



Washington State Health Care Authority  
*Public Employees Benefits Board*

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August 3, 2012

TO: PEBB Participating School Districts and Employer Groups  
(Political Subdivisions & Tribal Governments)

FROM: Steve Norsen, Manager  
PEBB Outreach & Training Team

SUBJECT: 2013 Rates – Tiered - Full Benefits Package

We have completed the procurement cycle, which resulted in an increase in premiums for your employees and early retirees. Enclosed is the revised rate sheet (effective January 1, 2013) for school districts, employer groups, and Tribal Governments on tiered rates accepting the full benefits package.

Employee optional life and long term disability (LTD) insurance rates will remain the same for 2013. The rate schedule for life and LTD insurance is also enclosed.

If you have an IRS Section 125 Plan that allows employee premium dollars to be treated as a pre-tax deduction, note that if an employee's non-tax qualified dependents do not qualify as IRS dependents, a portion of the premium employers pay toward the family's coverage is considered taxable income to the employee. To assist you, we have included examples of how the state calculates these amounts for state agency personnel [Tables 1-7]. These tables should only be used as a template in developing calculations that are based on your employer contribution rate.

Open enrollment will run from November 1 – November 30, 2012. In early October, employees will receive the *For Your Benefit* newsletter with open enrollment information. This newsletter is the only notice we send employees about open enrollment. Details will also be available at [www.pebb.hca.wa.gov](http://www.pebb.hca.wa.gov) before open enrollment.

Employees who make a health plan change online during open enrollment will not see a premium rate. Instead, a pop-up box will prompt them to contact their personnel or payroll office for premium information. To support their decisions, you may want to distribute information regarding how much your employees are expected to pay before open enrollment so they can have it available when making a plan selection.

If you have questions about the rates, please contact me at 360-725-0831 or [steve.norsen@hca.wa.gov](mailto:steve.norsen@hca.wa.gov).

Enclosures

c: Kim Grindrod

**K-12 and Employer Groups (Political Subdivisions and Tribal Governments)  
Active Tiered Rates for Full Benefits Package**

2013 PEBB Bid Rates  
HCA Finance and Administration

Plan Name	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Group Health Classic	\$ 720.95	\$ 1,299.43	\$ 1,154.81	\$ 1,733.29
Group Health Value	\$ 671.51	\$ 1,200.55	\$ 1,068.29	\$ 1,597.33
Group Health CDHP	\$ 650.06	\$ 1,154.69	\$ 1,043.12	\$ 1,489.42
Kaiser Permanente Classic	\$ 703.35	\$ 1,264.23	\$ 1,124.01	\$ 1,684.89
Kaiser CDHP	\$ 635.24	\$ 1,124.55	\$ 1,016.81	\$ 1,447.79
Uniform Medical Plan Classic	\$ 682.12	\$ 1,221.77	\$ 1,086.86	\$ 1,626.51
Uniform Medical Plan CDHP	\$ 636.24	\$ 1,126.55	\$ 1,018.56	\$ 1,450.54
Medical Waived	\$ 142.47	\$ 142.47	\$ 142.47	\$ 142.47

Pub No. 52-489

**PEBB Life and AD&D Rates Paid to Plan and Charged to Subscribers**

Final PEBB 2013 Rates  
HCA Finance and Administration

Pub No.

<b>Employee Basic*</b>	Monthly Cost:	\$	4.08
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<b>Retiree</b>	Monthly Cost:	\$	6.57
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<b>Spouse/Child Basic</b>	Monthly Cost:	\$	0.50
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51-275R, 51-403F, 51-516, 51-205, 51-575

50-100

<b>Employee/Spouse Supplemental</b>		
Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments)		

50-100

Age	Non-Smoker	Smoker
<25	\$ 0.024	\$0.031
25-29	\$ 0.026	\$0.037
30-34	\$ 0.029	\$0.049
35-39	\$ 0.036	\$0.056
40-44	\$ 0.054	\$0.063
45-49	\$ 0.078	\$0.095
50-54	\$ 0.122	\$0.145
55-59	\$ 0.228	\$0.270
60-64	\$ 0.350	\$0.411
65-69	\$ 0.646	\$0.792
70+	\$ 0.964	\$1.287

<b>Supplemental AD&amp;D:</b>				Pub No.			
<b>Rate per Thousand \$</b>		\$ 0.008	\$ 0.012	50-100			
Employee Coverage		Employee Only Cost	Employee & Dependent(s) Cost	Spouse Coverage		Per Child Coverage	
				No Children	With Children	With Spouse	No Spouse
\$	25,000	\$ 0.20	\$ 0.30	\$ 12,500	\$ 10,000	\$ 1,250	\$ 2,500
\$	50,000	\$ 0.40	\$ 0.60	\$ 25,000	\$ 20,000	\$ 2,500	\$ 5,000
\$	75,000	\$ 0.60	\$ 0.90	\$ 37,500	\$ 30,000	\$ 3,750	\$ 7,500
\$	100,000	\$ 0.80	\$ 1.20	\$ 50,000	\$ 40,000	\$ 5,000	\$ 10,000
\$	125,000	\$ 1.00	\$ 1.50	\$ 62,500	\$ 50,000	\$ 6,250	\$ 12,500
\$	150,000	\$ 1.20	\$ 1.80	\$ 75,000	\$ 60,000	\$ 7,500	\$ 15,000
\$	175,000	\$ 1.40	\$ 2.10	\$ 87,500	\$ 70,000	\$ 8,750	\$ 17,500
\$	200,000	\$ 1.60	\$ 2.40	\$ 100,000	\$ 80,000	\$ 10,000	\$ 20,000
\$	225,000	\$ 1.80	\$ 2.70	\$ 112,500	\$ 90,000	\$ 11,250	\$ 22,500
\$	250,000	\$ 2.00	\$ 3.00	\$ 125,000	\$ 100,000	\$ 12,500	\$ 25,000

\* Represents premium paid to Plan

For State Actives, Plan A Basic coverage is paid by the employer.

For Actives from Employer Groups, ESDs, and K-12 Districts Accepting the Full Benefits Package, the premium for Plan A Basic coverage is included in the rates for the selected medical plan.

Coverage is not provided to Actives from K-12 Districts Accepting Medical Only Package.

**PEBB LONG TERM DISABILITY PLAN**

Rates Paid to Plan and Charged to Subscribers

Final PEBB 2013 Rates

HCA Finance and Administration

Pub No.

<b>Basic Plan for Actives</b>	Monthly Cost*:	\$	2.00
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50-100

<b>Optional Plan</b>	TIAA/CREF or Higher Education Academic Retirement Plan Employees	TRS, PERS, & other Retirement Plan Employees
Waiting Period		
30 days	1.86%	1.47%
60 days	0.95%	0.78%
90 days	0.52%	0.43%
120 days	0.30%	0.26%
180 days	0.23%	0.20%
240 days	0.22%	0.20%
300 days	0.20%	0.18%
360 days	0.20%	0.17%

\* Represents premium paid to plan only.  
For State Actives, Basic Plan coverage is funded by the state.

**PEBB Program for 2013**

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

**Table 1: Employer Share Medical and Dental**

2013 Monthly State Premium Contribution for Medical and Dental for Active Employees  
Additional Taxable Income for Non-Tax Qualified Dependent Coverage

<b>MEDICAL AND DENTAL PLAN</b>	<b>Partner*</b>	<b>Subscriber's or Partner's Child(ren)*</b>	<b>Partner and Child(ren)*</b>
All Medical Plans	\$ 499	\$ 393	\$ 892

**Table 2: Employer Share Dental Only**

Sample chart for dental only enrollment-taxable amount for dependents

<b>DENTAL PLAN</b>	<b>Partner*</b>	<b>Subscriber's or Partner's Child(ren)*</b>	<b>Partner and Child(ren)*</b>
All Dental Plans	\$ 46	\$ 46	\$ 92

**2013 Monthly State Contribution for Medicare Retirees (monthly state subsidy)\*\***

**Additional taxable income for non-tax qualified domestic partners**

GHC Medicare Only	\$ 129
Kaiser Classic	\$ 145
Uniform Medical Plan PPO	\$ 150
Plan F Retired	\$ 103
Plan F Disabled	\$ 150

\*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 Dependents  
Final 2013 PEBB Rates-HCA Finance and Administration**

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

Plan Name	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Group Health Classic	\$ 115	\$ 240	\$ 201	\$ 326
Group Health Value	\$ 66	\$ 142	\$ 116	\$ 192
Group Health CDHP	\$ 36	\$ 82	\$ 63	\$ 109
Kaiser Permanente Classic	\$ 98	\$ 206	\$ 172	\$ 280
Kaiser CDHP	\$ 21	\$ 52	\$ 37	\$ 68
Uniform Medical Plan PPO	\$ 77	\$ 164	\$ 135	\$ 222
Uniform Medical Plan PPO CDHP	\$ 22	\$ 54	\$ 39	\$ 71

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

Plan Name	Subscriber and Spouse	Subscriber	Partner
Group Health Classic	\$ 240	\$ 115	\$ 125
Group Health Value	\$ 142	\$ 66	\$ 76
Group Health CDHP	\$ 82	\$ 36	\$ 46
Kaiser Permanente Classic	\$ 206	\$ 98	\$ 108
Kaiser CDHP	\$ 52	\$ 21	\$ 31
Uniform Medical Plan PPO	\$ 164	\$ 77	\$ 87
Uniform Medical Plan PPO CDHP	\$ 54	\$ 22	\$ 32

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

Plan Name	Full Family	Subscriber	Partner and Child(ren)
Group Health Classic	\$ 326	\$ 115	\$ 211
Group Health Value	\$ 192	\$ 66	\$ 126
Group Health CDHP	\$ 109	\$ 36	\$ 73
Kaiser Permanente Classic	\$ 280	\$ 98	\$ 182
Kaiser CDHP	\$ 68	\$ 21	\$ 47
Uniform Medical Plan PPO	\$ 222	\$ 77	\$ 145
Uniform Medical Plan PPO CDHP	\$ 71	\$ 22	\$ 49

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

Plan Name	Full Family	Subscriber and Child(ren)	Partner
Group Health Classic	\$ 326	\$ 201	\$ 125
Group Health Value	\$ 192	\$ 116	\$ 76
Group Health CDHP	\$ 109	\$ 63	\$ 46
Kaiser Permanente Classic	\$ 280	\$ 172	\$ 108
Kaiser CDHP	\$ 68	\$ 37	\$ 31
Uniform Medical Plan PPO	\$ 222	\$ 135	\$ 87
Uniform Medical Plan PPO CDHP	\$ 71	\$ 39	\$ 32

Table 7: Post Tax Partner's Child(ren) Share for "Subscriber and Child(ren)" Tier

Plan Name	Subscriber and Child(ren)	Subscriber	Partner's Children
Group Health Classic	\$ 201	\$ 115	\$ 86
Group Health Value	\$ 116	\$ 66	\$ 50
Group Health CDHP	\$ 63	\$ 36	\$ 27
Kaiser Permanente Classic	\$ 172	\$ 98	\$ 74
Kaiser CDHP	\$ 37	\$ 21	\$ 16
Uniform Medical Plan PPO	\$ 135	\$ 77	\$ 58
Uniform Medical Plan PPO CDHP	\$ 39	\$ 22	\$ 17