

REFERENCE TITLE: **firefighters; spouse; insurance payment**

State of Arizona
House of Representatives
Fifty-first Legislature
First Regular Session
2013

HB 2223

Introduced by
Representatives Alston, Cardenas, Gonzales: Mendez, Robson

AN ACT

AMENDING SECTION 38-651, ARIZONA REVISED STATUTES; TRANSFERRING AND RENUMBERING SECTION 38-1103, ARIZONA REVISED STATUTES, FOR PLACEMENT IN TITLE 38, CHAPTER 4, ARTICLE 4, ARIZONA REVISED STATUTES, AS SECTION 38-655; AMENDING SECTION 38-655, ARIZONA REVISED STATUTES, AS TRANSFERRED AND RENUMBERED BY THIS ACT; RELATING TO HEALTH AND ACCIDENT INSURANCE.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 38-651, Arizona Revised Statutes, is amended to
3 read:

4 38-651. Expenditure of monies for health and accident
5 insurance; definition

6 A. The department of administration may expend public monies
7 appropriated for such purpose to procure health and accident coverage for
8 full-time officers and employees of this state and its departments and
9 agencies. The department of administration may adopt rules that provide that
10 if an employee dies while the employee's surviving spouse's health insurance
11 is in force, the surviving spouse is entitled to no more than thirty-six
12 months of extended coverage at one hundred two per cent of the group rates by
13 paying the premiums. Except as provided by section ~~38-1103~~ 38-655, no public
14 monies may be expended to pay all or any part of the premium of health
15 insurance continued in force by the surviving spouse. The department of
16 administration shall seek a variety of plans, including indemnity health
17 insurance, hospital and medical service plans, dental plans and health
18 maintenance organizations. On a recommendation of the department of
19 administration and the review of the joint legislative budget committee, the
20 department of administration may self-insure for the purposes of this
21 subsection. If the department of administration self-insures, the department
22 may contract directly with preferred provider organizations, physician and
23 hospital networks, indemnity health insurers, hospital and medical service
24 plans, dental plans and health maintenance organizations. If the department
25 self-insures, the department shall provide that the self-insurance program
26 include all health coverage benefits that are mandated pursuant to title 20.
27 The self-insurance program shall include provisions to provide for the
28 protection of the officers and employees, including grievance procedures for
29 claim or treatment denials, creditable coverage determinations,
30 dissatisfaction with care and access to care issues. The department of
31 administration by rule shall designate and adopt performance standards,
32 including cost competitiveness, utilization review issues, network
33 development and access, conversion and implementation, report timeliness,
34 quality outcomes and customer satisfaction for qualifying plans. The
35 qualifying plans for which the standards are adopted include indemnity health
36 insurance, hospital and medical service plans, closed panel medical and
37 dental plans and health maintenance organizations, and for eligibility of
38 officers and employees to participate in such plans. Any indemnity health
39 insurance or hospital and medical service plan designated as a qualifying
40 plan by the department of administration must be open for enrollment to all
41 permanent full-time state employees, except that any plan established ~~prior~~
42 ~~to~~ BEFORE June 6, 1977 may be continued as a separate plan. Any closed panel
43 medical or dental plan or health maintenance organization designated as the
44 qualifying plan by the department of administration must be open for
45 enrollment to all permanent full-time state employees residing within the

1 geographic area or area to be served by the plan or organization. Officers
2 and employees may select coverage under the available options.

3 B. The department of administration may expend public monies
4 appropriated for such purpose to procure health and accident coverage for the
5 dependents of full-time officers and employees of this state and its
6 departments and agencies. The department of administration shall seek a
7 variety of plans, including indemnity health insurance, hospital and medical
8 service plans, dental plans and health maintenance organizations. On a
9 recommendation of the department of administration and the review of the
10 joint legislative budget committee, the department of administration may
11 self-insure for the purposes of this subsection. If the department of
12 administration self-insures, the department may contract directly with
13 preferred provider organizations, physician and hospital networks, indemnity
14 health insurers, hospital and medical service plans, dental plans and health
15 maintenance organizations. If the department self-insures, the department
16 shall provide that the self-insurance program include all health coverage
17 benefits that are mandated pursuant to title 20. The self-insurance program
18 shall include provisions to provide for the protection of the officers and
19 employees, including grievance procedures for claim or treatment denials,
20 creditable coverage determinations, dissatisfaction with care and access to
21 care issues. The department of administration by rule shall designate and
22 adopt performance standards, including cost competitiveness, utilization
23 review issues, network development and access, conversion and implementation,
24 report timeliness, quality outcomes and customer satisfaction for qualifying
25 plans. The qualifying plans for which the standards are adopted include
26 indemnity health insurance, hospital and medical service plans, closed panel
27 medical and dental plans and health maintenance organizations, and for
28 eligibility of the dependents of officers and employees to participate in
29 such plans. Any indemnity health insurance or hospital and medical service
30 plan designated as a qualifying plan by the department of administration must
31 be open for enrollment to all permanent full-time state employees, except
32 that any plan established ~~prior to~~ BEFORE June 6, 1977 may be continued as a
33 separate plan. Any closed panel medical or dental plan or health maintenance
34 organization designated as a qualifying plan by the department of
35 administration must be open for enrollment to all permanent full-time state
36 employees residing within the geographic area or area to be served by the
37 plan or organization. Officers and employees may select coverage under the
38 available options.

39 C. The department of administration may designate the Arizona health
40 care cost containment system established by title 36, chapter 29 as a
41 qualifying plan for the provision of health and accident coverage to
42 full-time state officers and employees and their dependents. The Arizona
43 health care cost containment system shall not be the exclusive qualifying
44 plan for health and accident coverage for state officers and employees either
45 on a statewide or regional basis.

1 D. Except as provided in section 38-652, public monies expended
2 pursuant to this section each month shall not exceed:

3 1. Five hundred dollars multiplied by the number of officers and
4 employees who receive individual coverage.

5 2. One thousand two hundred dollars multiplied by the number of
6 married couples if both members of the couple are either officers or
7 employees and each receives individual coverage or family coverage.

8 3. One thousand two hundred dollars multiplied by the number of
9 officers or employees who receive family coverage if the spouses of the
10 officers or employees are not officers or employees.

11 E. Subsection D of this section:

12 1. Establishes a total maximum expenditure of public monies pursuant
13 to this section.

14 2. Does not establish a minimum or maximum expenditure for each
15 individual officer or employee.

16 F. In order to ensure that an officer or employee does not suffer a
17 financial penalty or receive a financial benefit based on the officer's or
18 employee's age, gender or health status, the department of administration
19 shall consider implementing the following:

20 1. Requests for proposals for health insurance that specify that the
21 carrier's proposed premiums for each plan be based on the expected age,
22 gender and health status of the entire pool of employees and officers and
23 their family members enrolled in all qualifying plans and not on the age,
24 gender or health status of the individuals expected to enroll in the
25 particular plan for which the premium is proposed.

26 2. Recommendations from a legislatively established study group on
27 risk adjustments relating to a system for reallocating premium revenues among
28 the contracting qualifying plans to the extent necessary to adjust the
29 revenues received by any carrier to reflect differences between the average
30 age, gender and health status of the enrollees in that carrier's plan or
31 plans and the average age, gender and health status of all enrollees in all
32 qualifying plans.

33 G. Each officer or employee shall certify on the initial application
34 for family coverage that the officer or employee is not receiving more than
35 the contribution for which eligible pursuant to subsection D of this section.
36 Each officer or employee shall also provide the certification on any change
37 of coverage or marital status.

38 H. If a qualifying health maintenance organization is not available to
39 an officer or employee within fifty miles of the officer's or employee's
40 residence and the officer or employee is enrolled in a qualifying plan, the
41 officer or employee shall be offered the opportunity to enroll with a health
42 maintenance organization when the option becomes available. If a health
43 maintenance organization is available within fifty miles and it is determined
44 by the department of administration that there is an insufficient number of
45 medical providers in the organization, the department may provide for a

1 change in enrollment from plans designated by the director when additional
2 medical providers join the organization.

3 I. Notwithstanding subsection H of this section, officers and
4 employees who enroll in a qualifying plan and reside outside the area of a
5 qualifying health maintenance organization shall be offered the option to
6 enroll with a qualified health maintenance organization offered through their
7 provider under the same premiums as if they lived within the area boundaries
8 of the qualified health maintenance organization, if:

9 1. All medical services are rendered and received at an office
10 designated by the qualifying health maintenance organization or at a facility
11 referred by the health maintenance organization.

12 2. All nonemergency or nonurgent travel, ambulatory and other expenses
13 from the residence area of the officer or employee to the designated office
14 of the qualifying health maintenance organization or the facility referred by
15 the health maintenance organization are the responsibility of and at the
16 expense of the officer or employee.

17 3. All emergency or urgent travel, ambulatory and other expenses from
18 the residence area of the officer or employee to the designated office of the
19 qualifying health maintenance organization or the facility referred by the
20 health maintenance organization are paid pursuant to any agreement between
21 the health maintenance organization and the officer or employee living
22 outside the area of the qualifying health maintenance organization.

23 J. The department of administration shall allow any school district in
24 this state that meets the requirements of section 15-388, a charter school in
25 this state that meets the requirements of section 15-187.01 or a city, town,
26 county, community college district, special taxing district, authority or
27 public entity organized pursuant to the laws of this state that meets the
28 requirements of section 38-656 to participate in the health and accident
29 coverage prescribed in this section, except that participation is only
30 allowed in a health plan that is offered by the department and that is
31 subject to title 20, chapter 1, article 1. A school district, a charter
32 school, a city, a town, a county, a community college district, a special
33 taxing district, an authority or any public entity organized pursuant to the
34 laws of this state rather than this state shall pay directly to the benefits
35 provider the premium for its employees.

36 K. The department of administration shall determine the actual
37 administrative and operational costs associated with school districts,
38 charter schools, cities, towns, counties, community college districts,
39 special taxing districts, authorities and public entities organized pursuant
40 to the laws of this state participating in the state health and accident
41 insurance coverage. These costs shall be allocated to each school district,
42 charter school, city, town, county, community college district, special
43 taxing district, authority and public entity organized pursuant to the laws
44 of this state based on the total number of employees participating in the
45 coverage. This subsection only applies to a health plan that is offered by
46 the department and that is subject to title 20, chapter 1, article 1.

1 L. Insurance providers contracting with this state shall separately
2 maintain records that delineate claims and other expenses attributable to
3 participation of a school district, charter school, city, town, county,
4 community college district, special taxing district, authority and public
5 entity organized pursuant to the laws of this state in the state health and
6 accident insurance coverage and, by November 1 of each year, shall report to
7 the department of administration the extent to which state costs are impacted
8 by participation of school districts, charter schools, cities, towns,
9 counties, community college districts, special taxing districts, authorities
10 and public entities organized pursuant to the laws of this state in the state
11 health and accident insurance coverage. By December 1 of each year, the
12 director of the department of administration shall submit a report to the
13 president of the senate and the speaker of the house of representatives
14 detailing the information provided to the department by the insurance
15 providers and including any recommendations for possible legislative action.

16 M. Notwithstanding subsection J of this section, any school district
17 in this state that meets the requirements of section 15-388, a charter school
18 in this state that meets the requirements of section 15-187.01 or a city,
19 town, county, community college district, special taxing district, authority
20 or public entity organized pursuant to the laws of this state that meets the
21 requirements of section 38-656 may apply to the department of administration
22 to participate in the self-insurance program that is provided by this section
23 pursuant to rules adopted by the department. A participating entity shall
24 reimburse the department for all premiums and administrative or other
25 insurance costs. The department shall actuarially prescribe the annual
26 premium for each participating entity to reflect the actual cost of each
27 participating entity.

28 N. Any person that submits a bid to provide health and accident
29 coverage pursuant to this section shall disclose any court or administrative
30 judgments or orders issued against that person within the last ten years
31 before the submittal.

32 O. For the purposes of this section, "dependent" means a spouse under
33 the laws of this state, a child who is under twenty-six years of age or a
34 child who was disabled before reaching nineteen years of age, who continues
35 to be disabled under 42 United States Code section 1382c and for whom the
36 employee had custody before reaching nineteen years of age.

37 Sec. 2. Section 38-1103, Arizona Revised Statutes, is transferred and
38 renumbered for placement in title 38, chapter 4, article 4, as section 38-655
39 and, as so renumbered, is amended to read:

40 38-655. Health insurance payments for spouse or dependents of
41 law enforcement officer or firefighter killed in the
42 line of duty; definitions

43 A. Notwithstanding any other law, the surviving spouse of a deceased
44 law enforcement officer OR FIREFIGHTER is entitled to receive payments for
45 health insurance premiums from public monies of the employer of the law

1 enforcement officer ~~for the first year after the death of the law enforcement~~
2 ~~officer~~ OR FIREFIGHTER UNTIL THE SPOUSE'S DEATH OR REMARRIAGE if:
3 1. The law enforcement officer OR FIREFIGHTER was killed in the line
4 of duty or died from injuries suffered in the line of duty.
5 2. The law enforcement officer OR FIREFIGHTER was enrolled in the
6 employer's health insurance plan at the time of death.
7 3. The surviving spouse is entitled to continue to participate in the
8 employer's health insurance plan.
9 B. This section applies to the dependents of the deceased law
10 enforcement officer OR FIREFIGHTER if the dependents were enrolled in the
11 employer's health insurance plan at the time of the law enforcement officer's
12 OR FIREFIGHTER'S death.
13 C. Payments shall be reduced for monies paid for health insurance
14 premiums for the surviving spouse or dependents of the surviving spouse from
15 the retirement plan from which the surviving spouse is receiving benefits.
16 D. For the purposes of this section: ~~;~~
17 1. "FIREFIGHTER" MEANS A MUNICIPAL OR STATE FIREFIGHTER.
18 2. "Law enforcement officer" means:
19 ~~1-~~ (a) A peace officer who is certified by the Arizona peace ~~officers~~
20 OFFICER standards and training board.
21 ~~2-~~ (b) A detention officer or corrections officer who is employed by
22 this state or a political subdivision of this state.
23 ~~3-~~ (c) A probation officer or surveillance officer who is employed by
24 this state or a political subdivision of this state.