



Washington State Health Care Authority
Public Employees Benefits Board

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TO: Ms. Rita Lauzon
Center for Information Services
3101 Northup Way, Suite 100
Bellevue, Washington 98004-1449

FROM: Megan Atkinson, Financial Services Manager
Finance and Budget Office

SUBJECT: Revised Fiscal Year 2005 PEBB Program Rates – Composite

The state agencies and higher-education institutions total funding rate of \$663.00 will remain unchanged until July 1, 2006. **However, based on new contracts with the health plans, the state and higher-education employee monthly contributions will change effective January 1, 2006.** The new contribution schedule is enclosed and will be distributed as part of the open enrollment materials to all state and higher-education employees. Complete open enrollment information is also available on the Public Employees Benefits Board (PEBB) Web site at www.pebb.hca.wa.gov.

Same-sex domestic partner tax tables are also enclosed for your use. Tables 1 and 2 provide monthly amounts for additional taxable income for "Non-Tax Qualified Partners" for 2005. Tables 3 - 7 provide monthly payroll employee contributions (deductions) for subscribers and same-sex domestic partners. If you have questions, please contact your OFM training officer.

If you have questions on the rates, please call Sandra Lakey at (360) 412-4201. Sandra can also be contacted by e-mail at slak107@hca.wa.gov.

MA:kg

Enclosures

cc: Mary Fliss
Barbara Scott
Debbie Haeger
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PEBB Program for 2006

Additional Taxable Income for Non-Tax Qualified Domestic Partners

Table 1: Employer Share Medical and Dental

2006 Monthly State Premium Contribution for Medical and Dental for Active Employees

Additional Taxable Income for Non-Tax Qualified Dependents' coverage*

	Coverage for DOMESTIC PARTNER*	Coverage for CHILD(REN)*	Coverage for DOMESTIC PARTNER, CHILD(REN)*
MEDICAL PLAN			
All Medical Plans	\$377	\$299	\$676

Table 2: Employer Share Dental Only

Sample chart for dental only enrollment-taxable amount for dependents

	Coverage for DOMESTIC PARTNER*	Coverage for CHILD(REN)*	Coverage for DOMESTIC PARTNER, CHILD(REN)*
DENTAL PLAN			
All Dental Plans	\$37	\$37	\$74

2005 Monthly State Contribution for Medicare Retirees (monthly state subsidy)**

Additional taxable income for non-tax qualified domestic partners

Medicare Supp Plan E	\$56
Medicare Supp Plan E Disabled	\$95
Medicare Supp Plan J Retired without Rx	\$84
Kaiser	\$130
All other plans	\$132

*Premiums displayed are rounded to the nearest dollar, consistent with IRS tax reporting

**Retiree subsidy is limited to 50% of the total premium paid to the health plan by state law

State and Higher Education Active Employee Monthly Contributions (Deductions)
 For Non-Tax Qualified Spouses and Dependents (Same Sex Domestic Partners)
 Final 2006 PEBB Rates-HCA Finance and Administration

Table 3: Total Monthly Employee Contribution Owed for All Coverage (Pre-taxed and post-taxed combined)

Plan Name	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
CHPWA	\$ 73	\$ 155	\$ 127	\$ 210
Group Health Cooperative of Puget Sound	\$ 51	\$ 113	\$ 90	\$ 151
Group Health Options Inc.	\$ 98	\$ 205	\$ 171	\$ 278
Kaiser Foundation Health Plan of the NW	\$ 55	\$ 120	\$ 96	\$ 161
PacifiCare of Washington, Inc	\$ 131	\$ 272	\$ 230	\$ 371
Regence BlueShield	\$ 136	\$ 282	\$ 238	\$ 385
Uniform Medical Plan PPO	\$ 14	\$ 38	\$ 25	\$ 49
Uniform Neighborhood	\$ 12	\$ 34	\$ 21	\$ 43

Table 4: Post-Tax Partner Share for "Subscriber and Spouse" Tier

Plan Name	Subscriber and Spouse	Subscriber	Partner
CHPWA	\$ 155	\$ 73	\$ 83
Group Health Cooperative of Puget Sound	\$ 113	\$ 51	\$ 61
Group Health Options Inc.	\$ 205	\$ 98	\$ 108
Kaiser Foundation Health Plan of the NW	\$ 120	\$ 55	\$ 65
PacifiCare of Washington, Inc	\$ 272	\$ 131	\$ 141
Regence BlueShield	\$ 282	\$ 136	\$ 146
Uniform Medical Plan PPO	\$ 38	\$ 14	\$ 24
Uniform Neighborhood	\$ 34	\$ 12	\$ 22

Table 6: Post Tax Partner and Child(ren) Share for "Full Family" Tier

Plan Name	Full Family	Subscriber	Partner and Child(ren)
CHPWA	\$ 210	\$ 73	\$ 137
Group Health Cooperative of Puget Sound	\$ 151	\$ 51	\$ 100
Group Health Options Inc.	\$ 278	\$ 98	\$ 181
Kaiser Foundation Health Plan of the NW	\$ 161	\$ 55	\$ 106
PacifiCare of Washington, Inc	\$ 371	\$ 131	\$ 240
Regence BlueShield	\$ 385	\$ 136	\$ 248
Uniform Medical Plan PPO	\$ 49	\$ 14	\$ 35
Uniform Neighborhood	\$ 43	\$ 12	\$ 31

Table 5: Post Tax Partner Share for "Full Family" Tier

Plan Name	Full Family	Subscriber and Child(ren)	Partner
CHPWA	\$ 210	\$ 127	\$ 83
Group Health Cooperative of Puget Sound	\$ 151	\$ 90	\$ 61
Group Health Options Inc.	\$ 278	\$ 171	\$ 108
Kaiser Foundation Health Plan of the NW	\$ 161	\$ 96	\$ 65
PacifiCare of Washington, Inc	\$ 371	\$ 230	\$ 141
Regence BlueShield	\$ 385	\$ 238	\$ 146
Uniform Medical Plan PPO	\$ 49	\$ 25	\$ 24
Uniform Neighborhood	\$ 43	\$ 21	\$ 22

Table 7: Monthly Pre-Tax Employee Contributions

Plan Name	Subscriber and Child(ren)	Subscriber	Partner's Children
CHPWA	\$127	\$73	\$54
Group Health Cooperative of Puget Sound	\$90	\$51	\$39
Group Health Options Inc.	\$171	\$98	\$73
Kaiser Foundation Health Plan of the NW	\$96	\$55	\$41
PacifiCare of Washington, Inc	\$230	\$131	\$98
Regence BlueShield	\$238	\$136	\$102
Uniform Medical Plan PPO	\$25	\$14	\$11
Uniform Neighborhood	\$21	\$12	\$9

State and Higher Education Active Employee Contribution

Final 2006 PEBB Rates

HCA Finance and Administration

	Employee Contribution			
	<u>Subscriber</u>	<u>Subscriber & Spouse</u>	<u>Subscriber & Child(ren)</u>	<u>Full Family</u>
CHPWA	\$73	\$155	\$127	\$210
Group Health Cooperative of Puget Sound	\$51	\$113	\$90	\$151
Group Health Options Inc.	\$98	\$205	\$171	\$278
Kaiser Foundation Health Plan of the NW	\$55	\$120	\$96	\$161
PacifiCare of Washington, Inc	\$131	\$272	\$230	\$371
Regence BlueShield	\$136	\$282	\$238	\$385
Uniform Medical Plan PPO	\$14	\$38	\$25	\$49
Uniform Neighborhood	\$12	\$34	\$21	\$43