



Washington State Health Care Authority  
*Public Employees Benefits Division*

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June 16, 2011

TO: Personnel, Payroll, and Insurance Offices of Employer Groups

FROM: Steve Norsen, Manager  
PEBB Outreach & Training Team

SUBJECT: Fiscal Year (FY) 2012 PEBB Program Rates – Composite

**Effective July 1, 2011 through June 30, 2012, your employer funding will remain \$850.00 per active employee per month.** These rates were established in the 2011 Laws, 1<sup>st</sup> Special Session PV, Chapter 50 and cover benefits under the Public Employees Benefits Board (PEBB) program.

Employee contributions, COBRA, and self-pay rates will remain the same until January 1, 2012, when the new plan year begins. You will receive these revised rate sheets before open enrollment this fall.

As a reminder, you must pay the full employer funding rate for every eligible employee as outlined in WAC 182-12, including those who have waived medical coverage. Employee premiums will automatically be added to your billed rate. You are responsible for collecting the employees' premiums and sending the total billed amount to the HCA.

If you have questions, please contact me at 360-412-4201 or [steve.norsen@hca.wa.gov](mailto:steve.norsen@hca.wa.gov).

c: Kim Grindrod, PEBB Budget Analyst

**Composite Active Rates for STATE and HIGHER ED,  
Commodity Commissions and Employer Groups  
(for 07/01/11 through 12/31/11 only)**

2011 PEBB Bid Rates  
HCA Financial Services

	07/01/11 through 06/30/12	01/01/11 through 12/31/11				07/01/11 through 12/31/11			
Plan Name	Base Rate	Employee Contributions				Total Base Rates With Employee Contributions			
		Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Group Health Classic	\$ 850.00	\$ 71.00	\$ 152.00	\$ 124.00	\$ 205.00	\$ 921.00	\$ 1,002.00	\$ 974.00	\$ 1,055.00
Group Health Value	\$ 850.00	\$ 30.00	\$ 70.00	\$ 53.00	\$ 93.00	\$ 880.00	\$ 920.00	\$ 903.00	\$ 943.00
Kaiser Permanente Classic	\$ 850.00	\$ 105.00	\$ 220.00	\$ 184.00	\$ 299.00	\$ 955.00	\$ 1,070.00	\$ 1,034.00	\$ 1,149.00
Uniform Medical Plan PPO	\$ 850.00	\$ 60.00	\$ 130.00	\$ 105.00	\$ 175.00	\$ 910.00	\$ 980.00	\$ 955.00	\$ 1,025.00