2015 -- H 5211



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state of Rhode Island,

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2015

AN ACT

RELATING TO PUBLIC OFFICERS AND EMPLOYEES -- INSURANCE BENEFITS

<u>Introduced By:</u> Representatives Corvese, Winfield, Shekarchi, and Chippendale <u>Date Introduced:</u> January 21, 2015

Referred To: House Finance

It is enacted by the General Assembly as follows: 1 SECTION 1. Sections 36-12-1 and 36-12-4 of the General Laws in Chapter 36-12 2 entitled "Insurance Benefits" are hereby amended to read as follows: 3 36-12-1. Definitions. -- The following words, as used in §§ 36-12-1 -- 36-12-14, shall 4 have the following meanings: 5 (1) "Employer", means the state of Rhode Island. (2) "Employee", means all persons who are classified employees as the term "classified 6 employee" is defined under § 36-3-3, and all persons in the unclassified and non-classified 7 service of the state; provided, however, that the following shall not be included as "employees" 8 9 under §§ 36-12-1 -- 36-12-14: 10 (i) Part-time personnel whose work week is less than twenty (20) hours a week and 11 limited period and seasonal personnel; 12 (ii) Members of the general assembly, its clerks, doorkeepers, and pages. 13 (3) "Dependents" means an employee's spouse, domestic partner and unmarried children 14 under nineteen (19) years of age. Domestic partners shall certify by affidavit to the benefits 15 director of the division of personnel that the

(i) partners are at least eighteen (18) years of age and are mentally competent to contract,

(iii) partners are not related by blood to a degree which would prohibit marriage in the

(ii) partners are not married to anyone,

1	(1v) partiters reside together and have resided together for at least one year,
2	(v) partners are financially interdependent as evidenced by at least two (2) of the
3	following:
4	(A) domestic partnership agreement or relationship contract;
5	(B) joint mortgage or joint ownership of primary residence,
6	(C) two (2) of:
7	(I) joint ownership of motor vehicle;
8	(II) joint checking account;
9	(III) joint credit account;
10	(IV) joint lease; and/or
11	(D) the domestic partner has been designated as a beneficiary for the employee's will,
12	retirement contract or life insurance. Misrepresentation of information in the affidavit will result
13	in an obligation to repay the benefits received, and a civil fine not to exceed one thousand dollars
14	(\$1000) enforceable by the attorney general and payable to the general fund. The employee will
15	notify the benefits director of the division of personnel by completion of a form prescribed by the
16	benefits director when the domestic partnership ends.
17	(4) "Retired employee", means all persons retired from the active service of the state,
18	who, immediately prior to retirement, were employees of the state as determined by the
19	retirement board under § 36-8-1, and also all retired teachers who have elected to come under the
20	employees' retirement system of the state of Rhode Island.
21	(5) "State retiree", means all persons retired from the active service of the state who,
22	immediately prior to retirement, were employees of the state as determined by the retirement
23	board under § 36-8-1.
24	(6) "Teacher retiree", means all retired teachers who have elected to come under the
25	employees 'retirement system of the state of Rhode Island.
26	(7)(5) "Long-term health care insurance", means any insurance policy or rider
27	advertised, marketed, offered, or designed to provide coverage for not less than twelve (12)
28	consecutive months for each covered person on an expense incurred, indemnity, prepaid, or other
29	basis for one or more necessary or medically necessary diagnostic, preventive, therapeutic,
30	rehabilitative, maintenance, or personal care services, provided in a setting other than an acute
31	care unit of a hospital. The term includes: group and individual policies or riders whether issued
32	by insurers, fraternal benefit societies, nonprofit health, hospital, and medical service
33	corporations; prepaid health plans, health maintenance organizations; or any similar organization.
34	Long-term health care insurance shall not include: any insurance policy which is offered

1	primarily to provide basic medicare supplement coverage; basic hospital expense coverage; basic
2	medical-surgical expense coverage; hospital confinement indemnity coverage; major medical
3	expense coverage; disability income protection coverage; accident only coverage; specified
4	disease or specified accident coverage; or limited benefit health coverage. This list of excluded
5	coverages is illustrative and is not intended to be all inclusive.
6	(8)(6) "Non-Medicare eligible retiree Retiree health care insurance", means the health
7	benefit employees who retire from active service of the state (subsequent to July 1, 1989), who
8	immediately prior to retirement were employees of the state as determined by the retirement
9	board pursuant to § 36-8-1, shall be entitled to receive until attaining Medicare eligibility. This
10	health care insurance which shall be equal to semi-private hospital care, surgical/medical care and
11	major medical with a one hundred seventy-five dollar (\$175) calendar year deductible.
12	Employees who retire prior to age sixty-five (65) shall, upon the attainment of Medicare
13	eligibility, receive hospitalized care, surgical/medical services, rights and benefits which, when
14	taken together with their federal Medicare program benefits (P.L. 8997), 42 U.S.C. 1305 et seq.,
15	shall be comparable to those provided for retirees prior to that age. The aforementioned program
16	will be provided on a shared basis in accordance with § 36-12-4.
17	(9) "Medicare eligible retiree health care insurance", means the health benefit employees
18	who retire from active service of the state (subsequent to July 1, 1989), who immediately prior to
19	retirement were employees of the state as determined by the retirement board pursuant to § 36-8-
20	1, shall have access to when eligible for Medicare. This health care insurance shall include plans
21	providing hospital care, surgical/medical services, rights and benefits which, when taken together
22	with their federal Medicare program benefits, 42 U.S.C. § 1305 et seq., shall be comparable to
23	those provided for retirees prior to the attainment of Medicare eligibility.
24	(10) "Health reimbursement arrangement", or "HRA" means an account that:
25	(i) Is paid for and funded solely by state contributions;
26	(ii) Reimburses a Medicare eligible state retiree for medical care expenses as defined in
27	§ 213(d) of the Internal Revenue Code of 1986, as amended, which includes reimbursements for
28	health care insurance premiums;
29	(iii) Provides reimbursements up to a maximum dollar amount for a coverage period; and
30	(iv) Provides that any unused portion of the maximum dollar amount at the end of a
31	coverage period is carried forward to increase the maximum reimbursement amount in
32	subsequent coverage periods.
33	36-12-4. Coverage of Non-Medicare-eligible retired employees Coverage of retired
34	employees (a) Non Medicare eligible retired Retired employees who retired on or before

- 1 September 30, 2008. Any retired employee who retired on or before September 30, 2008 shall
- be entitled, until attaining Medicare eligibility, to be covered under §§ 36-12-1 -- 36-12-5 for
- 3 himself and herself and, if he or she so desires, his or her non-Medicare eligible dependents, upon
- 4 agreeing to pay the total cost of his or her contract at the group rate for active state employees.
- 5 Payments of any non-Medicare eligible retired employee for coverage shall be deducted from his
- 6 or her retirement allowance and remitted from time to time in payment for such contract. In
- 7 addition, any retired employee who retired on or before September 30, 2008 shall be permitted to
- 8 purchase coverage for his or her non-Medicare eligible dependents upon agreeing to pay the
- 9 additional cost of the contract at the group rate for active state employees. Payment for coverage
- 10 for these dependents shall be deducted from his or her retirement allowances and remitted as
- 11 required in payment for the contract.

12-1 in accordance with the following formula:

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(b) Non-Medicare eligible state retirees who retired State employees who retire subsequent to July 1, 1989, and on or before September 30, 2008. - Non-Medicare eligible state retirees who retired State employees who retire subsequent to July 1, 1989, and on or before September 30, 2008, from active service of the state, and who were employees of the state as determined by the retirement board under section 36-8-1, shall be entitled to receive for himself or herself non-Medicare eligible a retiree health care insurance benefit as described in section 36-

19	Years of Service	Age at Retirement	State's Share	Employee's Share
20	10-15	60	50%	50%
21	16-22	60	70%	30%
22	23-27	60	80%	20%
23	28+		90%	10%
24	28+	60	100%	0%
25	35+	any	100%	0%

If the retired employee is receiving a subsidy on September 30, 2008, the state will continue to pay the same subsidy share until the retiree attains age sixty-five (65).

Until December 31, 2013, when When the state retiree reaches that age which will qualify him or her for Medicare supplement, the formula shall be:

30	Years of Service	State's Share	Employee's Share
31	10 - 15	50%	50%
32	16 - 19	70%	30%
33	20 - 27	90%	10%
34	28+	100%	0%

(c) Non Medicare eligible retired Retired employees who retire on or after October 1, 2008. Any retired employee who retires on or after October 1, 2008 shall be entitled, until attaining Medicare eligibility, to be covered under §§ 36-12-1 -- 36-12-5 for himself and herself and, if he or she so desires, his or her non Medicare eligible dependents, upon agreeing to pay the total cost of the contract in the plan in which he or she enrolls. Payments of any non-Medicareeligible retired employee for coverage shall be deducted from his or her retirement allowance and remitted from time to time in payment for such contract. Any retired employee who retires on or after October 1, 2008, shall be permitted to purchase coverage for his or her non-Medicareeligible dependents upon agreeing to pay the additional cost of the contract at the group rate for the plan in which the dependent is enrolled. Payment for coverage for dependents shall be deducted from the retired employee's retirement allowances and remitted as required in payment for the contract. The Director of Administration shall develop and present to the chairpersons of the House Finance Committee and the Senate Finance Committee by May 23, 2008 a retiree health plan option or options to be offered to retirees eligible for state-sponsored medical coverage who are under age sixty-five (65) or are not eligible for Medicare. This plan will have a reduced benefit level and will have an actuarially based premium cost not greater than the premium cost of the plan offered to the active state employee population. This new plan option will be available to employees retiring after September 30, 2008, and their dependents.

(d) Non Medicare eligible state retirees State employees who retire on or after October 1, 2008. - Non Medicare eligible state retirees Employees who retire on or after October 1, 2008 from active service of the state, and who were employees of the state as determined by the retirement board under § 36-8-1, and who have a minimum of twenty (20) years of service, and who are a minimum of fifty-nine (59) years of age, shall be entitled to receive for himself or herself a non-Medicare eligible retiree health care insurance benefit as described in § 36-12-1. The state will subsidize 80% of the cost of the health insurance plan for individual coverage in which the state retiree retired employee is enrolled in. Payments of any retired employee for coverage shall be deducted from his or her retirement allowance and remitted from time to time in payment for such contract.

(e) Medicare eligible state retirees who retire on or after October 1, 2008. Until December 31, 2013, the state shall subsidize eighty percent (80%) of the cost of the Medicare eligible health insurance plan for individual coverage in which the state retiree is enrolled, provided the employee retired on or after October 1, 2008; has a minimum of twenty (20) years of service; and is a minimum of fifty nine (59) years of age. Payments for coverage shall be deducted from his or her retirement allowance and remitted from time to time in payment for such

health insurance plan. 2 (f)(e) Retired employees, including retired teachers, who are non-Medicare-eligible and 3 who reach the age of sixty-five (65) shall be allowed to continue to purchase group health care 4 insurance benefits in the same manner as those provided to retired employees who have not 5 reached the age of sixty-five (65). SECTION 2. Section 36-12-4.1 of the General Laws in Chapter 36-12 entitled "Insurance 6 7 Benefits" is hereby repealed. 8 36-12-4.1. Coverage of Medicare-eligible retired employees. -- (a) The director of the 9 department of administration shall ensure retired employees access to Medicare-eligible retiree 10 health care insurance. Under this program, the state will establish a health reimbursement account 11 (HRA) funded by state contributions for each Medicare eligible state retiree who elects to receive 12 health care insurance through the state sponsored program. 13 (b) The funds contained in the HRA may be utilized for any eligible medical care 14 expenses as defined in § 213(d) of the Internal Revenue Code of 1986, as amended, which 15 includes reimbursements for health care insurance premiums. 16 (c) The director of the department of administration shall procure services to maximize 17 consumer choice and options with respect to the individual policies available to Medicare eligible 18 retirees. 19 (d) The maximum state contribution to each Medicare eligible state retiree's HRA 20 account will be equal to the lowest cost Medicare supplemental plan that is filed with the Office 21 of the Health Insurance Commissioner of Rhode Island, that is available through the state-22 sponsored program, and that meets the provisions of the Medicare-eligible retiree health care 23 insurance benefit defined in section 36-12-1(9). The maximum state contribution will vary by age 24 as specified by the rates set forth in the Medicare supplemental plan filing. 25 (e) For Medicare eligible state retirees who retired before September 30, 2008, effective 26 January 1, 2014, the state of Rhode Island will credit an amount to each retiree's HRA account on 27 a monthly basis. The amount of such credit shall be calculated based on the retiree's years of 28 service, as a percentage of the maximum state contribution set forth in (d) above, and in 29 accordance with the following formula: 30 Years of Service State's Contribution Employee's Share 31 10-15 50% 50% 32 16-19 70% 30% 33 $\frac{20 - 27}{}$ 90% 10%

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0%

100%

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1 (f) For Medicare eligible state retirees who retire on or after October 1, 2008, effective
2 January 1, 2014, the state of Rhode Island will credit monthly an amount to each retiree's HRA
3 account equal to 80% of the maximum state contribution set forth in (d) above, provided the
4 retiree has a minimum of twenty (20) years of service and is at least fifty nine (59) years of age.
5 (g) Medicare eligible teacher retirees may purchase the individual policies available to Medicare
6 eligible state retirees under the state sponsored program.

7 SECTION 3. This act shall take effect upon passage.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO PUBLIC OFFICERS AND EMPLOYEES -- INSURANCE BENEFITS

This act would amend certain provisions of the general laws relative to insurance benefits

provided to state retirees and repeals the section of law that ensures retired employees access to

Medicare-eligible retiree health care insurance.

This act would take effect upon passage.

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