



Washington State Health Care Authority
Public Employees Benefits Board

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July 9, 2015

TO: Ms. Anne Sinnes
Center for Information Services
3101 Northup Way, Suite 100
Bellevue, WA 98004-1449

FROM: Amy Corrigan
PEBB Outreach & Training Team

SUBJECT: Fiscal Year (FY) 2016 PEBB Program Rates - Composite

Starting July 1, 2015 (FY 2016), the monthly employer base rate will be \$840 per active employee per month. These rates were established in the ESSB 6052.PL 64th Legislature, 2015 3rd Special Session and cover benefits administered by the Health Care Authority (HCA) through the Public Employees Benefits Board (PEBB) Program.

Employee contributions, COBRA, and self-pay rates will remain the same until January 1, 2016, when the new plan year begins. You will receive these revised rates before open enrollment this fall.

In addition to the employee contribution, employees may be subject to a \$25 tobacco use and \$50 spousal monthly premium surcharge.

As a reminder, you must pay the full base rate for every eligible employee as outlined in Title 182-WAC08, including for those who have waived medical coverage.

The base rate does not represent the actual cost of providing benefits to employees during the calendar year. The amounts below break out the current base rate, which may vary from the actual costs.

| Benefit | Base Rate Breakout |
|-----------------------|--------------------|
| Net Medical and Admin | \$ 753.31 |
| Dental | \$ 80.57 |
| Life | \$ 4.02 |
| LTD | \$ 2.10 |
| Total Base Rate | \$ 840.00 |

If you have questions, please contact me at 360-725-0826 or Amy.Corrigan@HCA.WA.GOV.
cc: Stephen Lomnicki, PEBB Fiscal Information and Data Analyst

**Composite Active Rates for STATE and HIGHER ED, and Commodity Commissions
(for 7/1/2015 through 12/31/2015)**

2015 PEBB Rates
HCA Financial Services

| | 07/01/15 through 06/30/16 | 01/01/15 through 12/31/15 | | | | 07/01/15 through 12/31/15 | | | |
|------------------------------|---------------------------------|---------------------------|-----------------------|---------------------------|-------------|--|-----------------------|---------------------------|-------------|
| | | Employee Contributions | | | | Total Base Rates With Employee Contributions | | | |
| Plan Name | Base Rate | Subscriber | Subscriber and Spouse | Subscriber and Child(ren) | Full Family | Subscriber | Subscriber and Spouse | Subscriber and Child(ren) | Full Family |
| Group Health Classic | \$840.00 | \$107.00 | \$224.00 | \$187.00 | \$304.00 | \$947.00 | \$1,064.00 | \$1,027.00 | \$1,144.00 |
| Group Health Value | \$840.00 | \$75.00 | \$160.00 | \$131.00 | \$216.00 | \$915.00 | \$1,000.00 | \$971.00 | \$1,056.00 |
| Group Health CDHP | \$840.00 | \$26.00 | \$62.00 | \$46.00 | \$82.00 | \$866.00 | \$902.00 | \$886.00 | \$922.00 |
| Kaiser Permanente Classic | \$840.00 | \$125.00 | \$260.00 | \$219.00 | \$354.00 | \$965.00 | \$1,100.00 | \$1,059.00 | \$1,194.00 |
| Kaiser CDHP | \$840.00 | \$35.00 | \$80.00 | \$61.00 | \$106.00 | \$875.00 | \$920.00 | \$901.00 | \$946.00 |
| Uniform Medical Plan Classic | \$840.00 | \$84.00 | \$178.00 | \$147.00 | \$241.00 | \$924.00 | \$1,018.00 | \$987.00 | \$1,081.00 |
| Uniform Medical Plan CDHP | \$840.00 | \$31.00 | \$72.00 | \$54.00 | \$95.00 | \$871.00 | \$912.00 | \$894.00 | \$935.00 |

| Surcharges | | | | | | | | | |
|------------------------------|--|---------|---------|---------|---------|---------|---------|---------|---------|
| Tobacco Use Surcharge | | \$25.00 | \$25.00 | \$25.00 | \$25.00 | \$25.00 | \$25.00 | \$25.00 | \$25.00 |
| Spouse Waiver (AV) Surcharge | | \$0.00 | \$50.00 | \$0.00 | \$50.00 | \$0.00 | \$50.00 | \$0.00 | \$50.00 |