

FISCAL IMPACT OF PROPOSED LEGISLATION

Measure: HB 2279 - B

Seventy-Seventh Oregon Legislative Assembly – 2013 Regular Session
Legislative Fiscal Office

*Only Impacts on Original or Engrossed
Versions are Considered Official*

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Measure Description:

Allows employees of local governments to participate in benefit plans provided by Public Employees' Benefit Board and Oregon Educators Benefit Board.

Government Unit(s) Affected:

Oregon Health Authority (OHA)

Local Government Mandate:

This bill affect local governments' service levels or shared revenues sufficient to trigger Section 15, Article XI of the Oregon Constitution.

Analysis:

House Bill 2279 allows the governing bodies of local governments to elect to participate in plans offered by the Oregon Educators Benefit Board (OEBB) and the Public Employees' Benefit Board (PEBB) at the discretion of the governing bodies. The bill changes the composition of the OEBB and PEBB boards to allow for representation by local governments if a local government elects to participate in one of the plans. The ability of local government employees to participate in these plans requires the local government governing board to first elect to participate in the plan.

In addition, the bill: (1) provides that members of a collective bargaining unit that represents police or firefighters are not included in the definition of "eligible employee"; (2) specifies that the decision of a local government to participate in a benefit plan offered by OEBB and PEBB is a permissive subject of collective bargaining; and (3) stipulates certain conditions under which local governments offering a benefit plan though OEBB and PEBB may provide alternative group health and welfare insurance plans to eligible employees.

This bill is anticipated to have a fiscal impact on OEBB and PEBB. At this time the full impact is indeterminate. As a frame of reference, the Oregon Health Authority provides the following information:

The operational costs added to OEBB and PEBB will depend on the number of local government bodies that elect to join. The Oregon Health Authority reports that there are currently approximately 1,220 cities, counties and special districts containing 43,200 potential enrollees that would be eligible to join OEBB and PEBB should this bill become law. OEBB and PEBB estimate that for every 25% of this eligible group that joins OEBB or PEBB, each Board would require one additional FTE at a cost of \$124,548 per FTE during the 2013-15 biennium and \$153,040 per FTE during the 2015-17 biennium.

Also, the Boards will incur communication costs. OEBB estimates the cost at approximately \$16,725 per 25% of the eligible groups that join. PEBB estimates communication costs at approximately \$240,000 per 25,000 enrollees.

In addition, the ability of local governments to enroll in PEBB will result in initial costs to interact with the local governments' payroll systems. This cost of system integration is estimated at \$80,000 per biennium for on-going maintenance, and an additional \$70,000 for system changes that would be needed as local governments join and leave PEBB.

Furthermore, an addition of new groups to OEGB and PEBB could also impact premium rates for two reasons: First, because the number of groups electing to join OEGB or PEBB is unknown, the uncertainty around potential newly assumed risk could lead to increased rates, and because the bill does not require all local governments to join, it is predicted that the local governments most likely to join will be those whose premium costs are similar or greater than the OEGB or PEBB premiums, which is likely due to high utilization and/or costs. Second, because local governments can terminate participation in OEGB and PEBB for plans offered by OHA, the potential “churn” of local governments into and out of OEGB and PEBB could impact rates. Because these variables are currently unknown the impact on premium rates is indeterminate.