

Q&A

NONSTUDENT HOURLY INSURANCE BENEFIT ELIGIBILITY

1. Why did the Health Care Authority decide to apply different insurance eligibility requirements to nonpermanent employees?

Due to ongoing litigation involving part-time employees, the Health Care Authority is requiring that all employing agencies and higher education institutions average an employee's work hours over a 6 month period for nonpermanent employees, to determine if the employee has worked half-time or more during that period.

2. What are "nonpermanent employees?"

[WAC 182-12-115 \(2\)](#) defines nonpermanent as "...those who work at least half-time and are expected to be employed for no more than six months. These employees are eligible for benefits on the first day of the seventh month of half-time or more employment. Insurance coverage begins on the first day of the seventh month following the date of employment."

At WSU we refer to nonpermanent employees as nonstudent temporary hourly employees. Refer to [BPPM 60.26 Temporary Employment Program](#) and [BPPM 60.27 Temporary Employment Processing](#).

3. How will eligibility be calculated?

Employees who work 480 hours or more over a consecutive 6 month period become benefit eligible at the beginning of month 7. **Note: An employee must report a minimum of eight hours in month 7 to receive the insurance benefits.** After establishing eligibility, if an employee does not work a minimum of eight hours in any month, the employee will lose insurance eligibility and must reestablish eligibility by working a minimum of 480 hours or more over a new look forward six consecutive month period.

4. How was eligibility determined prior to this change?

WSU had determined eligibility for nonstudent hourly employees by looking at each month individually, and determining what the half-time or more hours were for that month. If an employee worked half-time or more of actual hours in a month, for six consecutive months, then they were determined to be benefits eligible as of the seventh month. Under the new rules, we will no longer be looking at actual hours on a month by month basis, but instead looking at an entire six month period, and looking for employment of 480 hours or more.

5. Will HRS notify the department prior to the employee becoming benefit eligible?

Because HRS can only determine benefit eligibility based on the hours the employee has already worked, we are only able to notify employees and departments after becoming benefit eligible. This is necessary because we will be averaging the hours over a previous 6th month period. Therefore, the “4th Month” letter will no longer be mailed to departments.

6. How can I monitor the 480 hours over the consecutive 6 month period.

The number of hours an employee worked are available through TEMPS. Please note that overtime hours are not counted for the purpose of the 1050 hours limit; however, they do count toward the 480 hour limit, see Questions #11. Also, a new query, QNSHR, is available in DEPPS, and will show the actual number of hours worked.

7. How was it determined that 480 hours over a six month period would be the eligibility criteria?

480 over six months equals 6 months at 80 hours a month, if each month was worked an equal number of hours. However, since we no longer look at each month separately, the 480 hours can be reached in a multitude of ways. For example, if an employee worked the following, they would meet the averaging criteria of half time or more:

1st month = 176 hours

2nd month = 160 hours

3rd month = 0 hours

4th month = 0 hours

5th month = 96 hours

6th month = 60 hours

Total Hours = 492 > 480 hours over a 6 month period, and therefore eligible for benefits as of month seven.

8. If I have an employee who is nearing the 480 hours, can I stop working them to avoid having the employee become benefit eligible?

No, [RCW 49.44.160](#) prohibits public employers from taking action to avoid providing or continuing to provide employment-based benefits to which employees are entitled. Decision to discontinue employment must be based on a legitimate business need.

9. Who is responsible for paying the cost of medical coverage once an employee becomes benefit eligible?

The employing department is responsible for the employer contributions. For fiscal year 2008, the employer contributions are \$707.00. If the employee elects to waive coverage, the employing department is still required to pay the entire monthly cost to HCA. If an employee is employed by more than one department the employer contributions will be prorated.

10. How are the employee's insurance premiums determined?

The employee premiums will be determined based upon selection of the medical carrier and optional benefits. Refer to <http://www.pebb.hca.wa.gov/> for additional information regarding employee paid premiums.

11. Do overtime hours count toward the 480 hours?

Yes, the hours actually worked are counted (e.g. worked 1 hour overtime, paid for 1.5 hours). The 1 hour actually worked will be counted. Please note if you are using the TEMPS system to monitor hours, overtime hours are not counted toward the 1050 hour limit and are not reflected in the "Hours Worked."

12. Will the cell phone allowance that is processed through TEMPS have any impact regarding the 480 hours?

No, the cell phone allowance will show on Positive Pay, but no hours are reflected; it will not cause hours to be counted against the 480 hour limit.