THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 2080 Session of 2011

INTRODUCED BY O'NEILL, HANNA, BARBIN, BOYD, CALTAGIRONE, D. COSTA, DALEY, GEIST, GINGRICH, GOODMAN, GRELL, HALUSKA, HARKINS, HESS, HORNAMAN, JOSEPHS, MURT, SANTONI, SWANGER AND VULAKOVICH, DECEMBER 15, 2011

REFERRED TO COMMITTEE ON EDUCATION, DECEMBER 15, 2011

AN ACT

Establishing the Public School Employees' Benefit Board and 1 providing for its powers and duties; requiring a school 2 employee benefits study and evaluation; providing for a Statewide health benefits program for public school employees, for alternative measures for cost reduction and for a retirement health savings plan; and establishing the 6 Public School Employees' Benefit Trust Fund. 7 8 TABLE OF CONTENTS Chapter 1. Preliminary Provisions 10 Section 101. Short title. 11 Chapter 3. Administration of Benefits 12 Subchapter A. Definitions 13 Section 301. Definitions. 14 Subchapter B. Public School Employees' Benefit Board 15 Section 311. Public School Employees' Benefit Board. 16 Section 312. Administrative duties of board. 17 Subchapter C. Study and Options Election 18 Section 321. School employee health benefits study and

evaluation.

- 1 Section 322. Board review and election.
- 2 Section 323. Plan adoption.
- 3 Subchapter D. Statewide Health Benefits Program
- 4 Section 331. Health benefits program.
- 5 Section 332. Participation.
- 6 Section 333. Continuation of coverage and transfer employees.
- 7 Section 334. Partnership for stable benefits funding.
- 8 Section 335. Powers and duties of board.
- 9 Section 336. Public School Employees' Benefit Trust Fund.
- 10 Section 337. Misrepresentation, refusal to cooperate and fraud.
- 11 Section 338. Miscellaneous provisions.
- 12 Subchapter E. Alternative Measures for Cost Reduction
- 13 Section 351. Alternative measures program.
- 14 Subchapter F. Retirement Health Savings Plan
- 15 Section 361. Retirement health savings plan.
- 16 Chapter 5. Miscellaneous Provisions
- 17 Section 501. Feasibility report.
- 18 Section 502. Effective date.
- 19 The General Assembly of the Commonwealth of Pennsylvania
- 20 hereby enacts as follows:
- 21 CHAPTER 1
- 22 PRELIMINARY PROVISIONS
- 23 Section 101. Short title.
- 24 This act shall be known and may be cited as the Public School
- 25 Employees' Benefit Act.
- 26 CHAPTER 3
- 27 ADMINISTRATION OF BENEFITS
- 28 SUBCHAPTER A
- 29 DEFINITIONS
- 30 Section 301. Definitions.

- 1 The following words and phrases when used in this chapter
- 2 shall have the meanings given to them in this section unless the
- 3 context clearly indicates otherwise:
- 4 "Alternate health care plan." A plan or plan design
- 5 established by the Public School Employees' Benefit Board
- 6 pursuant to section 331(f)(2)(ii) which the board in its
- 7 exclusive authority determines to contain benefits equivalent to
- 8 the standard benefit package.
- 9 "Alternative measures program." A program created by the
- 10 Public School Employees' Benefit Board in accordance with the
- 11 provisions of Subchapter E.
- 12 "Annuitant." Any "annuitant" or "disability annuitant" as
- 13 defined in 24 Pa.C.S. § 8102 (relating to definitions).
- 14 "Best practices." Standards of criteria, measures and
- 15 results developed by the Public School Employees' Benefit Board
- 16 that may be reflective of such standards developed by broadly
- 17 accepted organizations such as the National Committee for
- 18 Quality Assurance (NCQA) and the Centers for Medicare and
- 19 Medicaid Services (CMS), consulting firm benchmarks and medical
- 20 and industry journals that promote the precisions of efficient
- 21 delivery and design of employee benefits.
- "Board." The Public School Employees' Benefit Board created
- 23 in section 311.
- 24 "Board member." A person designated or appointed to the
- 25 Public School Employees' Benefit Board pursuant to section
- 26 311(a).
- 27 "Consortium." A coalition of two or more geographically
- 28 defined public school entities, or a coalition of one or more
- 29 geographically defined public school entities and one or more
- 30 political subdivisions as defined by 61 Pa. Code § 315.2

- 1 (relating to definitions), formed for the purpose of pooling
- 2 combined purchasing of the individual participants in order to
- 3 increase bargaining power to obtain health care benefits.
- 4 "Contribution rate." The rate established by the Public
- 5 School Employees' Benefit Board in accordance with section
- 6 334(b) and (c) used to determine contributions by the
- 7 Commonwealth and public school entities for the funding of the
- 8 standard benefit package for eligible individuals in each health
- 9 care region.
- "Cost-sharing." The fee paid by the member that covers a
- 11 share of the cost of providing group health benefits under the
- 12 Statewide health benefits program or the fee paid by a school
- 13 employee or annuitant that covers a share of the cost of
- 14 providing health care coverage in a plan sponsored by the public
- 15 school entity. The term shall not include:
- 16 (1) any fee paid by the member, school employee or
- annuitant at the time of service, such as copayments or
- deductibles, in order to obtain prescription drugs or other
- 19 specific health care services; or
- 20 (2) any additional cost paid by the member, school
- 21 employee or annuitant for optional benefit packages.
- "Eligible individual." An individual who is a member or the
- 23 health care dependent of a member.
- 24 "Employee benefits account." A ledger account of the Public
- 25 School Employees' Benefit Trust Fund created in section 336(a)
- 26 (1).
- 27 "Employer contribution account." A ledger account of the
- 28 Public School Employees' Benefit Trust Fund created in section
- 29 336(a)(3).
- 30 "Health care dependent." An individual who is eligible to

- 1 receive health care coverage under the Statewide health benefits
- 2 program due to the individual's relation to the member, as
- 3 determined by the Public School Employees' Benefit Board.
- 4 "Health care region." The geographic regions determined by
- 5 the Public School Employees' Benefit Board to be appropriate for
- 6 providing health benefits for eligible individuals based on the
- 7 availability of insurance carriers, benefit administrators,
- 8 health care providers, health care provider networks, costs and
- 9 any other factors related to health care or the financing of the
- 10 benefits.
- "IRC." The Internal Revenue Code of 1986, as designated and
- 12 referred to in section 2 of the Tax Reform Act of 1986 (Public
- 13 Law 99-514, 100 Stat. 2085, 2095). A reference in this chapter
- 14 to "IRC § " shall be deemed to refer to the identically numbered
- 15 section and subsection or other subdivision of such section in
- 16 26 U.S.C. (relating to Internal Revenue Code).
- "Long-term substitute." A school employee who is
- 18 substituting for an officer, administrator or employee of a
- 19 public school entity for a qualifying period of time to be
- 20 determined by the Public School Employees' Benefit Board.
- 21 "Medicare." The programs established by Title XVIII of the
- 22 Social Security Act (49 Stat. 620, 42 U.S.C. § 1395 et seq.)
- 23 which include: Part A, Hospital Insurance Benefits for the Aged
- 24 and Disabled; Part B, Supplementary Medical Insurance Benefits
- 25 for the Aged and Disabled; Part C, Medicare+ Choice Program; and
- 26 Part D, Voluntary Prescription Drug Benefit Program; and
- 27 including any subsequent changes or additions to those programs.
- 28 "Member." An eligible individual who is so specified for
- 29 enrollment in the Statewide health benefits program and in whose
- 30 name the identification card is issued. A member can be:

- 1 (1) A school employee.
- 2 (2) An annuitant.
- 3 (3) A transfer employee.
- 4 (4) An individual separated from employment with a
- 5 public school entity who the Public School Employees' Benefit
- 6 Board determines is eligible to purchase continuation of
- 7 coverage in the Statewide health benefits program.
- 8 (5) Others as approved by the Public School Employees'
- 9 Benefit Board.
- 10 "Optional benefit package." A plan or plan design
- 11 established by the Public School Employees' Benefit Board
- 12 pursuant to section 331(f)(2)(iii) which includes specific
- 13 health care services that are not part of the standard benefit
- 14 package.
- "Participant account holder." A school employee
- 16 participating in a retirement health savings plan or a school
- 17 employee who retires or otherwise terminates employment with a
- 18 public school entity and becomes eligible to be reimbursed from
- 19 the employee's retirement health savings plan account for the
- 20 I.R.C.-qualified health-related expenses. The term shall also
- 21 include the health care dependent of a school employee who
- 22 succeeds in interest to a deceased school employee and becomes
- 23 eligible to be reimbursed for health-related expenses from the
- 24 school employee's account.
- 25 "Phase-in period." The period of program operation in any
- 26 health care region from the time the Public School Employees'
- 27 Benefit Board begins implementation of mandatory participation
- 28 under section 332 until the commencement of the first plan year
- 29 in which 75% of school districts in that region are
- 30 participating in the program.

- 1 "Program." The Statewide health benefits program sponsored
- 2 by the Public School Employees' Benefit Board in accordance with
- 3 the provisions of Subchapter D.
- 4 "Public School Code." The act of March 10, 1949 (P.L.30,
- 5 No.14), known as the Public School Code of 1949.
- 6 "Public school entity." A school district of any class,
- 7 intermediate unit, area vocational-technical school, charter
- 8 school or other school, as provided for under the act of March
- 9 10, 1949 (P.L.30, No.14), known as the Public School Code of
- 10 1949. The term shall also include the former Scotland School for
- 11 Veterans' Children and the former Scranton State School for the
- 12 Deaf.
- "Qualified majority vote." A vote by the Public School
- 14 Employees' Benefit Board requiring the support of a majority of
- 15 the members of the board present and voting, with the support of
- 16 at least two board members described in section 311(a)(1), at
- 17 least two board members appointed under section 311(a)(3) and at
- 18 least four board members appointed under section 311(a)(2), of
- 19 whom at least two board members must be appointed under section
- 20 311(a)(2)(i)(A), to pass.
- 21 "Qualifying event." A change in marital status, death of a
- 22 member or the change in a health care dependent's status,
- 23 subsequent to the commencement of coverage under this chapter,
- 24 or the involuntary termination of health plan coverage that was
- 25 obtained through a health care dependent.
- 26 "Reserve account." A ledger account of the Public School
- 27 Employees' Benefit Trust Fund created in section 336(a)(2).
- 28 "Retirement system." The term shall have the same meaning as
- 29 "system" in 24 Pa.C.S. § 8102 (relating to definitions).
- "School employee." Any person regularly employed by or in a

- 1 public school entity for which work the person is receiving
- 2 regular remuneration as an officer, administrator, employee or
- 3 long-term substitute. The term excludes any independent
- 4 contractor, person compensated on a fee basis or, unless
- 5 otherwise determined by the Public School Employees' Benefit
- 6 Board, any part-time hourly school employee. The term includes
- 7 any employee of a public school entity who has a position for
- 8 which eligibility in a health care plan sponsored by the public
- 9 school entity is in effect as of the effective date of this
- 10 chapter.
- "Standard benefit package." The benefit package established
- 12 by the Public School Employees' Benefit Board pursuant to
- 13 section 331(f)(1).
- "Supplemental benefits." Dental care, vision care and
- 15 employee assistance program benefits that may be offered in
- 16 addition to medical and hospital services and prescription drug
- 17 benefits.
- 18 "Transfer employee." A person who is not a school employee
- 19 who is regularly employed at a worksite in a public school
- 20 entity, regardless of who actually employs the person, if the
- 21 person is performing services previously performed by a school
- 22 employee.
- "Trust fund." The Public School Employees' Benefit Trust
- 24 Fund established in section 336.
- 25 SUBCHAPTER B
- 26 PUBLIC SCHOOL EMPLOYEES' BENEFIT BOARD
- 27 Section 311. Public School Employees' Benefit Board.
- 28 (a) Status and membership. -- The board shall be an
- 29 independent administrative board and shall consist of the
- 30 following board members:

- (1) The Secretary of the Budget, the Secretary of Education, the Secretary of Administration and the Insurance Commissioner, who shall serve ex officio.
 - (2) Eight persons representing school employees who are covered by the program appointed in the following manner:
 - (i) Six persons representing school employees who are covered by the program in an approximate proportion to the percentage of professional employees represented in collective bargaining by school employee unions working in public school entities that will be covered by the program when it is fully operational and based on full participation by all school entities, appointed by the Governor and chosen from a list of candidates submitted by those school employee unions; provided that all of the following shall occur:
 - (A) no fewer than five persons shall be appointed from a list of candidates submitted by the school employee union that on the effective date of this chapter represents in collective bargaining the greatest proportion of all professional employees working in public school entities that will be covered by the program when it is fully operational based on full participation by all school entities;
 - (B) no less than one person shall be appointed from a list of candidates submitted by any school employee union that on the effective date of this chapter represents in collective bargaining more than 4,000 professional employees working in public school entities that will be covered by the program when it is fully operational; and

(ii) Two persons representing school employees who
are covered by the program represented in collective
bargaining by school employee unions other than school
employee unions within subparagraph (i) appointed by the
Governor and chosen from a list of candidates submitted
by those school employee unions other than school

employee unions within subparagraph (i).

- (iii) For purposes of this section "school employee unions" shall include a Statewide affiliate of such school employee unions.
- 11 (3) Four persons representing public school entity

 12 employers appointed by the Governor and chosen from a list of

 13 candidates submitted by the Pennsylvania School Boards

 14 Association. At least one of the school entity employer

 15 representatives initially named to the board shall be a

 16 member of a consortium board.
- 17 The school employee unions and the Pennsylvania School Boards 18 Association shall provide the Governor with their respective
- 20 of this section. The Governor shall make his appointments within

lists of candidates within 15 days following the effective date

- 21 45 days following receipt of the lists.
- 22 (b) Terms.--

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- 23 (1) Three board members appointed under subsection (a)
- (2) (i), as designated by the Governor, shall serve a term of
- 25 two years, and three board members appointed under subsection
- 26 (a)(2)(i), as designated by the Governor, shall serve a term
- of four years.
- 28 (2) One board member appointed under subsection (a) (2)
- 29 (ii), as designated by the Governor, shall serve a term of
- 30 two years, and one board member appointed under subsection

- 1 (a) (2) (ii), as designated by the Governor, shall serve a term $\left(\frac{1}{2}\right)^{2}$
- 2 of four years.
- 3 (3) Two board members appointed under subsection (a)(3),
- 4 as designated by the Governor, shall serve a term of two
- 5 years, and two board members appointed under subsection (a)
- 6 (3), as designated by the Governor, shall serve a term of
- four years, except that the Pennsylvania School Boards
- 8 Association shall designate for which initial term the
- 9 representative who is a member of a consortium board shall
- 10 serve.
- 11 (4) Successors for all board members shall be appointed
- for terms of four years, except as provided in subsection
- 13 (d). Board members shall be eligible for reappointment.
- 14 (c) Meetings.--The board shall meet as needed to fulfill its
- 15 duties, and nine board members shall constitute a quorum. Board
- 16 members shall elect the chairman of the board. Except in
- 17 instances where a qualified majority is required under this
- 18 chapter, a majority of the board members present and voting
- 19 shall have authority to act upon any matter. The board is
- 20 authorized to establish rules of its operation, including a
- 21 provision for the removal of board members for nonattendance.
- 22 (d) Vacancies. -- A vacancy occurring during the term of any
- 23 board member shall be filled for the unexpired term by a
- 24 successor appointed in the same manner as his predecessor. The
- 25 school employee unions and the Pennsylvania School Boards
- 26 Association shall provide the Governor with their respective
- 27 lists of candidates within 60 days prior to the end of a
- 28 member's term or within 15 days of any other vacancy.
- 29 (e) Oath of office.--Each board member shall take an oath of
- 30 office that the member will, so far as it devolves upon the

- 1 member, diligently and honestly administer the affairs of the
- 2 board and that the member will not knowingly violate or
- 3 willfully permit to be violated any of the provisions of law
- 4 applicable to this chapter. The oath shall be subscribed by the
- 5 board member making it and certified by the officer before whom
- 6 it is taken and shall be immediately filed in the office of the
- 7 Secretary of the Commonwealth.
- 8 (f) Compensation and expenses. -- Board members who are
- 9 members of the retirement system or the State Employees'
- 10 Retirement System shall serve without compensation. Board
- 11 members who are members of the retirement system and who are
- 12 employed by a public school entity shall not suffer loss of
- 13 salary or wages through serving on the board. The board, on
- 14 request of the employer of any board member who is an active
- 15 professional or nonprofessional member of the retirement system,
- 16 may reimburse the employer for the salary or wages of the member
- 17 or for the cost of employing a substitute for the board member
- 18 while the board member is necessarily absent from employment to
- 19 execute the duties of the board. The board members who are not
- 20 members of either the retirement system or the State Employees'
- 21 Retirement System may be paid \$100 per day when attending
- 22 meetings, and all board members shall be reimbursed for any
- 23 necessary expenses. When, however, the duties of the board as
- 24 mandated are not executed, no compensation or reimbursement for
- 25 expenses of board members shall be paid or payable during the
- 26 period in which the duties are not executed.
- 27 (g) Corporate power and legal advisor. -- For the purposes of
- 28 this chapter, the board shall possess the power and privileges
- 29 of a corporation. The Office of General Counsel shall be the
- 30 legal advisor of the board.

- 1 (h) Duties of the board. -- The board shall have the power and
- 2 authority to carry out the duties established by this chapter,
- 3 including the design, implementation and administration of the
- 4 school employee health benefits study pursuant to Subchapter C
- 5 and either the Statewide health benefits program if approved
- 6 pursuant to section 323 or the alternative measures program if
- 7 created pursuant to section 351.
- 8 Section 312. Administrative duties of board.
- 9 (a) Employees. -- The compensation of all officers and
- 10 employees of the board who are not covered by a collective
- 11 bargaining agreement shall be established by the board
- 12 consistent with the standards of compensation established by the
- 13 Executive Board.
- 14 (b) Secretary. -- The board shall select a secretary, who
- 15 shall not be a board member. The secretary shall act as chief
- 16 administrative officer for the board. In addition to other
- 17 powers and duties conferred upon and delegated to the secretary
- 18 by the board, the secretary shall:
- 19 (1) Serve as the administrative agent of the board and
- as liaison between the board and applicable legislative
- 21 committees.
- 22 (2) Review and analyze proposed legislation and
- legislative developments affecting the program and present
- findings to the board, legislative committees and other
- interested groups or individuals.
- 26 (3) Receive inquiries and requests for information
- concerning the program from the press, Commonwealth
- officials, public school entities, school employees and the
- general public and provide information as authorized by the
- 30 board.

- 1 (c) Professional personnel.—The board may employ or
- 2 contract with consultants and other professional personnel as
- 3 needed to conduct the school employee health benefits study and
- 4 evaluation pursuant to Subchapter C and to operate the program,
- 5 including third-party administrators, managed care managers,
- 6 chief medical examiners, actuaries, investment advisors and
- 7 managers, legal counsel and other professional personnel as it
- 8 deems advisable. The board may also contract for the services of
- 9 any national or State banking corporation or association having
- 10 trust powers, with respect to carrying out the business and
- 11 other matters of the program.
- 12 (d) Expenses. -- The board shall, through the Governor, submit
- 13 to the General Assembly annually a budget covering the
- 14 administrative expenses of this chapter. The expenses, as
- 15 approved by the General Assembly in an appropriation bill, shall
- 16 be paid:
- 17 (1) from the General Fund; or
- 18 (2) starting in the first fiscal year after the
- transition period is complete and every fiscal year
- thereafter, from reserves and investment earnings of the
- 21 trust fund.
- 22 (e) Meetings.--The board shall hold at least four regular
- 23 meetings annually and other meetings as it may deem necessary.
- 24 (f) Records.--The board shall keep a record of all its
- 25 proceedings which shall be open to inspection by the public.
- 26 (q) Procurement. -- The board shall not be subject to 62
- 27 Pa.C.S. Pt. I (relating to Commonwealth Procurement Code).
- 28 (h) Temporary regulations.--
- 29 (1) Notwithstanding any other provision of law to the
- 30 contrary and in order to facilitate the prompt implementation

- of this chapter, regulations promulgated by the board during
- 2 the two years following the effective date of this chapter
- 3 shall be deemed temporary regulations which shall expire no
- 4 later than three years following the effective date of this
- 5 chapter or upon promulgation of regulations as generally
- 6 provided by law. The temporary regulations shall not be
- 7 subject to:
- 8 (i) Sections 201, 202, 203, 204 and 205 of the act
- 9 of July 31, 1968 (P.L.769, No.240), referred to as the
- 10 Commonwealth Documents Law.
- 11 (ii) The act of June 25, 1982 (P.L.633, No.181),
- 12 known as the Regulatory Review Act.
- 13 (2) The authority provided to the board to adopt
- temporary regulations in this subsection shall expire two
- 15 years from the effect date of this chapter. Regulations
- adopted after the two-year period shall be promulgated as
- 17 provided by law.
- 18 (i) Postretirement benefits study. -- The board shall conduct
- 19 an assessment of public school entity postretirement health care
- 20 liability in this Commonwealth and publish a report providing
- 21 generalized data regarding the scope of the liability to be
- 22 borne by public school entities and measures implemented by
- 23 public school entities to prepare for this liability. This
- 24 assessment may be conducted in conjunction with the study
- 25 required by section 321.
- 26 SUBCHAPTER C
- 27 STUDY AND OPTIONS ELECTION
- 28 Section 321. School employee health benefits study and
- evaluation.
- 30 (a) Study.--The board shall conduct a thorough evaluation of

- 1 existing health care arrangements covering school employees in
- 2 this Commonwealth, examine future cost forecasts and collect
- 3 data necessary to determine if the board could construct and
- 4 sponsor a health care benefit program that would reduce long-
- 5 term costs or the rate of growth of long-term costs in the
- 6 aggregate for public school entities while maintaining a
- 7 comprehensive package of quality health care benefits for school
- 8 employees. The board shall conduct the study as provided under
- 9 this section.
- 10 (b) Data elements. -- No later than 60 days after the board is
- 11 constituted, the board shall determine the information necessary
- 12 to evaluate the existing health care arrangements covering
- 13 school employees in this Commonwealth and begin to collect the
- 14 data, including, but not limited to:
- 15 (1) The total cost of providing medical/hospital and
- 16 prescription drug coverage.
- 17 (2) The types and levels of coverage currently made
- available to school employees.
- 19 (3) The nature of health care purchasing arrangements.
- 20 (4) An explanation and estimate of any financial
- 21 obligation of or funds owed to a public school entity related
- 22 to the termination of coverage under a school district-
- 23 sponsored health benefits plan.
- 24 (5) An estimate of the amount of and basis for claims
- which may be outstanding during the transition for public
- school entities which self-fund their coverage and the status
- of any reserves established for such outstanding claims.
- 28 (6) The term and effect of collective bargaining
- 29 agreements governing health benefits.
- 30 (7) The amount and basis of any school employee cost-

- 1 sharing, both individual and in aggregate.
- 2 (8) The total amount of employer-paid costs in
- 3 aggregate.
- 4 (9) An assessment of any postretirement health care
- 5 benefit liabilities and claims experience data.
- 6 (c) Data sources. -- All entities providing health benefit
- 7 coverage for eligible individuals or administering coverage for
- 8 health benefits under this chapter shall provide information on
- 9 coverage, benefits, plan design, claims data, premiums, cost-
- 10 sharing and financial arrangements as the board shall specify to
- 11 meet the requirements of subsection (b). Notwithstanding any law
- 12 to the contrary, any agency, authority, board, commission,
- 13 council, department or office under the jurisdiction of the
- 14 Governor shall cooperate with the board in its collection of
- 15 health insurance or health care coverage data as specified by
- 16 the board to effectuate this section in accordance with this
- 17 section.
- 18 (d) Public school entities. -- The Secretary of Education
- 19 shall assist the board in obtaining the necessary data for the
- 20 study from public school entities and consortia. In the event it
- 21 is necessary to facilitate the collection of data from a
- 22 noncooperating public school entity or consortium, the Secretary
- 23 of Education may request the State Treasurer to cause the
- 24 suspension of any payment of moneys due to the noncooperating
- 25 public school entity or public school entities that are
- 26 participants in a noncooperating consortium on account of any
- 27 appropriation for schools or other purposes until the necessary
- 28 information is properly provided. A public school entity shall
- 29 be notified before any payments are suspended and may appeal to
- 30 the secretary and request an extension of time if there have

- 1 been extenuating circumstances preventing the timely submission
- 2 of all necessary information. In considering an appeal, the
- 3 secretary may grant an extension of time for the public school
- 4 entity or consortium to provide the necessary information before
- 5 the suspension is instituted. The board is authorized and shall
- 6 authorize school entities and consortia to enter into agreements
- 7 with entities providing or administering coverage for health
- 8 care benefits under this chapter for the purpose of carrying out
- 9 the provisions of this section.
- 10 (e) Health benefit entities.--
- 11 (1) An entity providing or administering health
- insurance or health care coverage for public school
- employees, with the exception of public school entities or
- 14 consortia as provided for in subsection (d), shall, upon the
- written request of the board, public school entities,
- 16 consortium or insured, provide claims and loss information
- 17 within 60 days of the request or sooner, if so determined by
- 18 the board.
- 19 (2) The Insurance Commissioner, the Department of Health
- and any other agency, authority, board, commission, council,
- 21 department or office under the jurisdiction of the Governor
- 22 having regulatory authority over any entity charged under
- paragraph (1), hereafter known as "regulating authority,"
- shall cooperate with the board, if necessary, to obtain
- information from any insurance company, third-party
- 26 administrator or other administrator or provider of health
- insurance benefits for school employees, other than a public
- school entity or consortium. Following notice and hearing,
- the board may impose an order assessing a penalty of up to
- 30 \$1,000 per day upon any entity, other than a public school

1 entity or consortium, that willfully fails to comply with the

2 obligations imposed by this section. If the entity does not

3 comply with the obligations imposed by this section within 15

4 days of an order being imposed, the board shall notify the

5 regulating authority of the failure of an entity under its

jurisdiction to provide data as set forth in this section.

7 Upon notification, the regulating authority shall suspend or

8 revoke the license of the entity or otherwise suspend or

9 revoke the entity's ability to operate until such time as the

board notifies the regulating authority that the entity is in

compliance. The board shall have standing to petition the

12 Commonwealth Court to seek enforcement of the order.

- (3) This subsection shall apply to every entity providing or administering group health coverage in connection with providing health care benefits to school employees within this Commonwealth, including plans, policies, contracts or certificates issued by:
 - (i) A stock insurance company incorporated for any of the purposes set forth in section 202(c) of the act of May 17, 1921 (P.L.682, No.284), known as The Insurance Company Law of 1921.
 - (ii) A mutual insurance company incorporated for any of the purposes set forth in section 202(d) of The Insurance Company Law of 1921.
 - (iii) A professional health services plan corporation as defined in 40 Pa.C.S. Ch. 63 (relating to professional health services plan corporations).
- (iv) A health maintenance organization as defined in the act of December 29, 1972 (P.L.1701, No.364), known as the Health Maintenance Organization Act.

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- 1 (v) A fraternal benefit society as defined in 2 section 2403 of The Insurance Company Law of 1921.
- 3 (vi) A hospital plan corporation as defined in 40 4 Pa.C.S. Ch. 61 (relating to hospital plan corporations).
 - (vii) Health care plans subject to the Employee
 Retirement Income Security Act of 1974 (Public Law
 93-406, 88 Stat. 829), to the maximum extent permitted by
 Federal law.
 - (viii) An administrator as defined in section 1002 of the act of May 17, 1921 (P.L.789, No.285), known as The Insurance Department Act of 1921.
 - (ix) A person licensed pursuant to Article VI-A of The Insurance Department Act of 1921.
 - (x) Any other person providing or administering group health care coverage on behalf of a public school entity, or accepting charges or premiums from a public school entity, in connection with providing health care coverage for school employees, including, but not limited to, multiple employer welfare arrangements, self-insured public school entities and third-party administrators.
- 21 (f) Confidentiality.--Any data requested by or provided to 22 the board pursuant to this section shall comply with the 23 standards for privacy established pursuant to the Health 24 Insurance Portability and Accountability Act of 1996 (Public Law 25 104-191, 110 Stat. 1936).
- 26 (g) Prepared materials.--Any documents, materials or
 27 information solely prepared or created for the purpose of
 28 implementation of subsection (b) are confidential and shall not
 29 be discoverable or admissible as evidence in any civil or
 30 administrative action or proceeding. Any documents, materials,

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- 1 records or information that would otherwise be available from
- 2 original sources shall not be construed as immune from discovery
- 3 or use in any civil or administrative action or proceeding
- 4 merely because they were presented to the board. Nothing in this
- 5 subsection shall be construed to prevent publication or
- 6 dissemination of the aggregate study findings.
- 7 (h) Received materials. -- Any documents, materials or
- 8 information received by the board or by a department under the
- 9 jurisdiction of the Governor on the board's behalf for the
- 10 purpose of implementation of subsection (b) shall not be
- 11 discoverable from the board, any department or the submitting
- 12 entity, nor shall they be admissible as evidence in any civil or
- 13 administrative action or proceeding. Any documents, materials,
- 14 records or information that would otherwise be available from
- 15 original sources shall not be construed as immune from discovery
- 16 or use in any civil or administrative action or proceeding
- 17 merely because they were received by the board or any
- 18 department.
- 19 (i) Document review.--No current or former member or
- 20 employee of the board or any department shall be allowed to
- 21 testify as to any matters by reason of the member's or
- 22 employee's review of documents, materials, records or
- 23 information submitted to the board by the entity providing
- 24 health insurance or health care coverage pursuant to subsection
- 25 (b). The enjoinment of testimony does not apply to findings or
- 26 actions by the board or any department that are public records.
- 27 (j) Original source document. -- In the event an original
- 28 source document as set forth in subsection (g) is determined by
- 29 a court of competent jurisdiction to be unavailable from the
- 30 entity providing health insurance or health care coverage in a

- 1 civil action or proceeding, then, in that circumstance alone,
- 2 the board may be required pursuant to a court order to release
- 3 that original source document to the party identified in the
- 4 court order.
- 5 (k) Right-to-know requests.--Any documents, materials or
- 6 information made confidential by subsection (f) shall not be
- 7 subject to requests under the act of February 14, 2008 (P.L.6,
- 8 No.3), known as the Right-to-Know Law, or any successor statute.
- 9 (1) Liability. -- Notwithstanding any other provision of law,
- 10 no person or entity providing any documents, materials or
- 11 information to the board, any department or other entity on the
- 12 board's behalf shall be held by reason of having provided the
- 13 documents, materials or information to have violated any
- 14 criminal law, or to be civilly liable under any law, unless the
- 15 information is false and the person providing the information
- 16 knew or had reason to believe that the information was false and
- 17 was motivated by malice toward any person directly affected by
- 18 the action.
- 19 Section 322. Board review and election.
- 20 (a) Options assessment.--Upon collection of the necessary
- 21 information, the board shall evaluate existing public school
- 22 entity health care arrangements, examine options that would
- 23 aggregate, either Statewide or regionally, health care coverage
- 24 for public school employees, assess possible cost-management
- 25 improvements and solicit input from public school entities and
- 26 consortia identified with best practice standards. The board
- 27 shall investigate the creation of a Statewide health benefits
- 28 program as provided for in section 331 with the goal of
- 29 improving the overall affordability of providing health care
- 30 coverage for public school employees. The cost projections shall

- 1 be predicated on a plan that provides quality health care
- 2 benefits at a level consistent with those now provided to most
- 3 school employees through existing collective bargaining
- 4 contracts and offers coverage to school employees and other
- 5 eligible individuals.
- 6 (b) Election to proceed with program. -- No later than ten
- 7 months after the board is constituted, unless a request by the
- 8 board for an extension is granted by the Governor, the board
- 9 shall decide whether to implement a Statewide health benefits
- 10 program, as provided for in section 331, or to implement an
- 11 alternative measures program, as provided for in section 351, to
- 12 reduce health coverage costs for public school entities. The
- 13 board's election to implement a Statewide health benefits
- 14 program or to implement an alternative measures program shall
- 15 require approval by a qualified majority vote. Upon election to
- 16 proceed with a Statewide health benefits program, the board
- 17 shall develop a plan for adoption, pursuant to section 323.
- 18 (c) Alternative election. -- If the board decides that a
- 19 Statewide health benefits program cannot be created in
- 20 accordance with subsection (a), or the board fails to achieve
- 21 agreement and approve a plan for implementing a Statewide health
- 22 benefits program, the board will proceed with consideration of
- 23 an alternative measures program that will reduce long-term costs
- 24 or the rate of growth of such costs in the aggregate for public
- 25 school entities in accordance with Subchapter E.
- 26 Section 323. Plan adoption.
- 27 (a) Statewide health benefits program adoption. -- Within
- 28 three months of electing to proceed with the Statewide health
- 29 benefits program, pursuant to section 322(b), the board shall
- 30 verify that implementation of a Statewide health care program

- 1 will result in reduction in the Statewide aggregate cost of the
- 2 purchase of benefits or the rate of growth of such costs and
- 3 adopt a proposed plan for the implementation of the program. The
- 4 proposed plan shall be in writing and shall include a detailed
- 5 description of the program and the transition procedures
- 6 necessary to phase in and implement the program. The board's
- 7 adoption of a proposed plan shall require approval by a
- 8 qualified majority vote.
- 9 (b) Parameters of program. -- The description of the Statewide
- 10 health benefits program shall at minimum include:
- 11 (1) The eligibility requirements for a school employee
- and the employee's health care dependents to qualify for
- 13 participation in the program.
- 14 (2) The identification of the benefits to be included as
- part of the standard benefit package.
- 16 (3) Disclosure of any member cost-sharing contributions,
- 17 whether expressed as a target percentage of overall program
- 18 costs or individually determined as a percentage of salary
- and whether the cost-sharing is uniform on a Statewide basis
- or varies by health care region.
- 21 (4) The designation of health care regions.
- 22 (5) The design of the Statewide pool or regional pools
- that would be established to aggregate public school entities
- for the purpose of purchasing services and managing health
- 25 insurance risks.
- 26 (6) The requirements for electronic eligibility
- transmission between the board and other participating
- entities, including public school entities, consortia and the
- 29 retirement system.
- 30 (7) Financial and accounting plans, including the

- establishment of any necessary reserves or escrow accounts
 with carriers.
- 3 (8) The method to be used to compare costs and levels of 4 health care benefits pursuant to section 332(d)(2).
- 5 (c) Transition procedures.—The description of the steps to 6 phase in and implement the Statewide health benefits program 7 shall at minimum include:
- 8 (1) A determination of when the standard benefit package 9 shall become the mandatory program offering for eligible 10 individuals in a public school entity as health care benefits 11 for school employees are normalized on a Statewide basis.
 - (2) A determination, based on the size and structure of any risk pool established within a health care region, as to when the program would be phased in within that region.
 - (3) The interim steps to aggregate public school entities into a Statewide pool or regional pools, including any best practice standards and benchmarks to be applied to new or existing consortia, or public school entities, or in any selection process to build a Statewide or regional pool.
 - (4) Transition rules on member cost-sharing responsibility until any member cost-sharing is required for all members Statewide, or within any region.
 - (5) Transition rules to limit any negative financial impact on a public school entity required to purchase health care coverage through a Statewide or regional pool and to normalize contribution rates for all participating public school entities within the same health care region.
- 28 (d) Alternative measures program adoption.--Within three 29 months of proceeding with consideration of an alternative 30 measures program pursuant to section 322(c), the board shall

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- 1 adopt a proposed plan for the implementation of an alternative
- 2 measures program, pursuant to Subchapter E, that will result in
- 3 reduction in the Statewide aggregate cost of the purchase of
- 4 benefits or the rate of growth of such costs. The proposed plan
- 5 shall be in writing and shall include a detailed description and
- 6 the transition procedures necessary to phase in and implement
- 7 the alternative measures program. The board's adoption of a
- 8 proposed plan for implementation of an alternative measures
- 9 program shall require approval by a qualified majority vote.
- 10 (e) Legislative and public review.--
- 11 (1) The board shall publish the provisions of any
- 12 proposed plan adopted pursuant to this section in the
- Pennsylvania Bulletin and make it available on the board's
- 14 Internet website. Following publication, the board shall
- schedule at least eight public hearings to solicit public
- input on the plan. The hearings shall be conducted in
- 17 Philadelphia County; Allegheny County; and the Northeast,
- 18 Northwest, Southeast, Southwest, North Central and South
- 19 Central regions of this Commonwealth.
- 20 (2) The board shall submit the provisions of any
- 21 proposed plan adopted pursuant to this section to the
- 22 chairman and minority chairman of the Education Committee of
- 23 the Senate and the chairman and minority chairman of the
- 24 Education Committee of the House of Representatives. The
- committees shall have 45 days to review the proposed plan and
- submit comments to the board.
- 27 (f) Final plan adoption. -- Upon completion of the public
- 28 hearings pursuant to subsection (e)(1) and expiration of the
- 29 committee review pursuant to subsection (e)(2), the board shall
- 30 review all the testimony and comments received regarding the

- 1 proposed plan. The board may, subject to a qualified majority
- 2 vote, make changes and adjustments to the plan to effectuate
- 3 this chapter. Within 90 days of publishing the proposed plan,
- 4 pursuant to subsection (e)(1), the board shall publish the final
- 5 plan, as adopted by the board, in the Pennsylvania Bulletin and
- 6 on the Internet website of the Department of Education.
- 7 (g) Legislative oversight. -- The board shall proceed with
- 8 implementation unless a resolution to the contrary has been
- 9 adopted within 45 days after publication of the plan, in
- 10 accordance with this subsection. Upon publication of the final
- 11 adopted plan in the Pennsylvania Bulletin, the board shall
- 12 submit the plan to the Education Committee of the Senate and the
- 13 Education Committee of the House of Representatives. Either
- 14 committee may recommend to its respective chamber whether the
- 15 board shall be prevented from implementing the plan. If the
- 16 committee recommends the plan not be implemented, the Secretary
- 17 of the Senate or the Chief Clerk of the House of Representatives
- 18 shall place on the calendar for the next legislative day the
- 19 question, in the form of a resolution, of whether the board
- 20 shall proceed with implementation. If the resolution is adopted
- 21 in either chamber, it shall be referred to the Education
- 22 Committee in the opposite chamber which may recommend the board
- 23 not implement the plan. Upon the recommendation, the resolution
- 24 shall be placed on the calendar of the chamber. If a majority of
- 25 the members elected to each House approve the resolution, the
- 26 resolution shall be presented to the Governor for approval or
- 27 disapproval in accordance with section 9 of Article III of the
- 28 Constitution of Pennsylvania.
- 29 (h) Failure to reach consensus. -- If the board fails to
- 30 achieve agreement and approve a plan for implementing a

- 1 Statewide health benefits program by a qualified majority vote
- 2 or if the board fails to achieve agreement and approve a plan
- 3 for implementing an alternative measures program by a qualified
- 4 majority vote, the board shall report as to its findings and
- 5 reasons preventing agreement on a plan to the Governor, the
- 6 President pro tempore of the Senate and the Speaker of the House
- 7 of Representatives.
- 8 SUBCHAPTER D
- 9 STATEWIDE HEALTH BENEFITS PROGRAM
- 10 Section 331. Health benefits program.
- 11 (a) Creation. -- Upon adoption of a Statewide health plan
- 12 under section 323(f), the board shall proceed to initiate and
- 13 sponsor an employee benefits program for eligible individuals.
- 14 (b) Program design. -- The board shall design a program which
- 15 follows the parameters of the plan and transition procedures as
- 16 established in section 323. The board may develop and administer
- 17 the program itself or operate through any legal entity
- 18 authorized by law to do so, including consortia, and the program
- 19 may be developed and administered differently within each health
- 20 care region as long as a standard benefit package that is
- 21 substantially equivalent in coverage, as determined by the
- 22 board, is available to eligible individuals. The program may
- 23 also be administered in whole or in part on a fully insured or
- 24 self-funded basis at the board's sole discretion. The board
- 25 shall seek no fewer than three proposals for the administration
- 26 of the program.
- 27 (c) Implementation. -- The board may:
- 28 (1) Establish pools for selected areas of coverage, such
- 29 as pharmacy services, transplants, stop-loss insurance,
- 30 health care management or other possible areas that in the

- 1 board's judgment can be offered Statewide or regionally on a
- 2 more stable and cost-effective basis. The board may offer
- 3 separate plans to public school entities and consortia prior
- 4 to the phase-in of the standard benefit package.
- 5 (2) Make the program available in some health care
- 6 regions before it is made available within all regions.
- 7 (d) Eligibility requirements. -- The board shall have full
- 8 authority to determine eligibility requirements for benefits and
- 9 to adopt rules and regulations setting forth the same which will
- 10 be binding on all eligible individuals. No coverage shall be
- 11 provided for eligible individuals without payment being made,
- 12 except under circumstances as may be established by the board
- 13 under reasonable guidelines.
- 14 (e) Coverage and plan selection. -- The board shall have full
- 15 authority to select and contract with insurance carriers, health
- 16 maintenance organizations, pharmacy benefit managers, third-
- 17 party administrators, reinsurers and any other entities
- 18 necessary to provide a range of benefit packages to eligible
- 19 individuals through the program. The board shall have full
- 20 authority to determine the nature, amount and duration and
- 21 discontinuation of coverage to be provided.
- 22 (f) Standard and optional benefits.--
- 23 (1) A standard benefit package shall be established by
- the board that shall include coverage for medical and
- 25 hospital services, prescription drugs and may include
- 26 supplemental and other benefits in amounts to be determined
- 27 by the board.
- 28 (2) Within each health care region, the board shall
- approve and make available to each eligible individual
- 30 affiliated with a public school entity which is participating

in the program the following:

- 2 (i) A health care plan that includes coverage the 3 board determines to be the equivalent of the standard 4 benefit package established in paragraph (1).
 - (ii) One or more alternate health care plans or plan designs which in the board's judgment contain benefits equivalent to the standard benefit package in paragraph (1). The deductibles and copayments for each alternate health care plan shall be set and annually adjusted so that the cost of providing the coverage for the Commonwealth and a public school entity is no greater than the cost incurred for the health plan in subparagraph (i).
 - (iii) One or more optional benefit plans, as approved by the board, which allow an eligible individual to purchase coverage that is not included in the standard benefit package, provided that any cost over and above the cost of the health care plan in subparagraph (i) is to be paid by the member except as otherwise provided in section 338(f)(1)(ii).
 - (3) The detailed basis on which payment of benefits is to be made shall be specified in writing. The benefits provided in this chapter are subject to change or modification by the board from time to time as the board, in its discretion, may determine. All changes or modifications shall be specified in writing and communicated to members within a reasonable period of time.
- 28 Section 332. Participation.
- 29 (a) Mandatory participation.--The board shall have the 30 authority to require public school entities to participate in

- 1 the program on a Statewide basis or may phase in and require
- 2 participation on a regional basis. Except as provided under
- 3 subsections (c), (d), (e) and (f), public school entities in any
- 4 health care region designated by the board shall be required to
- 5 participate in the program.
- 6 (b) Transition plan. -- When the board determines pursuant to
- 7 subsection (a) that a public school entity shall be required to
- 8 participate in the program, the public school entity or
- 9 consortium in which the public school entity is a participant
- 10 shall, within a reasonable period of time as determined by the
- 11 board, present to the board a transition plan with a schedule
- 12 for the eventual migration of school employees into the program.
- 13 The board shall review the transition plan with the public
- 14 school entity or consortium and make any necessary modifications
- 15 before granting approval of the plan. A public school entity or
- 16 consortium shall be subject to adherence to the transition plan
- 17 approved by the board.
- 18 (c) Extensions of time. -- The board shall give due
- 19 consideration to a transition plan submitted pursuant to
- 20 subsection (b) that includes a request for an extension of time.
- 21 Requests may be submitted by, but shall not be limited to, any
- 22 of the following:
- 23 (1) A public school entity that participates in a
- 24 consortium where an extension of time is necessary for the
- 25 rundown and proper termination of the consortium's health
- 26 care program.
- 27 (2) A public school entity that participates in a
- consortium where the withdrawal of the public school entity
- 29 may undermine the financial stability of the consortium.
- 30 (3) A public school entity or a consortium which will

- 1 incur a significant financial penalty under terms of a
- 2 contract with an insurance carrier or other provider of
- 3 health care coverage for a contract in existence on or before
- 4 January 1, 2010.
- 5 (4) A public school entity or consortium which will
- 6 incur a significant financial cost, including fees, penalties
- 7 or other contractual financial obligations, related to the
- 8 termination of coverage under a contract of insurance or, in
- 9 the case of a public school entity that self-insures,
- 10 insufficient reserves to pay claims incurred during the
- 11 previous coverage year, if the obligation relates to a plan
- of coverage that was in existence on or before January 1,
- 2010, and the public school entity or consortium provides the
- 14 board with a financial plan for meeting these obligations.
- 15 (d) Rejection of participation. -- Within 60 days of creation
- 16 of the health benefits program under section 331(a), a public
- 17 school entity may reject participation in the program under the
- 18 following conditions:
- 19 (1) the governing body of the school entity and the
- school employee union representing the greatest number of
- 21 school employees in the school entity that would be covered
- 22 by the program when it is fully operational execute a
- 23 memorandum of understanding rejecting participation in the
- 24 program that is approved by a majority of the members of the
- governing body and a majority of the employees that would be
- 26 covered by the program; and
- 27 (2) the memorandum of understanding demonstrates that
- 28 participation in the program would result in:
- 29 (i) payment by the school entity on behalf of school
- 30 employees and their eligible health care dependents that

- 1 would exceed the cost, excluding any employee cost-
- 2 sharing, of providing, purchasing and administering
- 3 health care benefits to members who are school employees
- 4 and their eligible health care dependents in the year
- 5 before implementation of the program;
- 6 (ii) a reduction in the coverage of health care
- 7 benefits for school employees; provided that, if more
- 8 than one plan is available to school employees in the
- 9 school entity, this comparison shall be with the health
- 10 care plan that covers the greatest number of bargaining
- 11 unit members; or
- 12 (iii) both (i) and (ii).
- 13 (e) Optional membership. -- No school district of the first
- 14 class, as classified pursuant to section 202 of the Public
- 15 School Code, shall be required to participate in the program,
- 16 except as may be agreed upon under terms of a collective
- 17 bargaining agreement covering a majority of employees of a
- 18 school district of the first class. Upon a school district of
- 19 the first class entering participation in the program pursuant
- 20 to a collective bargaining agreement, continued participation in
- 21 the program shall become mandatory.
- 22 (f) Prohibited membership. -- A public school entity that, on
- 23 the effective date of this chapter, participates in the
- 24 Pennsylvania Employees' Benefit Trust Fund shall be prohibited
- 25 from participating in the program, and employees of the public
- 26 school entity shall not have the right to elect membership in
- 27 the program.
- 28 (g) Transition of employees. -- A public school entity that
- 29 provides some or all of its employees with health benefits
- 30 through another health care plan by virtue of one or more

- 1 collective bargaining agreements, entered into prior to the
- 2 effective date of this chapter, shall not be required to join
- 3 the program until expiration of the collective bargaining
- 4 agreements. The public school entity and some or all of its
- 5 employees or bargaining representatives of its employees may by
- 6 mutual agreement and approval of the board join the program at
- 7 an earlier date. Renewal or extension of a collective bargaining
- 8 agreement shall constitute its expiration for the purpose of
- 9 this subsection.
- 10 Section 333. Continuation of coverage and transfer employees.
- 11 (a) Annuitants.--Upon retirement, an annuitant eligible
- 12 under paragraph (1) or (2) shall have the option to elect
- 13 coverage in the program, including coverage for any eligible
- 14 health care dependent. The annuitant shall be responsible to pay
- 15 the full cost of the coverage, unless a public school entity has
- 16 agreed, separate from any requirements of the program, to pay
- 17 toward the coverage pursuant to an award of health benefits
- 18 under a written policy or agreement collectively bargained or
- 19 otherwise entered into by the public school entity. The board
- 20 shall annually determine the cost of coverage as follows:
- 21 (1) For an annuitant who is enrolled in the program
- 22 pursuant to section 513 of the Public School Code or an
- annuitant who pursuant to any award of health benefits for
- 24 annuitants under a written policy or agreement collectively
- 25 bargained or otherwise entered into by the public school
- 26 entity prior to the effective date of this section, payments
- 27 shall be based on the total contribution rate established
- pursuant to section 334(b) and (c) for a school employee in
- the same health care region, plus a 2% administrative fee.
- 30 (2) For an annuitant, other than an annuitant qualified

- for coverage under paragraph (1), payments shall be made on the same basis as an annuitant qualified for coverage under paragraph (1), except as determined as follows:
 - (i) The board shall periodically have the actuary review and determine the separate cost of providing continuation of coverage to annuitants under this paragraph, along with an assessment of its impact on the cost of providing coverage to members who are school employees and annuitants qualified for coverage under paragraph (1). The review and assessment shall first occur as part of the school employee health benefits study and evaluation conducted pursuant to section 321 and its results shall be considered in the development of parameters under section 323(b).
 - (ii) The board shall consider the findings of the actuary in subparagraph (i) to determine if there is a substantial impact on the cost of providing coverage to members who are school employees and annuitants qualified for coverage under paragraph (1). If there is a substantial cost impact, the board shall require payments for an annuitant qualified to elect coverage in the program under this paragraph to be separately determined and the contribution rate to be based on the disaggregated cost of providing the coverage, plus a 2% administrative fee.
- 26 (b) Separation from service.—The board shall determine the 27 eligibility of members, other than annuitants covered by 28 subsection (a), to elect continuation of coverage in the program 29 upon separation from service as a school employee. The member 30 shall be responsible to pay the full cost of the coverage in the

- 1 member's health care region, plus an administrative fee to be
- 2 set by the board. The board shall, at minimum, provide
- 3 continuation of coverage eligibility that meets the requirements
- 4 of Title X of the Employee Retirement Income Security Act of
- 5 1974 (Public Law 99-272, 29 U.S.C. § 1161 et seq.) and provide
- 6 the continuation of coverage options required pursuant to 51
- 7 Pa.C.S. § 7309 (relating to employment discrimination for
- 8 military membership or duty) for members on military leave.
- 9 (c) Transfer employees. -- The board may, in its discretion,
- 10 approve the participation of transfer employees in the program,
- 11 provided that any position for which a transfer employee who is
- 12 provided health benefits in a health care plan sponsored by a
- 13 public school entity through an agreement that was in existence
- 14 on or before January 1, 2010, with the transfer employee's
- 15 employer shall be allowed to participate in the program. The
- 16 board shall set the terms and conditions necessary for
- 17 participation in the program, including the cost of coverage to
- 18 be paid by the third-party entity which shall be based on the
- 19 full cost of coverage in the health care region as determined by
- 20 the board, plus an administrative fee. The sponsoring public
- 21 school entity shall be responsible to the board for the
- 22 collection of the payments for transfer employees from the
- 23 third-party entity.
- 24 Section 334. Partnership for stable benefits funding.
- 25 (a) Basis of partnership. -- In recognition that the long-term
- 26 viability and stability of the program will require public
- 27 school entity employers, members and the Commonwealth to be
- 28 partners both in sustaining the health benefits program as well
- 29 as managing the costs of a reasonable and appropriate standard
- 30 benefit package, the board shall determine for each plan year

- 1 and in each region the payments due from public school entities,
- 2 from members and from the Commonwealth.
- 3 (b) Determination of contribution rate.--The board shall
- 4 determine for each plan year the total amount of the
- 5 contributions by the Commonwealth, public school entities and
- 6 school employees required to provide projected benefits for that
- 7 plan year under the standard benefit package on behalf of each
- 8 school employee member and the employee's eligible health care
- 9 dependents. The contribution rate shall consist of the amount
- 10 required to provide the standard benefit package, including
- 11 appropriate reserves and administrative expenses, and shall be
- 12 adjusted for each health care region to reflect the cost of
- 13 benefits in that region. The contribution rates may
- 14 differentiate between single coverage for members only and types
- 15 of family coverage, as determined by the board.
- 16 (c) Certification of rate. -- The board shall certify the
- 17 contribution rate for each health care region to the
- 18 Commonwealth and public school entities, including the payments
- 19 that shall be due from public school entities, from members and
- 20 from the Commonwealth. The certifications shall be regarded as
- 21 final and not subject to modification by the Secretary of the
- 22 Budget.
- 23 (d) Commonwealth cost share. -- The Commonwealth shall make a
- 24 contribution to offset a portion of the cost increase consistent
- 25 with subsections (e) and (f) for any plan year in which the
- 26 board determines that the aggregate cost of providing the
- 27 standard benefit package on behalf of members who are school
- 28 employees and their eligible health care dependents exceeds the
- 29 sum of:
- 30 (1) the projected carry-over balance for the plan year

- 1 in the employer contribution account after all required
- 2 transfers have been made to the employee benefits account for
- 3 the prior year; and
- 4 (2) any employee cost-sharing for the plan year.
- 5 (e) Budget submission and appropriation. -- If the board
- 6 determines that the requirements of subsection (d) have been
- 7 met, all of the following shall occur:
- 8 (1) The board shall submit to the Secretary of the
- 9 Budget an itemized budget specifying the amount necessary to
- 10 be appropriated by the Commonwealth consistent with
- 11 subsection (f). The budget submission shall be on a form and
- in a manner determined by the Secretary of the Budget and
- shall occur no later than November 1 of the fiscal year
- 14 preceding the plan year for which funds are requested.
- 15 (2) Upon appropriation by the General Assembly to
- 16 provide for the obligations of the Commonwealth, the amount
- 17 shall be paid by the State Treasurer through the Department
- 18 of Revenue into the employer contribution account within 30
- days of receipt of the requisition presented each month by
- the board.
- 21 (f) Limitation on Commonwealth contribution.--
- 22 (1) The Commonwealth shall not be obligated to pay any
- amount beyond that which is appropriated by the General
- Assembly. The amount requested by the board pursuant to
- subsection (e) (1) shall not exceed the sum of any amount paid
- 26 by the Commonwealth for the fiscal year preceding the plan
- year for which funds are requested and the lesser of:
- 28 (i) 50% of the amount that the board determines is
- 29 necessary to meet the increase in the contribution rate
- on behalf of members who are school employees determined

1 pursuant to subsection (b); and

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(ii) the product of the total revenue transferred in the prior plan year from the employer contribution account to the employee benefits account and the most recent annual percent change in the per enrollee private health insurance premium for all benefits, as defined in the National Health Expenditure Data published by the Centers for Medicare and Medicaid Services, Department of Health and Human Services.

- (2) If any excess revenue in the employer contribution account is to be applied to payments for the plan year, then the excess revenue shall be used to reduce the calculation under this subsection in proportion to the Commonwealth's share of the total increase in the contribution rate on behalf of active members for the plan year.
- 16 (g) Additional optional contribution.—Notwithstanding the
 17 limitation in subsection (f), the General Assembly may
 18 appropriate additional revenue to the employer contribution
 19 account in any fiscal year.
- 20 (h) Allocation of Commonwealth contribution. -- Any contribution made by the Commonwealth under this section shall 21 22 be used to offset an increase in the contribution rate paid in a 23 health care region by public school entities on behalf of 24 members who are school employees and their eligible health care 25 dependents and to maintain any offset that was paid in a prior 26 year. The Commonwealth contribution shall be allocated to offset a portion of each participating public school entity's cost of 27 28 coverage on a per-member basis, for members who are school 29 employees and their eligible health care dependents, based on 30 the public school entity's market value/income aid ratio using

- 1 the most recent data provided by the Department of Education.
- 2 For any public school entity that is not assigned a market
- 3 value/income aid ratio by the Department of Education, the
- 4 Commonwealth contribution shall not be adjusted based on a
- 5 market value/income aid ratio. For the purpose of this
- 6 subsection, "market value/income aid ratio" shall have the same
- 7 meaning given to it in the Public School Code.
- 8 (i) Contributions on behalf of school employees. -- Consistent
- 9 with any transition procedure pursuant to section 323(c)(5),
- 10 each public school entity shall be required to make payments to
- 11 the trust fund on behalf of members who are school employees and
- 12 their eligible health care dependents based on the contribution
- 13 rate certified by the board in subsection (c). The increase in
- 14 payments made from one year to the next by public school
- 15 entities on behalf of school employees shall be equal to or
- 16 greater than the increase in payment from one year to the next
- 17 made pursuant to subsection (d), excluding any additional
- 18 optional contribution made by the Commonwealth pursuant to
- 19 subsection (g).
- 20 (j) Deduction from appropriations. -- In the event a public
- 21 school entity does not make the required payment in the time
- 22 allotted, as determined by the board, the Secretary of Education
- 23 and the State Treasurer shall cause to be deducted and paid into
- 24 the trust fund from the amount of any moneys due to any public
- 25 school entity on account of any appropriation for schools or
- 26 other purposes the amount due to the trust fund as certified by
- 27 the board and as remains unpaid on the date such appropriations
- 28 would otherwise be paid to the public school entity by the
- 29 Department of Education, and the amount shall be credited to the
- 30 public school entity's account in the trust fund.

- 1 (k) Transition. -- Until any transition pursuant to section
- 2 323(c)(5) has been completed, the payments made by each public
- 3 school entity shall be no less than the total amount paid by the
- 4 public school entity to provide, purchase and administer health
- 5 care benefits to members who are school employees and their
- 6 eligible health care dependents in the year before
- 7 implementation of the program. Any contributions received by the
- 8 public school entity from school employees in the form of cost-
- 9 sharing payments for health care coverage shall be excluded from
- 10 the amount.
- 11 (1) Referendum exception.--
- 12 (1) In addition to the exceptions provided for in
- section 333(f) of the act of June 27, 2006 (1st Sp.Sess.,
- 14 P.L.1873, No.1), known as the Taxpayer Relief Act, the costs
- specified in paragraph (2) shall constitute an exception to
- the referendum requirements of section 333(c) of the Taxpayer
- 17 Relief Act subject to department approval pursuant to section
- 18 333(j) of the Taxpayer Relief Act.
- 19 (2) Costs incurred by a school district in providing
- 20 health care-related benefits which are attributable to the
- 21 school district's participation in the program shall
- constitute an expenditure for purposes of section 333(f)(1)
- and (2) of the Taxpayer Relief Act to the extent the
- 24 anticipated increase in such costs between the current year
- and the upcoming year is greater than the index established
- for the school district pursuant to section 313(1)(ii) of the
- 27 Taxpayer Relief Act. The dollar amount of this exception
- shall be equal to the portion of the increase which exceeds
- 29 the index established for the school district pursuant to
- 30 section 313(1)(ii) of the Taxpayer Relief Act.

- 1 Section 335. Powers and duties of board.
- 2 (a) Powers. -- In addition to the powers granted by other
- 3 provisions of this chapter, the board shall have the powers
- 4 necessary or convenient to carry out this subchapter, including,
- 5 but not limited to, the power to:
- 6 (1) Determine appropriate geographic health care regions
- 7 for the administration of the program and make changes to the
- 8 regions as necessary; provided, that a school district of the
- 9 first class shall be designated as its own health care
- 10 region.
- 11 (2) Formulate and establish the conditions of
- 12 eligibility, including eligibility for health care dependent
- 13 coverage for members, to include consideration if a member or
- health care dependent is covered, or eligible for coverage,
- under another employer-sponsored group health insurance plan;
- provisions for payment of benefits; and all other provisions
- that may be required or necessary to carry out the intent and
- 18 purpose of the program.
- 19 (3) Determine and make necessary changes to the standard
- 20 benefit package and benefit structure of the program.
- 21 (4) Establish copayments, annual deductibles,
- 22 coinsurance levels, exclusions, formularies and other
- coverage limitations and payment responsibilities of members
- incurred at the time of service.
- 25 (5) Set and adjust member cost-sharing contributions to
- 26 be expressed as a target percentage of overall program costs
- or individually determined as a percentage of salary. The
- 28 board shall determine whether member cost-sharing shall be
- 29 uniform on a Statewide basis or shall vary by health care
- 30 region.

- 1 (6) Impose and collect necessary fees and charges.
- 2 (7) Determine enrollment procedures.
- 3 (8) Establish procedures for coordination of benefits 4 with other plans and third-party payers, including 5 coordinating benefits or contracting directly with Medicare.
 - (9) Establish a plan with the retirement system to coordinate health care coverage for annuitants between the program established by this chapter and the group health insurance program sponsored by the retirement system under the provisions of 24 Pa.C.S. Ch. 89 (relating to group health insurance program) and to coordinate the sharing of information pertaining to premium assistance payment transfers.
 - (10) Set and adjust contribution rates sufficient to maintain the adequacy of any reserves established by this chapter and to fully fund the benefits offered by and to pay for the administrative expenses related to the program.
 - (11) Set and adjust costs for members electing to continue coverage upon retirement or separation from employment. The board may establish different cost rates to be charged for different categories of members electing to continue coverage.
 - (12) Purchase insurance or employ self-insurance, alone or in combination, to provide benefits as shall be determined by the board.
 - (13) Establish appropriate reserves based on generally accepted standards as applied by Federal and State regulators to similar types of plans.
- 29 (14) Issue self-liquidating debt or borrow against 30 contributions, payments or other accounts receivable for the

- purposes of prepaying any health benefits, establishing reserves or otherwise lowering the cost of coverage.
 - (15) Establish procedures to verify the accuracy of statements and information submitted by eligible individuals on enrollment forms, claim forms or other forms.
 - (16) Receive and collect all contributions due and payable to the accounts or delegate to a public school entity or claims processor the right to receive contributions, payments or perform ministerial functions required to assert the board's rights. In so doing, the board shall have the right to:
 - (i) maintain any and all actions and legal proceedings necessary for the collection of contributions; and
- 15 (ii) prosecute, defend, compound, compromise,

 16 settle, abandon or adjust any actions, suits,

 17 proceedings, disputes, claims, details and things related

 18 to the accounts and program.
 - (17) Establish procedures to hear and determine any claims and controversies under this chapter.
- 21 (18) Promulgate rules and regulations regarding the 22 administration of the program, including the establishment of 23 the plan year.
- 24 (19) Ensure that a public school entity provides
 25 detailed information about the program to eligible employees
 26 at least 90 days before program coverage begins to be offered
 27 to school employees.
- 28 (20) Seek and take all necessary steps to retain
 29 eligibility for the members, public school entities and the
 30 Commonwealth to receive tax-preferred or tax-free treatment

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- 1 under the IRC for contributions to and earnings of the trust 2 fund.
- 3 Enter into agreements with entities providing or administering coverage for health benefits under this chapter 4 5 for the electronic exchange of data between the parties at a frequency as determined by the board. 6
 - Perform and do any and all such actions and things that may be properly incidental to the exercising of powers, rights, duties and responsibilities of the board.
- (23) Determine best practice standards and benchmarks for consortia in any selection process to build a Statewide pool or regional pools, including the power to require a consortium to merge with another consortium. The board shall have the power to require consortia, as a condition of 15 continued participation in the program, to accept any public 16 school entity applying to join and participate in a 17 consortium.
- 18 (24) Enter into agreements with any public school entity 19 or consortium to implement the program developed pursuant to 20 this chapter and delegate powers necessary to administer 21 coverage for health benefits.
- 22 Administrative duties of board. -- In addition to other 23 duties of the board provided in this chapter, the following 24 duties shall be afforded to the board for the implementation of
- this section. 25

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- 26 (c) Regulations and procedures .-- The board shall, with the
- 27 advice of the Office of General Counsel and the actuary, adopt
- 28 and promulgate rules and regulations for the uniform
- 29 administration of the program. The actuary shall approve in
- writing all computational procedures used in the calculation of 30

- 1 contributions and the cost of benefits, and the board shall by
- 2 resolution adopt the computational procedures prior to their
- 3 application by the board. The rules, regulations and
- 4 computational procedures as so adopted from time to time and as
- 5 in force and effect at any time, together with tables that are
- 6 adopted as necessary for the calculation of contributions and
- 7 the cost of benefits, shall be effective as if fully set forth
- 8 in this chapter.
- 9 (d) Data.--The board shall keep in electronic format records
- 10 of claims, eligibility and other data as are stipulated by the
- 11 actuary in order that an annual contribution rate determination
- 12 for each health care region and various program options can be
- 13 completed within six months of the close of each plan year. The
- 14 board shall have final authority over the means by which data is
- 15 collected, maintained and stored and in so doing shall protect
- 16 the rights of its membership as to privacy and confidentiality.
- 17 (e) Annual financial statement. -- The board shall prepare and
- 18 have published within six months following the end of each plan
- 19 year a financial statement showing the condition of the trust
- 20 fund as of the end of the previous plan year. The board shall
- 21 submit said financial statement to the Governor and shall make
- 22 copies available to public school entities for the use of the
- 23 school employees and the public.
- 24 (f) Independent audit. -- The board shall provide for an
- 25 annual audit of the trust fund by an independent certified
- 26 public accounting firm.
- 27 (g) Manual of regulations. -- The board shall, with the advice
- 28 of the Office of General Counsel and the actuary, prepare within
- 29 six months of the commencement of a program adopted under this
- 30 chapter a manual incorporating rules and regulations consistent

- 1 with the provisions of this chapter for each participating
- 2 public school entity that shall make information contained in
- 3 the manual available to school employees. The board shall
- 4 thereafter advise public school entities within 90 days of any
- 5 changes in rules and regulations due to changes in the law or
- 6 due to changes in administrative policies.
- 7 (h) Annual budget.--The board shall establish an annual
- 8 budget for the program and make disbursements from the trust
- 9 fund that are consistent with the budget.
- 10 (i) Program assistance. -- The board may solicit and accept
- 11 grants, loans and other aid from any person, corporation or
- 12 other legal entity or from the Federal, State or local
- 13 government and participate in any Federal, State or local
- 14 government program if necessary for prudent management of the
- 15 program.
- 16 (j) Functions. -- The board shall perform other functions as
- 17 are required for the execution of this chapter and shall have
- 18 the right to inspect employment records of public school
- 19 entities.
- 20 (k) Qualified majority voting provision. -- A qualified
- 21 majority vote shall be required on any matter voted upon by the
- 22 board affecting the development of or any change in:
- 23 (1) The plan to implement the program adopted pursuant
- to section 323(f).
- 25 (2) The standard benefit package, benefit options or
- 26 plan design offered by the program to covered employees.
- 27 (3) Membership eligibility criteria.
- 28 (4) The addition, deletion or significant change in
- 29 status of an insurance carrier, benefits administrator or
- other major contractor in the administration of benefits, or

- 1 the addition, deletion or significant change in status of a
- 2 health care provider network.
- 3 (5) Any determination on the use of excess fund 4 payments.
- 5 (6) The overall per-employee cost of the standard 6 benefit package to the trust fund and any public school 7 entity funding and member cost-sharing responsibilities.
- 8 (7) Cost containment measures such as managed care, 9 wellness centers and large case management.
- 10 (8) Contracts valued at more than \$25,000,000.
- 11 (9) Changes in trust document, bylaws or any major 12 internal operating policies or procedures, such as claims 13 appeal procedures, not to include routine ministerial 14 functions.
- 15 (10) The alternative measures program created pursuant 16 to section 351(a).
- 17 (11) Approve employment of and contracts with 18 consultants and professional personnel.
- 19 (1) Duties conferred upon secretary. -- The secretary of the
- 20 board shall supervise a staff of administrative, technical and
- 21 clerical employees engaged in recordkeeping and clerical
- 22 processing activities in maintaining files of members,
- 23 accounting for contributions, processing payments, preparing
- 24 required reports and counseling.
- 25 Section 336. Public School Employees' Benefit Trust Fund.
- 26 (a) Establishment of trust fund. -- The Public School
- 27 Employees' Benefit Trust Fund is established in the State
- 28 Treasury. The moneys of the trust fund are appropriated on a
- 29 continuing basis and shall be used exclusively for the purposes
- 30 set forth in this chapter. All of the assets of the trust fund

- 1 shall be maintained and accounted for, separate from all other
- 2 funds and moneys of the Commonwealth. The Treasury Department
- 3 shall credit to the trust fund all moneys received from the
- 4 Department of Revenue arising from the contributions required
- 5 under this chapter and all earnings from investments or moneys
- 6 of the trust fund. There shall be established and maintained by
- 7 the board the several ledger accounts, including:
- 8 (1) The employee benefits account shall be the ledger
- 9 account to which shall be credited the payments from section
- 333(a),(b) and (c), payments from members for cost sharing
- and any additional member-paid cost associated with optional
- benefit packages elected by members and transfers from the
- employer contribution account as provided in paragraph (3).
- 14 All earnings derived from investment of the assets of the
- employee benefits account shall be credited to this account.
- 16 The board is authorized to separately invest the amounts in
- the employee benefits account in a prudent manner intended to
- 18 maximize the safety of the capital contained in the employee
- 19 benefits account. Payments for member health care benefits
- and the direct administrative expenses of the board related
- 21 to the administration of the employee benefits program, as
- provided in section 312(d), shall be charged to this account.
- 23 (2) Reserve account.
- 24 (i) A restricted reserve account, or more than one
- 25 account if the board determines it necessary to have
- segregated accounts, is established within the trust fund
- for the purpose of establishing and maintaining a reserve
- or separate reserves sufficient:
- 29 (A) to pay the expected claims experience of the
- 30 program in the event the board elects to self-fund

all or a portion of the program for any plan years;

(B) to prefund the accrued liability for any postretirement health care benefits earned by employees enrolled in the program pursuant to section 333(a)(1) as the benefit is earned by the employees; and

- (C) to amortize the unfunded actuarial accrued liability for postretirement health care benefits already earned by employees and annuitants pursuant to section 333(a)(1) in the event the board elects to assume all or a portion of the liability. The board shall use an amortization period that does not exceed 30 years for this purpose.
- (ii) The board shall annually establish through an actuary retained by the board the amount necessary, if any, to establish and maintain a reserve or separate reserves sufficient for the purposes of this paragraph. Any moneys needed to maintain the reserve or separate reserves established under this paragraph shall be collected through the adjustment of the contribution rate established pursuant to section 334(b) and (c) or through other available sources.
- (iii) The moneys in any reserve account may be invested by the board separate from other moneys of the trust fund. All earnings derived from investment of the assets of any reserve account shall be credited to the reserve account.
- (3) The employer contribution account shall be the ledger account to which shall be credited all contributions made by the Commonwealth as determined in accordance with

- 1 section 334(e) and payments from public school entities as
- 2 determined in accordance with section 334(i), as well as all
- 3 earnings derived from the investment of the assets of the
- 4 employer contribution account. The total amount of the
- 5 Commonwealth and public school entity contributions required
- 6 to provide the standard benefit package on behalf of all
- 7 members who are school employees and their eligible health
- 8 care dependents shall be transferred on a monthly basis to
- 9 the employee benefits account.
- 10 (b) Composition. -- The trust fund shall consist of:
- 11 (1) All payments made by members or received from the
- 12 Commonwealth and public school entities and all interest,
- 13 earnings and additions thereto.
- 14 (2) Any other money, public or private, appropriated or
- made available to the board for the trust fund or any reserve
- 16 account from any source and all interest, earnings and
- 17 additions thereto.
- 18 (c) Administration of trust and associated funds. -- The
- 19 assets of the trust fund shall be preserved, invested and
- 20 expended solely pursuant to and for the purposes set forth in
- 21 this chapter.
- 22 (d) Control and management of trust fund. --
- 23 (1) The board shall have exclusive control and
- 24 management of the trust fund and full power to invest and
- 25 manage the assets of each account of the trust fund as a
- 26 prudent investor would, by considering the purposes, terms
- and other circumstances of each account and by pursuing an
- overall investment strategy reasonably suited to the trust
- 29 fund.
- 30 (2) The board may invest in every kind of property and

- 1 type of investment, including, but not limited to, mutual
- 2 funds and similar investments, consistent with this
- 3 subsection.
- 4 (3) In making investment and management decisions, the
- 5 board shall consider, among other things, to the extent
- 6 relevant to the decision or action:
- 7 (i) the size and nature of the account;
- 8 (ii) the liquidity and payment requirements of the
- 9 account;
- 10 (iii) the role that each investment or course of
- action plays in the overall investment strategy;
- 12 (iv) to the extent reasonably known to the board,
- the needs for present and future payments; and
- 14 (v) the reasonable diversification of assets, taking
- into account the purposes, terms and other circumstances
- of the trust fund and the requirements of this section.
- 17 (e) Custodian of trust fund.--The State Treasurer shall be
- 18 the custodian of the trust fund.
- 19 (f) Name for transacting business. -- By the name of "The
- 20 Public School Employees' Benefit Trust Fund," all of the
- 21 business of the trust fund shall be transacted, its fund
- 22 invested, all requisitions for money drawn and payments made and
- 23 all of its cash and securities and other property shall be held,
- 24 except that, any other law to the contrary notwithstanding, the
- 25 board may establish a nominee registration procedure for the
- 26 purpose of registering securities in order to facilitate the
- 27 purchase, sale or other disposition of securities.
- 28 (g) Payment from trust fund. -- All payments from the trust
- 29 fund shall be made by the State Treasurer in accordance with
- 30 requisitions signed by the secretary of the board or the

- 1 secretary's designee. The board shall reimburse the State
- 2 Treasurer for the cost of making disbursements from the trust
- 3 fund.
- 4 (h) Fiduciary status of board.--Board members, employees of
- 5 the board and agents thereof shall stand in a fiduciary
- 6 relationship to the members regarding the investments and
- 7 disbursements of any of the moneys of the trust fund and shall
- 8 not profit either directly or indirectly with respect thereto.
- 9 (i) Transfers.--The board may transfer moneys among the
- 10 various accounts of the trust fund, including any reserve
- 11 accounts established under subsection (a)(2), as may be
- 12 necessary to satisfy the provisions of this chapter. Transfers
- 13 from funds retained in the reserve account pursuant to
- 14 subsection (a)(2)(i)(A) may be made only for the payment of
- 15 claims or expected claims as determined by the actuary retained
- 16 by the board. Transfers from funds retained in the reserve
- 17 account pursuant to subsection (a)(2)(i)(B) or (C) may be made
- 18 only for paying toward the cost of providing health care
- 19 benefits to annuitants enrolled in the program pursuant to
- 20 section 333(a)(1).
- 21 (j) Additional powers of board. -- The board may:
- 22 (1) Adopt, from time to time, appropriate investment
- 23 policy guidelines and convey the same to those fiduciaries
- 24 who have the responsibility for the investment of funds.
- 25 (2) Retain such portion of the moneys of the accounts in
- 26 cash or cash balances as the board may deem desirable,
- 27 without any liability or interest thereon.
- 28 (3) Settle, compromise or submit to arbitration all
- 29 claims or damages due from or to the accounts, commence or
- defend any legal, equitable or administrative proceedings

- 1 brought in connection with the program and represent the
- 2 trust fund in all proceedings under this paragraph.
- 3 (k) Additional duties of secretary. -- The secretary of the
- 4 board shall serve as liaison to the Treasury Department, the
- 5 Department of the Auditor General and between the board and the
- 6 investment counsel and the mortgage supervisor in arranging for
- 7 investments to secure maximum returns to the trust fund.
- 8 Section 337. Misrepresentation, refusal to cooperate and fraud.
- 9 (a) Misrepresentation. -- If the eligible individual or anyone
- 10 acting on behalf of an eligible individual makes a false
- 11 statement or withholds information on the application for
- 12 enrollment with intent to deceive or affect the acceptance of
- 13 the enrollment application or the risks assumed by the program
- 14 or otherwise misleads the board, the board shall be entitled to
- 15 recover its damages, including legal fees, from the eligible
- 16 individual or from any other person responsible for misleading
- 17 the board and from the person for whom the benefits were
- 18 provided. Any material misrepresentation on the part of the
- 19 eligible individual in making application for coverage or any
- 20 application for reclassification thereof or for service
- 21 thereunder shall render the coverage under the program null and
- 22 void.
- 23 (b) Refusal to cooperate. -- The board may refuse to pay
- 24 benefits, or cease to pay benefits, on behalf of an eligible
- 25 individual who fails to sign any document deemed by the board to
- 26 be relevant to protecting its subrogation rights or certifying
- 27 eligibility or who fails to provide relevant information when
- 28 requested. As used in this subsection, the term "information"
- 29 includes any documents, insurance policies, police reports or
- 30 any reasonable request by the claims processor to enforce the

- 1 board's rights.
- 2 (c) Penalty for fraud. -- In any case in which the board finds
- 3 that an eligible individual is receiving benefits based on false
- 4 information, the additional amounts received predicated on the
- 5 false information, together with interest doubled and compounded
- 6 and legal fees, shall be due from the member. To secure payment
- 7 of funds, the board shall have the right to garnish or attach
- 8 all or a portion of any compensation payable to the party by the
- 9 party's employer, any annuity payable to the party by the
- 10 retirement system, any accumulated deductions held by the
- 11 retirement system in the party's account or any process
- 12 whatsoever.
- 13 Section 338. Miscellaneous provisions.
- 14 (a) Construction of chapter.--
- 15 (1) Any termination or other modifications of the
- program, including, but not limited to, a change in rates,
- 17 benefits options or structure of the provision of health care
- 18 benefits, shall not give rise to any contractual rights or
- 19 claims by any eligible individuals or any other person
- 20 claiming an interest, either directly or indirectly, in the
- 21 program. No provisions of this chapter, nor any rule or
- regulation adopted pursuant to this chapter, shall create in
- any person a contractual right in that provision.
- 24 (2) The provisions of this chapter are severable and if
- any of its provisions shall be held to be unconstitutional,
- the decision of the court shall not affect or impair any of
- the remaining provisions. It is hereby declared to be the
- legislative intent that this chapter would have been adopted
- 29 had the unconstitutional provisions not been included.
- 30 (3) This subsection shall not apply to policies designed

- 1 primarily to provide coverage payable on a per diem, fixed
- 2 indemnity or nonexpense incurred basis, or policies that
- 3 provide accident only coverage, where payment for such policy
- 4 is made solely by the school employee.
- 5 (b) Hold harmless.--Neither the Commonwealth nor the board,
- 6 including their respective officers, directors and employees,
- 7 shall be liable for any claims, demands, actions or liability of
- 8 any nature, including, but not limited to, attorney fees and
- 9 court costs, based upon or arising out of the operations of the
- 10 program, whether incurred directly or indirectly. The eligible
- 11 individuals who enroll and participate in the program shall be
- 12 deemed to agree, on behalf of themselves and their heirs,
- 13 successors and assigns, to hold harmless the Commonwealth and
- 14 the board, including their respective officers, directors and
- 15 employees, from any claims, demands, actions or liability of any
- 16 nature, whether directly or indirectly, including attorney fees
- 17 and court costs, based upon or arising out of the operation of
- 18 the program.
- 19 (c) No recourse.--Under no circumstances shall the assets of
- 20 the Commonwealth be liable for or its assets be used to pay any
- 21 claims, demands, actions or liability of any nature, whether
- 22 directly or indirectly, including, but not limited to, attorney
- 23 fees and court costs, based upon or arising out of the operation
- 24 of the program.
- 25 (d) Reservation of immunities. -- Nothing contained in this
- 26 chapter shall be construed as a waiver of the Commonwealth's or
- 27 board's immunities, defenses, rights or actions arising out of
- 28 their sovereign status or from the 11th amendment to the
- 29 Constitution of the United States.
- 30 (e) Collective bargaining, mediation and binding

- 1 arbitration. -- Except as otherwise provided in subsection (f),
- 2 nothing in this chapter or in any other law shall be construed
- 3 to permit, authorize or require collective bargaining, mediation
- 4 or binding arbitration to create, alter or modify health
- 5 benefits set forth in this chapter or administered by the board
- 6 for school employees and their health care dependents. Further,
- 7 except as otherwise provided in subsection (f), nothing in this
- 8 chapter or in any other law shall be construed to permit,
- 9 authorize or require a public school entity, through collective
- 10 bargaining, mediation or binding arbitration, or otherwise, to
- 11 establish, create, alter or modify a health benefits plan or pay
- 12 health benefits set forth in this chapter or administered by the
- 13 board that modify or supplement in any way the health benefits
- 14 set forth in this chapter for school employees and their health
- 15 care dependents.
- 16 (f) Exceptions.--
- 17 (1) The parties may:
- 18 (i) Continue to engage in collective bargaining with
- 19 regard to health benefits until such time as the board-
- sponsored program, pursuant to this subchapter, is
- 21 released and the standard benefit package is made
- available to employees of a public school entity.
- 23 However, any health benefits provided under a collective
- 24 bargaining agreement entered into on or after the
- 25 effective date of this chapter shall contain a provision
- that school employees covered by the agreement must join
- 27 the board-sponsored program as required by section 332 as
- a condition of continuing to receive health benefits. The
- board shall determine the appropriate timing and phase-in
- of the program in any public school entity taking into

- 1 consideration the need for the public school entity to 2 properly terminate any existing health benefits 3 arrangements.
 - (ii) Negotiate or otherwise agree to provide or make payment for supplemental benefits that have not been included as part of the standard benefit package.
- 7 (2) Nothing contained in this chapter shall restrict a
 8 public school entity from negotiating or otherwise agreeing
 9 to make payment for postretirement health benefits for
 10 members or as may be provided for in Subchapter F.
- 11 SUBCHAPTER E

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- 12 ALTERNATIVE MEASURES FOR COST REDUCTION
- 13 Section 351. Alternative measures program.
- 14 (a) Creation. -- Upon completing the study required under
- 15 section 321 with either a negative recommendation to proceed
- 16 with implementation of a Statewide health care program or if the
- 17 board fails to achieve agreement and approve a plan for
- 18 implementing a Statewide health benefits program by a qualified
- 19 majority vote, the board shall proceed to initiate and sponsor
- 20 an alternative measures program to reduce the costs for public
- 21 school entities in providing health care coverage to employees
- 22 and other eligible individuals.
- 23 (b) Program design.--In designing an alternative measures
- 24 program, the board may consider all of the following:
- 25 (1) Establishment of pools for selected areas of
- coverage, such as pharmacy services, transplants, stop-loss
- insurance, health care management or other possible areas
- that in the board's judgment can be offered Statewide or
- regionally on a more stable and cost-effective basis.
- 30 (2) Assistance in the formation of consortia to serve

- 1 public school entities that do not have the option of joining 2 an existing consortium.
 - Development of best practice standards and benchmarks for public school entities and consortiasponsoring health care plans for school employees.
 - Requirements that public school entities and consortia aggregate into larger regional pools, with opt-out provisions for public school entities or consortia that meet best practice standards and benchmarks.
- Requirements for public disclosure by public school 10 11 entities and consortia comparing their health benefits 12 purchasing to established best practice standards in their 13 region.
- 14 Implementation. -- The board shall have full authority to select and contract with insurance carriers, health maintenance 15 16 organizations, pharmacy benefit managers, third-party 17 administrators, reinsurers and any other entities necessary to 18 provide the selected areas of coverage. The board shall have 19 full authority to determine the nature, amount and duration and 20 discontinuation of coverage to be provided.
- 21 Mandatory and optional participation. -- The board shall have the authority to require public school entities and 22 23 consortia to participate in the alternative measures program.
- Transition plan. -- If the board determines that a public 25 school entity or consortium shall be required to participate in 26 the alternative measures program, the public school entity or 27 consortium shall, within a reasonable period of time as 28 determined by the board, present to the board a transition plan 29 with a schedule for the public school entity or consortium to join the alternative measures program. The board shall review 30

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- 1 the transition plan with the public school entity or consortium
- 2 and make any necessary modifications before granting approval of
- 3 the plan. A public school entity or consortium shall be subject
- 4 to adherence to the transition plan approved by the board.
- 5 (f) Extensions of time. -- The board shall give due
- 6 consideration to a transition plan submitted pursuant to
- 7 subsection (e) that includes a request for an extension of time.
- 8 Consideration shall be given to a public school entity or
- 9 consortium which will incur a significant financial cost or
- 10 penalty.
- 11 (q) Prohibited membership. -- A public school entity that
- 12 participates in the Pennsylvania Employees' Benefit Trust Fund
- 13 shall be prohibited from participating in the alternative
- 14 measures program.
- 15 (h) Transition of employees. -- A public school entity that
- 16 provides some or all of its employees with health benefits
- 17 through another health care plan by virtue of one or more
- 18 collective bargaining agreements entered into prior to the
- 19 effective date of this chapter shall not be required to join the
- 20 alternative measures program until expiration of the collective
- 21 bargaining agreements. The public school entity and some or all
- 22 of its employees, or bargaining representatives of its
- 23 employees, may, by mutual agreement and approval of the board,
- 24 join the program at an earlier date. Renewal or extension of a
- 25 collective bargaining agreement shall constitute its expiration
- 26 for the purposes of this subsection.
- 27 (i) Optional membership. -- No school district of the first
- 28 class, as classified pursuant to section 202 of the Public
- 29 School Code, shall be required to participate in the alternative
- 30 measures program, except as may be agreed upon under the terms

- 1 of a collective bargaining agreement covering a majority of
- 2 employees of the school district. Upon a school district of the
- 3 first class entering participation in the alternative measures
- 4 program pursuant to a collective bargaining agreement, continued
- 5 participation in the alternative measures program shall become
- 6 mandatory.
- 7 SUBCHAPTER F
- 8 RETIREMENT HEALTH SAVINGS PLAN
- 9 Section 361. Retirement health savings plan.
- 10 (a) Plan created. -- The board shall establish a retirement
- 11 health savings plan through which school employees can save to
- 12 cover health-related expenses following retirement. For this
- 13 purpose the board shall make available one or more trusts
- 14 including a governmental trust or governmental trusts authorized
- 15 under the IRC as eligible for tax-preferred or tax-free
- 16 treatment. The board may promulgate regulations regarding the
- 17 prudent and efficient operation of the retirement health savings
- 18 plan, including, but not limited to:
- 19 (1) Establishment of an annual administrative budget and
- disbursements in accordance with the budget.
- 21 (2) Determination of the structure of the retirement
- health savings accounts available to eligible school
- employees.
- 24 (3) Determination of enrollment procedures.
- 25 (b) Contracting authorized. -- The board is authorized to
- 26 administer the retirement health savings plan and to contract
- 27 with any lawfully authorized entities to provide investment
- 28 services, recordkeeping, benefit payments and other functions
- 29 necessary for the administration of the retirement health
- 30 savings plan. The board may contract with the retirement system

- 1 to invest funds in an account that shall be maintained and
- 2 accounted for separately from the funds of the retirement system
- 3 and invested in a prudent manner intended to maximize the safety
- 4 of the capital, with all earnings derived from investment of the
- 5 assets to be credited to the retirement health savings plan.
- 6 Costs and expenses incurred by the retirement system in
- 7 administering the investment option shall be paid by the
- 8 retirement health savings plan.
- 9 (c) Separate account. -- All funds related to the retirement
- 10 health savings plan shall be maintained and accounted for
- 11 separately from the health benefits program sponsored by the
- 12 board. The assets of the retirement health savings plan shall
- 13 not be liable or utilized for payment of any expenses or claims
- 14 incurred by the health benefits program other than as may be
- 15 directed by the participant account holder for reimbursement of
- 16 an IRC-qualifying health-related expense.
- 17 (d) Enrollment. -- The board shall establish eliqibility
- 18 quidelines consistent with the IRC for school employees to
- 19 participate in the retirement health savings plan.
- 20 (e) Contributions.--
- 21 (1) The board shall determine what contributions are
- 22 eligible under the IRC for tax-preferred or tax-free
- treatment and may be made into a retirement health savings
- 24 plan by a school employee. The board shall authorize and
- allow contributions, subject to appropriate limits as may be
- 26 established by the board, to be paid by a school employee
- 27 electing participation in the retirement health savings plan
- 28 subject to the following conditions:
- 29 (i) A mandatory school employee contribution
- 30 established as a fixed percentage of compensation may be

established through a collective bargaining agreement between a public school entity and a bargaining group representing school employees. The retirement health savings plan contribution rate does not have to be uniform for all groups of school employees.

- (ii) An optional employee contribution at a fixed percentage of compensation may be elected by a school employee during an annual election window that, once elected, shall continue in effect, except to the extent it may be changed or discontinued at a subsequent annual election window as provided for by the board or supplanted by a mandatory contribution.
- (iii) An optional school employee contribution of all or any portion of annual leave, vacation pay, personal days or sick leave may be elected by a school employee as so designated by the employee and agreed to by the employee's employer. The board may provide that the election shall be made during an annual election window of no greater than 90 days as determined by the board. Once the election has been made, an employee shall not be allowed to change the amount or discontinue the contributions until the next annual election window.
- (2) The following contributions shall be made into a retirement health savings plan on behalf of a school employee:
 - (i) For an employee who elects participation in the retirement health savings plan, the employee's employer shall make a contribution to the employee's account equal to the public school entity's savings in Social Security and Medicare taxes resulting from the tax-preferred or

tax-free treatment of contributions made by the school
employee under this subsection. Additional contributions
by a public school entity may be established through a
collective bargaining agreement between a public school
entity and a bargaining group representing school
employees.

- (ii) Any other payments by the Commonwealth or public school entity, including any set-aside payments to be made to school employee accounts under section 334 as determined by the board.
- 11 Contributions to the plan by a school employee or by 12 the Commonwealth or a public school entity on behalf of an 13 employee must be held in trust for reimbursement of employee 14 health-related expenses and the health-related expenses of 15 any health care dependents following retirement of the 16 employee or when otherwise determined to be benefit eliqible. 17 The board shall maintain a separate account of the 18 contributions made by or on behalf of each participant and 19 the earnings thereon. The board shall make available a 20 selection of investment options for participants who wish to direct the investment of the accumulations in the 21 22 participant's account, in addition to a default option for 23 participants to be invested in a prudent manner as determined 24 by the board.
 - (f) Reimbursement for health-related expenses.--
 - (1) Upon retirement or separation from employment with a public school entity, a participant becomes eligible to seek reimbursements for IRC-qualifying health-related expenses from the participant's retirement health savings plan account, including reimbursements for the health-related

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- expenses of the participant's eligible health care dependents.
 - (2) If a school employee dies prior to exhausting the balance in the employee's retirement health savings plan account, the employee's health care dependents are eligible to seek reimbursement for IRC-qualifying health-related expenses from the account.
- 8 (3) The board shall pay reimbursements from a retirement
 9 health savings plan account until the accumulation in the
 10 account has been exhausted. If an account balance remains
 11 after the death of all participant account holders, the
 12 remainder of the account must be paid to the school
 13 employee's beneficiaries or, if none, to the employee's
 14 estate.
- 15 (g) Annual financial statement.—Quarterly and annually the 16 board shall prepare summary retirement health savings plan 17 statements for individual participant account holders listing 18 information on contributions, investment earnings and
- 19 distributions for the account holders' accounts.
- 20 (h) Fees.--The board is authorized to charge uniform fees to
- 21 participants to cover the ongoing costs of operating the plan.
- 22 Any fees not needed must revert to participant accounts or be
- 23 used to reduce plan fees the following year.
- 24 (i) Advisory committee.--
- 25 (1) The board shall establish a participant advisory 26 committee for the retirement health savings plan composed of:
- (i) One representative appointed by each Statewide union that represents bargaining groups of school employees participating in the plan.
- 30 (ii) One representative of each Statewide

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- organization representing at least 10% of annuitants.
- 2 (iii) One representative of the Pennsylvania
- 3 Association of School Business Officials.
- 4 (iv) One representative of the Pennsylvania School 5 Boards Association.
- 6 (2) Each participant group shall be responsible for the 7 expenses of its own representative.
- 8 (3) The advisory committee shall meet at least two times 9 per year and shall be consulted on plan offerings. By October
- 10 1 of each year, the board shall give the advisory committee a
- 11 statement of fees collected and the use of the fees.
- 12 CHAPTER 5
- 13 MISCELLANEOUS PROVISIONS
- 14 Section 501. Feasibility Report.
- Within 18 months after the Statewide health benefits program
- 16 or the alternative measures program is fully implemented, the
- 17 Secretary of Administration shall report to the Governor, the
- 18 President pro tempore of the Senate and the Speaker of the House
- 19 of Representatives the feasibility of including community
- 20 college employees in the program.
- 21 Section 502. Effective date.
- This act shall take effect immediately.