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## EXPEDITED RULE MAKING

## CR-105 (December 2017) (Implements RCW 34.05.353)

OFFICE OF THE CODE REVISER STATE OF WASHINGTON FILED

DATE: August 17, 2021 TIME: 2:29 PM

WSR 21-17-128

Agency: Office of the Insurance Commissioner

**Title of rule and other identifying information:** (describe subject) Technical amendment to WAC 284-43-8130: Association health plan compliance with statutory or regulatory changes

Insurance Commissioner Matter R 2021-21.

**Purpose of the proposal and its anticipated effects, including any changes in existing rules:** The existing language in WAC 284-43-8130 includes an outdated reference to a WAC section that was recodified, so that reference needs to be replaced with the updated WAC section number.

**Reasons supporting proposal:** The updated section number has already been indicated within brackets, directly following the outdated reference, in the existing text of WAC 284-43-8130. Rulemaking is needed to remove the outdated reference and officially replace it with the updated number.

Statutory authority for adoption: RCW 48.02.060

Statute being implemented:

Is rule necessary because of a:			
Federal Law?		🗆 Yes	🛛 No
Federal Court Decision?		🗆 Yes	🛛 No
State Court Decision?		🗆 Yes	🛛 No
If yes, CITATION:			
Name of proponent: (person or organization) Office of the Insurance Commissioner		Private	
		Public	
		🛛 Govern	imental
Name of agency personnel respons	ible for:		
Name	Office Location	Phone	

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Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:

Expedited Adoption - Which of the following criteria was	used by the agency to file this notice:
$\square$ Relates only to internal governmental operations that are i	not subject to violation by a person;
□ Adopts or incorporates by reference without material chan rules of other Washington state agencies, shoreline master pr statewide significance, or, as referenced by Washington state standards, if the material adopted or incorporated regulates th incorporating rule;	ograms other than those programs governing shorelines of law, national consensus codes that generally establish industry
<ul> <li>Corrects typographical errors, make address or name cha</li> <li>Content is explicitly and specifically dictated by statute;</li> </ul>	nges, or clarify language of a rule without changing its effect;
<ul> <li>Have been the subject of negotiated rule making, pilot rule participation by interested parties before the development of t</li> <li>Is being amended after a review under RCW 34.05.328.</li> </ul>	
Expedited Repeal - Which of the following criteria was us	ed by the agency to file notice:
□ The statute on which the rule is based has been repealed	and has not been replaced by another statute providing
statutory authority for the rule; □ The statute on which the rule is based has been declared judgment, and no statute has been enacted to replace the une □ The rule is no longer necessary because of changed circu	constitutional statute;
$\Box$ Other rules of the agency or of another agency govern the	same activity as the rule, making the rule redundant.
Explanation of the reason the agency believes the expedi 34.05.353(4): This rulemaking only involves updating a refere that will not change its effect.	ted rule-making process is appropriate pursuant to RCW nce to another WAC section, which is a clarification of the rule
NC	TICE
THIS RULE IS BEING PROPOSED UNDER AN EXPEDITED NEED FOR THE AGENCY TO HOLD PUBLIC HEARINGS, I STATEMENT, OR PROVIDE RESPONSES TO THE CRITER OBJECT TO THIS USE OF THE EXPEDITED RULE-MAKIN WRITING AND THEY MUST BE SENT TO	PREPARE A SMALL BUSINESS ECONOMIC IMPACT
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AMENDATORY SECTION (Amending WSR 19-22-032, filed 10/30/19, effective 11/30/19)

WAC 284-43-8130 Association health plan compliance with statutory or regulatory changes. (1) Issuers must file a group health plan, other than a small group health plan, rate and form filing as provided in RCW 48.43.733. An issuer offering plans through an association or member-governed group must implement all new applicable federal or state health plan market requirements when they become effective. Replacement requirements for this section apply based on whether the purchaser is classified as an individual, small group, or large group purchaser. These requirements also apply to employer member groups of less than two or to individual member purchasers.

(2) An issuer providing plans of the type referenced in subsection (1) of this section must discontinue a noncompliant plan, and offer replacement plans effective on the renewal date of the master group contract for large groups, and on the group's anniversary renewal date for nongrandfathered small group and individual plans.

(3) If the association is a large group as defined in WAC ((284-43-0330(1) [284-43-8140(1)])) 284-43-8140(1), the same renewal date must apply to all employer members and individual employer members, and the replacement coverage must take effect on the same date for each participant. The purchaser's anniversary date must not be used in lieu of this uniform renewal date for purposes of discontinuation and replacement of noncompliant coverage.

(4) If the association is not a large group as defined in WAC ((284-43-0330(1) [284-43-8140(1)])) 284-43-8140(1), and the master group contract and an employer member's contract do not have the same renewal date, an issuer must provide notice of the discontinuation and replacement of the plan to the affected employer member or plan sponsor, and each enrollee in the affected employer member plan, not fewer than ninety days prior to the employer member's anniversary renewal date.

(5) If an issuer does not have a replacement plan approved by the commissioner to offer in place of a discontinued plan, the issuer must assist each enrollee in identifying a replacement option offered by another issuer.

(6) For purposes of this section, "purchaser" means the group or individual whose eligibility for the plan is based in whole or in part on membership in the association or member-governed group.

(7) For purposes of this section, the "anniversary renewal date" means the initial or first date on which a purchasing group's health benefit plan coverage became effective with the issuer, regardless of whether the issuer is subject to other agreements, contracts or trust documents that establish requirements related to the purchaser's coverage in addition to the health benefit plan.

(8) An issuer must not adjust the master contract renewal or anniversary date to delay or prevent application of any federal or state health plan market requirement.