiscal impac	t					
Local Gov. Total							

## **Estimated Operating Expenditures**

Agency Name		20	023-25		2025-27				2027-29			
	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total
Washington State	.0	0	0	78,000	.0	0	0	0	.0	0	0	0
Health Care												
Authority												
Washington State	In addit	ion to the estin	nate above,ther	e are addition	al indeter	rminate costs	and/or savings.	. Please see in	dividual f	scal note.		
Health Care												
Authority												
Total \$	0.0	0	0	78,000	0.0	0	0	0	0.0	0	0	0

Agency Name	2023-25				2025-27			2027-29		
	FTEs	GF-State	Total	FTEs	GF-State	Total	FTEs	GF-State	Total	
Local Gov. Courts										
Loc School dist-SPI										
Local Gov. Other	No fis	cal impact								
Local Gov. Total										

## **Estimated Capital Budget Expenditures**

Agency Name	2023-25				2025-27			2027-29		
	FTEs	Bonds	Total	FTEs	Bonds	Total	FTEs	Bonds	Total	
Washington State Health Care Authority	.0	0	0	.0	0	0	.0	0	0	
Total \$	0.0	0	0	0.0	0	0	0.0	0	0	

Agency Name	2023-25				2025-27			2027-29		
	FTEs	GF-State	Total	FTEs	GF-State	Total	FTEs	GF-State	Total	
Local Gov. Courts										
Loc School dist-SPI										
Local Gov. Other	No fis	cal impact								
Local Gov. Total										

# **Estimated Capital Budget Breakout**

NONE

Prepared by: Marcus Ehrlander, OFM	Phone:	Date Published:
	(360) 489-4327	Revised 2/17/2023

# **Individual State Agency Fiscal Note**

Bill Number: 5696 S	B Title:	Title: PEBB participation/local entities				<b>Agency:</b> 107-Washington State Health Care Authority				
Part I: Estimates	•			•						
No Fiscal Impact	t									
<b>Estimated Cash Receip</b>	ts to:									
NONE										
<b>Estimated Operating E</b>	xpenditures from:									
		FY 2024	FY 2025	2023-25	2025-2	27 2	2027-29			
Account St Health Care Authori	ty Admin	78,000	0	78,0	20	0	0			
Acct-State 418-	•	70,000	U	70,0	50	١	U			
	Total \$	78,000	0	78,0	00	0	0			
In addition to	the estimates above, t	there are additional in	ndeterminate costs	and/or saving	s. Please see dis	cussion.				
The cash receipts and e and alternate ranges (if Check applicable boxe	appropriate), are expla	uined in Part II.	r most likely fiscal in	npact. Factors i	impacting the prec	ision of these	e estimates,			
If fiscal impact is	greater than \$50,000		current biennium	or in subseque	nt biennia, comi	olete entire f	riscal note			
form Parts I-V.	<i>-</i>	ı J		1	, 1					
If fiscal impact is	less than \$50,000 per	r fiscal year in the cu	rrent biennium or	in subsequent	biennia, comple	te this page of	only (Part I).			
Capital budget im	pact, complete Part Γ	V.								
Requires new rule	e making, complete Pa	art V.								
Legislative Contact:	Amanda Cecil		F	Phone: 360-786	5-7460 Da	nte: 02/04/2	.023			
Agency Preparation:	Kate LaBelle		F	Phone: 360-725	5-1918 Da	ite: 02/17/2	2023			
Agency Approval:	Tanya Deuel		F	Phone: 360-725	5-0908 Da	ite: 02/17/2	2023			
OFM Review:	Marcus Ehrlander		l I	Phone: (360) 48	39-4327 Da	ite: 02/17/2	2023			

## **Part II: Narrative Explanation**

#### II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

See attached narrative.

#### II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

See attached narrative.

#### II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

See attached narrative.

## Part III: Expenditure Detail

## III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
418-1	St Health Care Authority Admin Acct	State	78,000	0	78,000	0	0
		Total \$	78,000	0	78,000	0	0

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

#### III. B - Expenditures by Object Or Purpose

<u> </u>	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years					
A-Salaries and Wages					
B-Employee Benefits					
C-Professional Service Contracts	78,000		78,000		
E-Goods and Other Services					
G-Travel					
J-Capital Outlays					
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services					
P-Debt Service					
S-Interagency Reimbursements					
T-Intra-Agency Reimbursements					
9-					
Total \$	78,000	0	78,000	0	(

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

III. C - Operating FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part I and Part IIIA.

NONE

## III. D - Expenditures By Program (optional)

**NONE** 

## Part IV: Capital Budget Impact

## IV. A - Capital Budget Expenditures

**NONE** 

## IV. B - Expenditures by Object Or Purpose

NONE

## IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

**NONE** 

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

**NONE** 

## Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

## **HCA Fiscal Note**

Bill Number: 5696 SB HCA Request #: 23-115-02 Revised

## **Part II: Narrative Explanation**

## II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

<u>Section 1</u> of this bill amends RCW 41.05.080 (Participation in insurance plans and contracts—Retired, disabled, or separated employees—Certain surviving spouses, state registered domestic partners, and dependent children) to allow retired employees of counties and municipalities to participate in insurance plans and contracts after retirement or disablement.

This bill allows retired or disabled employees of a county, municipality or other political subdivision whose contractual agreement with the Health Care Authority (HCA) is terminated to continue participation. This bill states that these retirees and disabled employees, as well as their surviving spouses or state registered domestic partners, of previously contracted counties and municipalities are not eligible to receive any subsidy provided under RCW 41.05.085 (Retired state employee and retired or disabled school employee health insurance subsidy).

<u>Section 2</u> of this bill allows a retired or disabled employee of a county, municipality, or other political subdivision, whose Public Employee Benefits Board (PEBB) retiree insurance coverage was terminated due to a county, municipality, or other political subdivision terminating the contractual agreement with HCA on or before January 1, 2023, to return and participate in insurance plans and contracts. The retired or disabled employee of a county, municipality, or other political subdivision must notify HCA in writing by December 31, 2023, and participation will begin on the first day of the month following the date HCA receives the written notice.

## II. B - Cash Receipts Impact

None

## II. C - Expenditures

# Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) Programs

There are both known and unknown costs because of changes required by this bill. HCA estimates one-time costs of \$78,000 in fiscal year 2024 to implement the changes outlined in this bill.

<u>Section 1</u> of this bill allows retired or disabled employees of a county, municipality or other political subdivision whose contractual agreement with the Health Care Authority (HCA) is terminated to continue participation in insurance plans and contracts. These retired or disabled employees, as well as their surviving spouses or state registered domestic partners, of county, municipality or other political subdivision are not eligible for any subsidy provided under RCW 41.05.085.

<u>Section 2</u> of this bill states that retired or disabled employees whose benefits were terminated before January 1, 2023 as a result of their counties and municipalities employer contract with the HCA may be eligible to enroll and coverage if they notify the HCA by December 31, 2023. Coverage will begin on the first day of the month following the date of notice.

Explicit Subsidy: Because this bill states that these members, as well as their surviving spouses or state registered domestic partners, are not eligible for any subsidy provided under 41.05.085, there would be no benefit related costs to the state as a result of their ability to enroll in PEBB coverage. It is

## **HCA Fiscal Note**

Bill Number: 5696 SB HCA Request #: 23-115-02 Revised

assumed that these members will be required to pay for the full premium for their benefits and would receive no subsidy.

Implicit Subsidy: Retirees enrolled in the non-Medicare risk pool benefit from community rated plan premiums in a risk pool that is primarily active employees. As the non-Medicare premium rates are developed to reflect the average cost of the entire risk pool, and since the active subscribers are generally younger and less costly than the non-Medicare retirees, the risk pool wide premium rates provide a subsidy to the non-Medicare retiree subscribers via lower premium rates.

On average, non-Medicare retirees are approximately 58 percent more expensive than the average non-Medicare member. The average rate for calendar year 2023 in the non-Medicare risk pool is approximately \$773 per month and based on the assumption that non-Medicare retirees are approximately 58 percent more expensive, the average rate for a non-Medicare retiree is \$1,221 with a difference of \$448 per retiree per month. If the number of retirees that enter the risk pool due to the changes of this legislation is minor, the fiscal and rate impacts are assumed to be minimal. However, due to the unknown number of non-Medicare retirees that would ultimately join the risk pool, fiscal estimates are unknown. Any increase in future rates in the non-Medicare risk pool would be experienced by both the state and employees.

Since the start of plan year 2020, HCA preliminary has identified six employer groups who left the PEBB Program that approximately 200-225 retirees enrolled in the PEBB Program that might be eligible to return and enroll in benefits.

The accounting system of record for PEBB and SEBB, a mainframe system called Pay1, will require updates to accommodate the requirements of this bill. Updates to Pay1 will take three months to complete, with one-time costs estimated at \$78,000 in fiscal year 2024 for analysis, development, testing, and implementation. The work will be performed using the current contracted resources. The technology needs outlined will require a start date prior to July 1, 2023, because this bill requires immediate access for members to join PEBB. Due to the timing of this implementation, HCA would need to use any available PEBB and SEBB funds in our fund balance to start this work before fiscal year 2024.

## Medicaid

No fiscal impact.

No impacts on the Medicaid lines of business because this legislation places the requirements under RCW 41.05.

Part IV: Capital Budget Impact

None

Part V: New Rule Making Required

None

# LOCAL GOVERNMENT FISCAL NOTE

Department of Commerce

Bill Number:	5696 SB	Title:	PEBB participation/local entities
Part I: Juri	sdiction-Location	on, type or	status of political subdivision defines range of fiscal impacts.
<b>Legislation I</b>	mpacts:		
Cities:			
Counties:			
Special Distr	ricts:		
Specific juri	sdictions only:		
Variance occ	eurs due to:		
Part II: Es	timates		
X No fiscal im	pacts.		
Expenditure	s represent one-time	costs:	
Legislation	provides local option	:	
Key variable	es cannot be estimate	d with certain	nty at this time:
Estimated reve	nue impacts to:		
None			
Estimated expe	enditure impacts to:		
None			

## Part III: Preparation and Approval

Fiscal Note Analyst: Kristine Williams	Phone:	(564) 669-3002	Date:	02/10/2023
Leg. Committee Contact: Amanda Cecil	Phone:	360-786-7460	Date:	02/04/2023
Agency Approval: Alice Zillah	Phone:	360-725-5035	Date:	02/10/2023
OFM Review: Marcus Ehrlander	Phone:	(360) 489-4327	Date:	02/13/2023

Page 1 of 2 Bill Number: 5696 SB

FNS060 Local Government Fiscal Note

## Part IV: Analysis

### A. SUMMARY OF BILL

Description of the bill with an emphasis on how it impacts local government.

This bill would allow retired or disabled members of the Washington health care authority the option to participate in insurance plans and contracts. This legislation has no fiscal impact on local governments.

Sec.1 amends 41.05.080 to allow certain retired or disabled employees of a county, municipalities, or another political subdivision continued access to insurance plans and contracts after their employment is terminated. These individuals are not eligible to receive the health insurance subsidy provided under RCW 41.05.085.

Sec.2 adds a new section which would allow retired or disabled employees whose coverage terminated one or before January 1, 2023, continued access to insurance plans and contracts, provided the employee notifies the HCA in writing by December 31, 2023.

Sec.3 adds a new section which states that the act takes effect immediately.

#### B. SUMMARY OF EXPENDITURE IMPACTS

Expenditure impacts of the legislation on local governments with the expenditure provisions identified by section number and when appropriate, the detail of expenditures. Delineated between city, county and special district impacts.

This legislation has no impact on local government expenditures. This legislation would require eligible members to pay the full premium for their benefits. Costs associated with updating the state's mainframe system will be paid by the state. There is no cost to local governments.

#### C. SUMMARY OF REVENUE IMPACTS

Revenue impacts of the legislation on local governments, with the revenue provisions identified by section number, and when appropriate, the detail of revenue sources. Delineated between city, county and special district impacts.

This legislation has no impact on local government revenue.

### **SOURCES**

Washington Health Care Authority SB 5696 fiscal note (2023)

Page 2 of 2 Bill Number: 5696 SB