

Effective 5/3/2023

Effective until 5/1/2024

26B-4-136 Volunteer Emergency Medical Service Personnel Health Insurance Program -- Creation -- Administration -- Eligibility -- Benefits -- Rulemaking -- Advisory board.

- (1) As used in this section:
 - (a) "Health benefit plan" means the same as that term is defined in Section 31A-1-301.
 - (b) "Local government entity" means a political subdivision that:
 - (i) is licensed as a ground ambulance provider under Sections 26B-4-150 through 26B-4-170; and
 - (ii) as of January 1, 2022, does not offer health insurance benefits to volunteer emergency medical service personnel.
 - (c) "PEHP" means the Public Employees' Benefit and Insurance Program created in Section 49-20-103.
 - (d) "Political subdivision" means a county, a municipality, a limited purpose government entity described in Title 17B, Limited Purpose Local Government Entities - Special Districts, or Title 17D, Limited Purpose Local Government Entities - Other Entities, or an entity created by an interlocal agreement under Title 11, Chapter 13, Interlocal Cooperation Act.
 - (e) "Qualifying association" means an association that represents two or more political subdivisions in the state.
- (2) The Volunteer Emergency Medical Service Personnel Health Insurance Program shall promote recruitment and retention of volunteer emergency medical service personnel by making health insurance available to volunteer emergency medical service personnel.
- (3) The department shall contract with a qualifying association to create, implement, and administer the Volunteer Emergency Medical Service Personnel Health Insurance Program described in this section.
- (4) Participation in the program is limited to emergency medical service personnel who:
 - (a) are licensed under Section 26B-4-116 and are able to perform all necessary functions associated with the license;
 - (b) provide emergency medical services under the direction of a local governmental entity:
 - (i) by responding to 20% of calls for emergency medical services in a rolling twelve-month period;
 - (ii) within a county of the third, fourth, fifth, or sixth class; and
 - (iii) as a volunteer under the Fair Labor Standards Act, in accordance with 29 C.F.R. Sec. 553.106;
 - (c) are not eligible for a health benefit plan through an employer or a spouse's employer;
 - (d) are not eligible for medical coverage under a government sponsored healthcare program; and
 - (e) reside in the state.
- (5)
 - (a) A participant in the program is eligible to participate in PEHP in accordance with Subsection (5)(b) and Subsection 49-20-201(3).
 - (b) Benefits available to program participants under PEHP are limited to health insurance that:
 - (i) covers the program participant and the program participant's eligible dependents on a July 1 plan year;
 - (ii) accepts enrollment during an open enrollment period or for a special enrollment event, including the initial eligibility of a program participant;
 - (iii) if the program participant is no longer eligible for benefits, terminates on the last day of the last month for which the individual is a participant in the Volunteer Emergency Medical Service Personnel Health Insurance Program; and

- (iv) is not subject to continuation rights under state or federal law.
- (6)
- (a) The department may make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to define additional criteria regarding benefit design and eligibility for the program.
 - (b) The department shall convene an advisory board:
 - (i) to advise the department on making rules under Subsection (6)(a); and
 - (ii) that includes representation from at least the following entities:
 - (A) the qualifying association that receives the contract under Subsection (3); and
 - (B) PEHP.
- (7) For purposes of this section, the qualifying association that receives the contract under Subsection (3) shall be considered the public agency for whom the program participant is volunteering under 29 C.F.R. Sec. 553.101.