AN ACT relating to the Public Employees’ Benefits Program; revising provisions relating to the subsidy for coverage of certain retired persons under the Program; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:
Existing law provides for the payment of a subsidy to cover a portion of the cost of the coverage provided through the Public Employees’ Benefits Program by an individual medical plan offered pursuant to the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq., which is commonly known as Medicare, to persons who were initially hired before January 1, 2012, and who retire with state service. The amount of this subsidy is established by the Legislature each biennium. (NRS 287.046; section 2 of chapter 421, Statutes of Nevada 2011, at pp. 2574-75) This bill authorizes the Board of the Public Employees’ Benefits Program to approve the payment of an additional amount to increase the subsidy of such retired persons above the amount established by the Legislature for the biennium for those retired persons from any money that is available for that purpose, such as excess reserves.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 287.046 is hereby amended to read as follows:
287.046  1. The Department of Administration shall establish an assessment that is to be used to pay for a portion of the cost of premiums or contributions for the Program for persons who were initially hired before January 1, 2012, and have retired with state service.
  2. The money assessed pursuant to subsection 1 must be deposited into the Retirees’ Fund and must be based upon a base amount approved by the Legislature each session to pay for a portion of the current and future health and welfare benefits for persons who retired before January 1, 1994, or for persons who retire on or after January 1, 1994, as adjusted by subsection 5.
  3. Except as otherwise provided in subsections 7 and 8, the portion to be paid to the Program from the Retirees’ Fund on behalf of such persons must be equal to a portion of the cost for each retiree and the retiree’s dependents who are enrolled in the plan, as defined for each year of the plan by the Program.
  4. Except as otherwise provided in subsection 6, the portion of the amount approved by the Legislature as described in subsection 2 to be paid to the Program from the Retirees’ Fund for persons who
retired before January 1, 1994, with state service is the base funding level defined for each year of the plan by the Program.

5. Except as otherwise provided in subsection 6, adjustments to the portion of the amount approved by the Legislature as described in subsection 2 to be paid by the Retirees’ Fund for persons who retire on or after January 1, 1994, with state service must be as follows:

(a) For each year of service less than 15 years, excluding service purchased pursuant to NRS 1A.310 or 286.300, the portion paid by the Retirees’ Fund must be reduced by an amount equal to 7.5 percent of the base funding level defined by the Legislature. In no event may the adjustment exceed 75 percent of the base funding level defined by the Legislature.

(b) For each year of service greater than 15 years, excluding service purchased pursuant to NRS 1A.310 or 286.300, the portion paid by the Retirees’ Fund must be increased by an amount equal to 7.5 percent of the base funding level defined by the Legislature. In no event may the adjustment exceed 37.5 percent of the base funding level defined by the Legislature.

6. The portion to be paid to the Program from the Retirees’ Fund on behalf of a retired person whose coverage is provided through the Program by an individual medical plan offered pursuant to the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq., must be:

(a) For persons who retired before January 1, 1994, the base funding level defined by the Legislature multiplied by 15.

(b) For persons who retired on or after January 1, 1994, the base funding level defined by the Legislature multiplied by the number of years of service of the person, excluding service purchased pursuant to NRS 1A.310 or 286.300, up to a maximum of 20 years of service. The Board may approve the payment of an additional amount to retired persons described in this subsection that is in excess of the amount paid pursuant to paragraph (a) or (b), or both, for those persons from any money that is available for that purpose.

7. No money may be paid by the Retirees’ Fund on behalf of a retired person who is initially hired by the State:

(a) On or after January 1, 2010, but before January 1, 2012, and who:

(1) Has not participated in the Program on a continuous basis since retirement from such employment; or

(2) Does not have at least 15 years of service, which must include state service and may include local governmental service, unless the retired person does not have at least 15 years of service as
a result of a disability for which disability benefits are received under the Public Employees’ Retirement System or a retirement program for professional employees offered by or through the Nevada System of Higher Education, and has participated in the Program on a continuous basis since retirement from such employment.

(b) On or after January 1, 2012. The provisions of this paragraph must not be construed to prohibit a retired person who was hired on or after January 1, 2012, from participating in the Program until the retired person is eligible for coverage under an individual medical plan offered pursuant to the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq. The retired person shall pay the entire premium or contribution for his or her participation in the Program.

8. If the amount calculated pursuant to subsection 5 or 6 exceeds the actual premium or contribution for the plan of the Program that the retired participant selects, the balance must be credited to the Program Fund.

9. For the purposes of this section:
   (a) Credit for service must be calculated in the manner provided by chapter 286 of NRS.
   (b) No proration may be made for a partial year of service.

10. The Department shall agree through the Board with the insurer for billing of remaining premiums or contributions for the retired participant and the retired participant’s dependents to the retired participant and to the retired participant’s dependents who elect to continue coverage under the Program after the retired participant’s death.

Sec. 2. This act becomes effective on July 1, 2013.