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Senate Engrossed House Bill

State of Arizona House of Representatives Forty-sixth Legislature First Regular Session 2003

## **HOUSE BILL 2349**

## AN ACT

AMENDING SECTIONS 38-783, 38-817, 38-857 AND 38-906, ARIZONA REVISED STATUTES; MAKING AN APPROPRIATION; RELATING TO PUBLIC RETIREES' HEALTH INSURANCE SUBSIDIES.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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Be it enacted by the Legislature of the State of Arizona: 1 2 Section 1. Section 38-783, Arizona Revised Statutes, is amended to 3 read: 4 38-783. Retired members; dependents; health insurance; premium 5 payment; separate account; definitions 6 Α. Subject to subsection J of this section, the board shall pay from 7 ASRS assets part of the single coverage premium of any health and accident 8 insurance for each retired or disabled member of ASRS if the member elects to 9 participate in the coverage provided by ASRS or section 38-651.01 or elects 10 to participate in a health and accident insurance program provided or 11 administered by an employer or paid for, in whole or in part, by an employer 12 to an insurer. The board shall pay: 13 1. Up to one hundred fifty dollars per month for a retired or disabled 14 member of ASRS who is not eligible for medicare and who has ten or more years 15 of credited service. 16 2. Up to one hundred dollars per month for each retired or disabled 17 member of ASRS who is eligible for medicare and who has ten or more years of 18 credited service. 19 Subject to subsection J of this section, the board shall pay from Β. 20 ASRS assets part of the family coverage premium of any health and accident 21 insurance for a retired or disabled member of ASRS who elects family coverage 22 and who otherwise qualifies for payment pursuant to subsection A of this 23 Payment under this subsection is in the following amounts: section. 24 Up to two hundred sixty dollars per month if the retired or 1. 25 disabled member of ASRS and one or more dependents are not eligible for 26 medicare. 27 2. Up to one hundred seventy dollars per month if the retired or 28 disabled member of ASRS and one or more dependents are eligible for medicare. 29 3. Up to two hundred fifteen dollars per month if either: 30 (a) The retired or disabled member of ASRS is not eligible for 31 medicare and one or more dependents are eligible for medicare. 32 (b) The retired or disabled member of ASRS is eligible for medicare 33 and one or more dependents are not eligible for medicare. 34 C. In addition each retired or disabled member of ASRS with less than 35 ten years of credited service and a dependent of such a retired or disabled 36 member who elects to participate in the coverage provided by ASRS or section 37 38-651.01 or who elects to participate in a health and accident INSURANCE 38 program provided or administered by an employer or paid for, in whole or in 39 part, by an employer to an insurer is entitled to receive a proportion of the 40 full benefit prescribed by subsection A, or B, E OR F of this section 41 according to the following schedule: 42 1. 9.0 to 9.9 years of credited service, ninety per cent. 43 2. 8.0 to 8.9 years of credited service, eighty per cent. 44 3. 7.0 to 7.9 years of credited service, seventy per cent. 45 6.0 to 6.9 years of credited service, sixty per cent. 4.

5. 5.0 to 5.9 years of credited service, fifty per cent.

6. Those with less than five years of credited service do not qualify
 for the benefit.

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D. The board shall not pay more than the amount prescribed in this section for a retired or disabled member of ASRS.

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6 E. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION A OF THIS 7 SECTION, through June 30, 2003 2005, the board shall pay an insurance premium 8 benefit FOR MEDICAL COVERAGE, NOT INCLUDING LIMITED BENEFIT COVERAGE AS 9 DEFINED IN SECTION 20-1137, for each retired or disabled member of ASRS who 10 is eligible for a premium benefit payment pursuant to subsection A of this 11 section and who lives in a nonservice area as follows:

12 1. Up to three hundred dollars per month for a retired or disabled 13 member of ASRS who is not eligible for medicare and who has ten or more years 14 of credited service. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS 15 ADDITIONAL BENEFIT, A RETIRED OR DISABLED MEMBER OF ASRS SHALL PAY 16 OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE HUNDRED TWENTY-FIVE 17 DOLLARS PER MONTH.

Up to one hundred seventy dollars per month for a retired or
 disabled member of ASRS who is eligible for medicare and who has ten or more
 years of credited service. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS
 ADDITIONAL BENEFIT, A RETIRED OR DISABLED MEMBER OF ASRS SHALL PAY
 OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE HUNDRED DOLLARS PER
 MONTH.

24 F. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION B OF THIS 25 SECTION, through June 30, 2003 2005, the board shall pay from ASRS assets 26 part of the family coverage premium of any group health and accident 27 insurance FOR MEDICAL coverage, NOT INCLUDING LIMITED BENEFIT COVERAGE AS 28 DEFINED IN SECTION 20-1137, for a retired or disabled member of ASRS who is 29 eligible for a premium benefit payment pursuant to subsection B of this 30 section, WHO IS ENROLLED IN A FAMILY MEDICAL PLAN and who lives in a 31 nonservice area as follows:

Up to six hundred dollars per month if the retired or disabled
 member of ASRS and one or more dependents are not eligible for medicare AND
 THE RETIRED OR DISABLED MEMBER OF ASRS HAS TEN OR MORE YEARS OF CREDITED
 SERVICE. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL
 BENEFIT, A RETIRED OR DISABLED MEMBER SHALL PAY OUT-OF-POCKET MEDICAL
 INSURANCE PREMIUMS OF AT LEAST FOUR HUNDRED TWENTY-FIVE DOLLARS PER MONTH.

2. Up to three hundred fifty dollars per month if the retired or
disabled member of ASRS and one or more dependents are eligible for medicare
AND THE RETIRED OR DISABLED MEMBER OF ASRS HAS TEN OR MORE YEARS OF CREDITED
SERVICE. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL
BENEFIT, A RETIRED OR DISABLED MEMBER SHALL PAY OUT-OF-POCKET MEDICAL
INSURANCE PREMIUMS OF AT LEAST TWO HUNDRED DOLLARS PER MONTH.

44 3. IF THE RETIRED OR DISABLED MEMBER OF ASRS HAS TEN OR MORE YEARS OF 45 CREDITED SERVICE, up to four hundred seventy dollars per month if either:

(a) The retired or disabled member of ASRS is not eligible for 1 2 medicare and one or more dependents are eligible for medicare.

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(b) The retired or disabled member of ASRS is eligible for medicare 4 and one or more dependents are not eligible for medicare. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A

5 6 RETIRED OR DISABLED MEMBER SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS OF AT LEAST FOUR HUNDRED DOLLARS PER MONTH. 7

G. A retired or disabled member of ASRS who is enrolled in a managed 8 9 care program in a nonservice area is not eligible for the payment prescribed 10 in subsection E or F of this section if the member terminates coverage under 11 the managed care program.

12 H. Through June 30, 2003, A retired or disabled member of ASRS may 13 elect to purchase individual health care coverage and receive a payment 14 pursuant to this section through the retired or disabled member's employer if 15 that employer assumes the administrative functions associated with the 16 payment, including verification that the payment is used to pay for health 17 insurance coverage if the payment is made to the retired or disabled member.

18 I. The board shall establish a separate account that consists of the benefits provided by this section. The board shall not use or divert any 19 20 part of the corpus or income of the account for any purpose other than the 21 provision of benefits under this section unless the liabilities of ASRS to 22 provide the benefits are satisfied. If the liabilities of ASRS to provide 23 the benefits described in this section are satisfied, the board shall return 24 any amount remaining in the account to the employer.

25 J. Payment of the benefits provided by this section is subject to the 26 following conditions:

27 1. The payment of the benefits is subordinate to the payment of 28 retirement benefits payable by ASRS.

29 2. The total of contributions for the benefits and actual 30 contributions for life insurance protection, if any, shall not exceed 31 twenty-five per cent of the total actual employer and employee contributions 32 to ASRS, less contributions to fund past service credits, after the day the 33 account is established.

34 3. The board shall deposit the benefits provided by this section in 35 the account.

36 4. The contributions by the employer to the account shall be 37 reasonable and ascertainable.

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For the purposes of this section: Κ.

39 1. "Account" means the separate account established pursuant to 40 subsection I of this section.

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2. "Credited service" includes prior service.

42 "Nonservice area" means an area in this state in which ASRS 3. 43 pursuant to section 38-782, the department of administration pursuant to 44 section 38-651.01 or any employer does not provide or administer a health 45 care services organization program, excluding any preferred provider 1 organization program or individual health indemnity policy, for which the 2 retired or disabled member of ASRS is eligible.

4. "Prior service" means service for this state or a political
subdivision of this state before membership in the defined contribution
program administered by ASRS.

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Sec. 2. Section 38-817, Arizona Revised Statutes, is amended to read: 38-817. <u>Group health and accident coverage for retired members;</u>

payment; definition

9 The fund manager shall pay from the assets of the fund part of the Α. 10 single coverage premium of any group health and accident insurance for each retired member or survivor of the elected officials' retirement plan who 11 12 receives a pension if the retired member had eight or more years of credited 13 service under the plan. In order to qualify for payment pursuant to this 14 subsection, the retired member or survivor shall elect single coverage and 15 must have elected to participate in the coverage provided in section 16 38-651.01 or 38-782 or any other health and accident insurance coverage 17 provided or administered by a participating employer of the elected 18 officials' retirement plan. The fund manager shall pay up to:

19 1. One hundred fifty dollars per month for each retired member or 20 survivor of the plan who is not eligible for medicare.

2. One hundred dollars per month for each retired member or survivor 22 of the plan who is eligible for medicare.

B. The fund manager shall pay from the assets of the fund part of the family coverage premium of any group health and accident insurance each month for a benefit recipient who elects family coverage and who otherwise qualifies for payment pursuant to subsection A of this section. The fund manager shall pay up to:

28 1. Two hundred sixty dollars per month if the retired member or 29 survivor of the plan and one or more dependents are not eligible for 30 medicare.

31 2. One hundred seventy dollars per month if the retired member or 32 survivor of the plan and one or more dependents are eligible for medicare.

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3. Two hundred fifteen dollars per month if either:

34 (a) The retired member or survivor of the plan is not eligible for
 35 medicare and one or more dependents are eligible for medicare.

36 (b) The retired member or survivor of the plan is eligible for 37 medicare and one or more dependents are not eligible for medicare.

C. Each retired member or survivor of the plan with less than eight years of credited service and a dependent of such a retired member or survivor who participates in the coverage provided by section 38-651.01 or 38-782 or who participates in any other health and accident insurance coverage provided or administered by a participating employer of the plan is entitled to receive a proportion of the full benefit prescribed by subsection A, or B, E OR F of this section according to the following schedule:

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1. 7.0 to 7.9 years of credited service, ninety per cent.

1 2 2. 6.0 to 6.9 years of credited service, seventy-five per cent.

3. 5.0 to 5.9 years of credited service, sixty per cent.

3 4. Those with less than five years of credited service do not qualify 4 for the benefit.

D. The fund manager shall not pay more than the amount prescribed in this section for a benefit recipient as a member or survivor of the plan.

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7 E. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION A OF THIS 8 SECTION, through June 30, 2003, the fund manager shall pay an insurance 9 premium benefit FOR MEDICAL COVERAGE, NOT INCLUDING LIMITED BENEFIT COVERAGE 10 AS DEFINED IN SECTION 20-1137, for each retired member or survivor of the 11 plan who is entitled to a premium benefit payment pursuant to subsection A of 12 this section and who lives in a nonservice area as follows:

13 Up to three hundred dollars per month for a retired member or 1. 14 survivor of the plan who is not eligible for medicare and who has eight or 15 more years of credited service. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR 16 THIS ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET 17 MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE HUNDRED TWENTY-FIVE DOLLARS PER 18 MONTH.

19 Up to one hundred seventy dollars per month for a retired member or 2. 20 survivor of the plan who is eligible for medicare and who has eight or more 21 years of credited service. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS 22 ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET 23 MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE HUNDRED DOLLARS PER MONTH.

24 F. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION B OF THIS 25 SECTION, through June 30, 2003, the fund manager shall pay an insurance 26 premium benefit FOR MEDICAL COVERAGE, NOT INCLUDING LIMITED BENEFIT COVERAGE 27 AS DEFINED IN SECTION 20-1137, for a retired member or survivor of the plan 28 who is entitled to a premium benefit payment pursuant to subsection B of this 29 section, WHO IS ENROLLED IN A FAMILY MEDICAL PLAN and who lives in a 30 nonservice area as follows:

31 1. Up to six hundred dollars per month if the retired member or 32 survivor of the plan and one or more dependents are not eligible for medicare 33 AND THE RETIRED MEMBER OR SURVIVOR OF THE PLAN HAS EIGHT OR MORE YEARS OF 34 CREDITED SERVICE. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS 35 ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET 36 MEDICAL INSURANCE PREMIUMS OF AT LEAST FOUR HUNDRED TWENTY-FIVE DOLLARS PER 37 MONTH.

38 2. Up to three hundred fifty dollars per month if the retired member 39 or survivor of the plan and one or more dependents are eligible for medicare 40 AND THE RETIRED MEMBER OR SURVIVOR OF THE PLAN HAS EIGHT OR MORE YEARS OF 41 CREDITED SERVICE. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS 42 ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET 43 MEDICAL INSURANCE PREMIUMS OF AT LEAST TWO HUNDRED DOLLARS PER MONTH.

IF THE RETIRED MEMBER OR SURVIVOR OF THE PLAN HAS EIGHT OR MORE 1 3. 2 YEARS OF CREDITED SERVICE, up to four hundred seventy dollars per month if 3 either:

4 (a) The retired member or survivor of the plan is not eligible for 5 medicare and one or more dependents are eligible for medicare.

6 (b) The retired member or survivor of the plan is eligible for 7 medicare and one or more dependents are not eligible for medicare.

8 FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A 9 RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS 10 OF AT LEAST FOUR HUNDRED DOLLARS PER MONTH.

11 G. A retired member or survivor of the plan who is enrolled in a 12 managed care program in a nonservice area is not eligible for the payment 13 prescribed in subsection E or F of this section if the member terminates 14 coverage under the managed care program.

15 Through June 30, 2003, A retired member or survivor of the plan may Η. 16 elect to purchase individual health care coverage and receive a payment 17 pursuant to this section through the retired member's employer if that 18 employer assumes the administrative functions associated with the payment, 19 including verification that the payment is used to pay for health insurance 20 coverage if the payment is made to the retired member or survivor of the 21 plan.

22 I. For the purposes of this section, "nonservice area" means an area 23 in this state in which the Arizona state retirement system pursuant to 24 section 38-782, the department of administration pursuant to section 25 38–651.01 or the member's or survivor's participating employer does not 26 provide or administer a health care services organization program, excluding 27 any preferred provider organization program or individual health indemnity 28 policy, for which the retired member or survivor of the plan is eligible.

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Sec. 3. Section 38-857, Arizona Revised Statutes, is amended to read: 38-857. Group health and accident coverage for retired members;

payment; definition

32 The fund manager of the public safety personnel retirement system Α. 33 shall pay part of the single coverage premium of any group health and 34 accident insurance for each retired member or survivor of the system who 35 receives a pension and who has elected to participate in the coverage 36 provided by section 38-651.01 or 38-782 or any other health and accident 37 insurance coverage provided or administered by a participating employer of 38 the system. The fund manager shall pay up to:

39 One hundred fifty dollars per month for each retired member or 1. 40 survivor of the system who is not eligible for medicare.

41 2. One hundred dollars per month for each retired member or survivor 42 of the system who is eligible for medicare.

43 B. The fund manager of the system shall pay from assets of the fund 44 part of the family coverage premium of any group health and accident 45 insurance each month for a benefit recipient who elects family coverage and

1 otherwise qualifies for payment pursuant to subsection A of this 2 section. The fund manager shall pay up to:

1. Two hundred sixty dollars per month if the retired member or survivor of the system and one or more dependents are not eligible for medicare.

6 2. One hundred seventy dollars per month if the retired member or
7 survivor of the system and one or more dependents are eligible for medicare.
8 3. Two hundred fifteen dollars per month if either:

9 (a) The retired member or survivor of the system is not eligible for 10 medicare and one or more dependents are eligible for medicare.

11 (b) The retired member or survivor of the system is eligible for 12 medicare and one or more dependents are not eligible for medicare.

13 C. The fund manager shall not pay from assets of the fund more than 14 the amount prescribed in this section for a benefit recipient as a member or 15 survivor of the system.

D. This section does not apply to a retired member or survivor of the system who is reemployed by this state or a political subdivision of this state and who participates in coverage provided by this state or a political subdivision of this state as an active employee.

E. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION A OF THIS SECTION, through June 30, 2003 2005, the fund manager shall pay an insurance premium benefit FOR MEDICAL COVERAGE, NOT INCLUDING LIMITED BENEFIT COVERAGE AS DEFINED IN SECTION 20-1137, for each retired member or survivor of the system who is entitled to a premium benefit payment pursuant to subsection A of this section and who lives in a nonservice area as follows:

Up to three hundred dollars per month for a retired member or
 survivor of the system who is not eligible for medicare. FROM AND AFTER JUNE
 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A RETIRED MEMBER OR
 SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE
 HUNDRED TWENTY-FIVE DOLLARS PER MONTH.

2. Up to one hundred seventy dollars per month for a retired member or
 survivor of the system who is eligible for medicare. FROM AND AFTER JUNE 30,
 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR
 SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE HUNDRED
 DOLLARS PER MONTH.

F. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION B OF THIS SECTION, through June 30, 2003 2005, the fund manager shall pay an insurance premium benefit FOR MEDICAL COVERAGE, NOT INCLUDING LIMITED BENEFIT COVERAGE AS DEFINED IN SECTION 20-1137, for a retired member or survivor of the system who is entitled to a premium benefit payment pursuant to subsection B of this section, WHO IS ENROLLED IN A FAMILY MEDICAL PLAN and who lives in a nonservice area as follows:

43 1. Up to six hundred dollars per month if the retired member or 44 survivor of the system and one or more dependents are not eligible for 45 medicare. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL
 INSURANCE PREMIUMS OF AT LEAST FOUR HUNDRED TWENTY-FIVE DOLLARS PER MONTH.

2. Up to three hundred fifty dollars per month if the retired member
or survivor of the system and one or more dependents are eligible for
medicare. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL
BENEFIT, A RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL
INSURANCE PREMIUMS OF AT LEAST TWO HUNDRED DOLLARS PER MONTH.

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3. Up to four hundred seventy dollars per month if either:

9 (a) The retired member or survivor of the system is not eligible for 10 medicare and one or more dependents are eligible for medicare.

(b) The retired member or survivor of the system is eligible for medicare and one or more dependents are not eligible for medicare.

FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A
RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS
OF AT LEAST FOUR HUNDRED DOLLARS PER MONTH.

16 G. A retired member or survivor of the system who is enrolled in a 17 managed care program in a nonservice area is not eligible for the payment 18 prescribed in subsection E or F of this section if the member terminates 19 coverage under the managed care program.

H. Through June 30, 2003, A retired member or survivor of the system may elect to purchase individual health care coverage and receive a payment pursuant to this section through the retired member's employer if that employer assumes the administrative functions associated with the payment, including verification that the payment is used to pay for health insurance coverage if the payment is made to the retired member or survivor of the system.

I. For the purposes of this section, "nonservice area" means an area in this state in which the Arizona state retirement system pursuant to section 38-782, the department of administration pursuant to section 38-651.01 or the member's or survivor's participating employer does not provide or administer a health care services organization program, excluding any preferred provider organization program or individual health indemnity policy, for which the retired member or survivor of the system is eligible.

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Sec. 4. Section 38-906, Arizona Revised Statutes, is amended to read: 38-906. <u>Group health and accident coverage for retired members;</u> payment; definition

A. The fund manager shall pay from the assets of the fund part of the single coverage premium of any group health and accident insurance for each retired member or survivor of the plan who receives a pension and who has elected to participate in coverage provided by section 38-651.01 or 38-782 or any other health and accident insurance coverage provided or administered by a participating employer in the plan. The fund manager shall pay up to:

43 1. One hundred fifty dollars per month for each retired member or44 survivor of the plan who is not eligible for medicare.

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2. One hundred dollars per month for each retired member or survivor of the plan who is eligible for medicare.

3 B. The fund manager shall pay from the assets of the fund part of the 4 family coverage premium of any group health and accident insurance for each 5 retired member or survivor of the plan who elects family coverage and who 6 otherwise qualifies for payment pursuant to subsection A of this section. 7 Payment under this subsection is in the following amounts:

8 1. Up to two hundred sixty dollars per month if the retired member or 9 survivor of the plan and one or more dependents are not eligible for 10 medicare.

11 2. Up to one hundred seventy dollars per month if the retired member 12 or survivor of the plan and one or more dependents are eligible for medicare. 13 3. Up to two hundred fifteen dollars if either:

14 (a) The retired member or survivor of the plan is not eligible for 15 medicare and one or more dependents are eligible for medicare.

16 (b) The retired member or survivor of the plan is eligible for 17 medicare and one or more dependents are not eligible for medicare.

18 C. The fund manager shall not pay more than the amount prescribed in 19 this section for a benefit recipient as a member or survivor of the plan.

20 D. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION A OF THIS 21 SECTION, through June 30, 2003, the fund manager shall pay an insurance 22 premium benefit FOR MEDICAL COVERAGE, NOT INCLUDING LIMITED BENEFIT COVERAGE 23 AS DEFINED IN SECTION 20-1137, for each retired member or survivor of the 24 plan who is entitled to a premium benefit payment pursuant to subsection A of 25 this section and who lives in a nonservice area as follows:

26 1. Up to three hundred dollars per month for a retired member or 27 survivor of the plan who is not eligible for medicare. FROM AND AFTER JUNE 28 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A RETIRED MEMBER OR 29 SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE 30 HUNDRED TWENTY-FIVE DOLLARS PER MONTH.

31 2. Up to one hundred seventy dollars per month for a retired member or 32 survivor of the plan who is eligible for medicare. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR 33 34 SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS OF AT LEAST ONE HUNDRED 35 DOLLARS PER MONTH.

36 E. IN ADDITION TO THE PAYMENTS PROVIDED BY SUBSECTION B OF THIS 37 SECTION, through June 30, 2003, the fund manager shall pay an insurance 38 premium benefit FOR MEDICAL COVERAGE, NOT INCLUDING LIMITED BENEFIT COVERAGE 39 AS DEFINED IN SECTION 20-1137, for a retired member or survivor of the plan 40 who is entitled to a premium benefit payment pursuant to subsection B of this 41 section, WHO IS ENROLLED IN A FAMILY MEDICAL PLAN and who lives in a 42 nonservice area as follows:

43 1. Up to six hundred dollars per month if the retired member or 44 survivor of the plan and one or more dependents are not eligible for 45 medicare. FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL
 INSURANCE PREMIUMS OF AT LEAST FOUR HUNDRED TWENTY-FIVE DOLLARS PER MONTH.

2. Up to three hundred fifty dollars per month if the retired member
or survivor of the plan and one or more dependents are eligible for medicare.
FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A
RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS
OF AT LEAST TWO HUNDRED DOLLARS PER MONTH.

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3. Up to four hundred seventy dollars per month if either:

9 (a) The retired member or survivor of the plan is not eligible for 10 medicare and one or more dependents are eligible for medicare.

11 (b) The retired member or survivor of the plan is eligible for 12 medicare and one or more dependents are not eligible for medicare.

13 FROM AND AFTER JUNE 30, 2003, TO QUALIFY FOR THIS ADDITIONAL BENEFIT, A
14 RETIRED MEMBER OR SURVIVOR SHALL PAY OUT-OF-POCKET MEDICAL INSURANCE PREMIUMS
15 OF AT LEAST FOUR HUNDRED DOLLARS PER MONTH.

16 F. A retired member or survivor of the plan who is enrolled in a 17 managed care program in a nonservice area is not eligible for the payment 18 prescribed in subsection D or E of this section if the member terminates 19 coverage under the managed care program.

G. Through June 30, 2003, A retired member or survivor of the plan may elect to purchase individual health care coverage and receive a payment pursuant to this section through the retired member's employer if that employer assumes the administrative functions associated with the payment, including verification that the payment is used to pay for health insurance coverage if the payment is made to the retired member or survivor of the plan.

H. For the purposes of this section, "nonservice area" means an area in this state in which the Arizona state retirement system pursuant to section 38-782, the department of administration pursuant to section 38-651.01 or the member's or survivor's participating employer does not provide or administer a health care services organization program, excluding any preferred provider organization program or individual health indemnity policy, for which the retired member or survivor of the plan is eligible.

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Sec. 5. Arizona state retirement system report on health insurance coverage for government retirees

A. In preparing the request for proposals for the contract for the group health and accident insurance coverage for eligible retired and disabled members and their dependents as prescribed by section 38-782, Arizona Revised Statutes, the Arizona state retirement system shall seek to provide coverage that:

Is affordable to all members who retire under a public retirement
 system or plan of this state and who are eligible to receive the coverage.

43 2. Is meaningful, timely and appropriate to all members who retire
44 under a public retirement system or plan of this state and who are eligible
45 to receive the coverage.

3. Is accessible and available. 1 2 Β. On or before December 15, 2004, the Arizona state retirement system 3 shall report to the speaker of the house of representatives and the president 4 of the senate as to the progress and success of the system in obtaining a 5 group health and accident insurance contract for eligible retired and 6 disabled members that achieves the goals of subsection A of this section. 7 Sec. 6. Appropriation 8 A. The sum of \$183,000 is appropriated from the Arizona state 9 retirement system administration account in fiscal year 2003-2004 to the 10 Arizona state retirement system for data processing services necessary to 11 implement this act. 12 B. The Arizona state retirement system shall report monthly to the 13 staff of the joint legislative budget committee the estimated and actual 14 number of data processing hours used to implement this act, the amount of 15 funds expended and the progress toward implementation of this act. 16 C. Any funds unexpended as of June 30, 2004 revert to the Arizona 17 state retirement system administration account. Sec. 7. Retroactivity Sections 38-783, 38-817, 38-857 and 38-906, Arizona Revised Statutes, 19 20 as amended by this act, apply retroactively to from and after June 30, 2003.

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