

HB 1932/SB 5659: Retirement of EMTs working for public hospital districts

Clarify the Retirement of EMTs Working for Public Hospital Districts

The legislature should clarify that an emergency medical technician (EMT) employed by a public hospital district does not qualify for membership in the Law Enforcement Officers and Fire Fighters (LEOFF) retirement system unless the EMT was a member of the public employees' retirement system (PERS) while providing emergency medical services as a first responder for the public hospital district. The state Department of Retirement Systems interprets current law as requiring hospital district-employed EMTs to be enrolled in LEOFF. This interpretation, if allowed to stand, would impose significant costs for PHDs.

Legislation intended to allow EMTs on state retirement to convert to firefighters' retirement

In 2005, HB 1936 was passed allowing 67 EMTs who were participating in PERS to participate in the more robust LEOFF retirement system. Six years later, in 2011, the state Department of Retirement Systems issued a ruling that interpreted the 2005 law to require that all EMTs employed by hospital districts be allowed to convert their existing retirement to the LEOFF system and, further, that the option be applied retroactively to 2005.

The legislature never intended this law to apply to public hospital districts

There is no evidence that the 2005 legislation was intended to include hospital district EMTs. The bill title clearly defines the intent of the bill as only applying to employees currently enrolled in PERS. Staff bill reports and fiscal notes that accompanied the bill made it clear that it only applied to 67 EMTs who were covered under the PERS retirement system; and hearing testimony assured the legislative committee that this was a very narrow bill, applied only to EMTs covered by PERS and even suggested the number covered might be less than 67.

There is no clear legal way to apply the requirement retroactively

Unlike EMTs who previously participated in PERS, no mechanism exists for these EMTs to transfer credit or to elect to stay in their current system. Currently, hospital district-



Hospital District EMTs were not intended to be mandatorily included in the firefighters' retirement program.

employed EMTs are covered by various retirement programs such as 401(a), 457 and 403(b) annuities, and others. In some cases, regulation and oversight of these retirement programs is at the federal level, where the state has no jurisdiction. It is not clear whether it would even be possible to disengage district EMTs from their current retirement and, if not, whether hospital districts would be required to "double cover" some employees.

High costs to hospital districts and state

The cost of covering EMTs in the LEOFF system is distributed as follows: 50% employee, 30% employer, and 20% state. However, the law requires that the employer (hospital district) must pay both the employer and employee portion (e.g. 80%) and then seek to recover the employee amount. If the district employer is unable to recover those costs (either because the EMT/employee has since left and can't be located, is uninterested in participation or has died), the state keeps the money. To illustrate the magnitude of the problem, the cost to the four most impacted districts of paying the employee and employer share of the retroactive costs would be **more than \$4.6 million**; the cost to one district alone would be **more than \$3.2 million**; and the **cost to the state** to provide it's 20% share would be **more than a million dollars**.

WSHA position

We are seeking legislation that clarifies that an EMT employed by a public hospital district does not qualify for membership in the Law Enforcement Officers and Fire Fighters (LEOFF) retirement system unless the EMT was a member of the public employees' retirement system (PERS) while providing emergency medical services as a first responder for the public hospital district.