

# 2022 SEBB Continuation Coverage Monthly Medical Premiums



Effective January 1, 2022

What you pay	Managed Care and Exclusive Provider Organization (EPO) Plans							
	Kaiser Foundation Health Plan of the Northwest <sup>1</sup>			Kaiser Foundation Health Plan of Washington				Premera Blue Cross
	Plan 1	Plan 2	Plan 3	Core 1	Core 2	Core 3	SoundChoice	Peak Care (EPO)

## Monthly premiums

Subscriber	\$624.33	\$643.50	\$710.04	\$613.17	\$618.56	\$693.14	\$650.56	\$615.10
Subscriber & spouse <sup>2</sup>	\$1,244.27	\$1,282.60	\$1,415.69	\$1,221.95	\$1,232.73	\$1,381.89	\$1,296.73	\$1,225.80
Subscriber & children	\$1,089.28	\$1,122.83	\$1,239.27	\$1,069.76	\$1,079.19	\$1,209.70	\$1,135.19	\$1,073.13
Subscriber, spouse, <sup>2</sup> & children	\$1,864.21	\$1,921.71	\$2,121.33	\$1,830.73	\$1,846.90	\$2,070.64	\$1,942.90	\$1,836.51

What you pay	Preferred Provider Organization (PPO) Plans								
	Kaiser Foundation Health Plan of Washington Options			Premera Blue Cross		Uniform Medical Plan (administered by Regence BlueShield)			
	Access PPO 1	Access PPO 2	Access PPO 3	High PPO	Standard PPO	Achieve 1	Achieve 2	UMP Plus	High Deductible

## Monthly premiums

Subscriber	\$677.92	\$707.43	\$759.28	\$661.64	\$611.72	\$611.16	\$674.93	\$651.30	\$604.80
Subscriber & spouse <sup>2</sup>	\$1,351.46	\$1,410.47	\$1,514.17	\$1,318.90	\$1,219.05	\$1,217.93	\$1,345.47	\$1,298.21	\$1,204.58
Subscriber & children	\$1,183.07	\$1,234.71	\$1,325.45	\$1,154.59	\$1,067.22	\$1,066.24	\$1,177.84	\$1,136.48	\$1,062.45
Subscriber, spouse, <sup>2</sup> & children	\$2,024.99	\$2,113.52	\$2,269.06	\$1,976.15	\$1,826.38	\$1,824.70	\$2,016.01	\$1,945.12	\$1,773.11

## Medical premium surcharges

Two premium surcharges may apply in addition to your monthly medical premium. You will be charged for them if the conditions below apply, or if you do not attest to the surcharges when required.

- A monthly \$25-per-account tobacco use medical premium surcharge will apply if you or any dependent (age 13 and older) enrolled on your SEBB coverage uses tobacco products.
- A monthly \$50 medical premium surcharge will apply if you enroll a spouse or state-registered domestic partner in SEBB medical coverage, and they have chosen not to enroll in another employer-based group medical plan that is comparable to UMP Classic (a Public Employees Benefits Board [PEBB] Program plan).

For more guidance on whether these surcharges apply to you, see the *2022 SEBB Premium Surcharge Attestation Help Sheet* on the HCA website at [hca.wa.gov/erb](https://hca.wa.gov/erb) under *Forms & publications*.

1. Kaiser Foundation Health Plan of the Northwest (KFHPNW) offers plans in Clark and Cowlitz counties in Washington and select counties in Oregon. KFHPNW Medicare plans have a larger service area.  
2. Or state-registered domestic partner.  
HCA 20-0058 (9/21)

## Monthly dental premiums

What you pay	Managed Care Plans		Preferred Provider Organization (PPO)
	DeltaCare <sup>1</sup>	Willamette Dental Group	Uniform Dental Plan <sup>1</sup>
<b>Monthly premiums</b>			
Subscriber	\$41.33	\$49.90	\$49.76
Subscriber & spouse <sup>2</sup>	\$82.66	\$99.80	\$99.52
Subscriber & children	\$82.66	\$99.80	\$99.52
Subscriber, spouse, <sup>2</sup> & children	\$123.99	\$149.70	\$149.28

## Monthly vision premiums

What you pay	Davis Vision <sup>3</sup>	EyeMed Vision Care <sup>4</sup>	MetLife Vision <sup>5</sup>
<b>Monthly premiums</b>			
Subscriber	\$4.36	\$5.96	\$6.66
Subscriber & spouse <sup>2</sup>	\$8.72	\$11.92	\$13.32
Subscriber & children	\$7.63	\$10.43	\$11.66
Subscriber, spouse, <sup>2</sup> & children	\$13.08	\$17.88	\$19.98

HCA is committed to providing equal access to our services. If you need an accommodation, or require documents in another format, please call us at 1-800-200-1004 (TRS: 711).

1. Administered by Delta Dental.
2. Or state-registered domestic partner
3. Underwritten by HM Life Insurance Company.
4. Underwritten by Fidelity Security Life Insurance Company.
5. Underwritten by Metropolitan Life Insurance Company.