

# 2021 PEBB Continuation Coverage Monthly Premiums



## PEBB Continuation Coverage non-Medicare medical plan premiums

For members not eligible for Medicare (or enrolled in Part A only)	Subscriber	Subscriber & spouse <sup>1</sup>	Subscriber & children	Subscriber, spouse <sup>1</sup> & children
<b>Kaiser Permanente NW Classic<sup>2</sup></b>	\$745.66	\$1,485.75	\$1,300.73	\$2,040.82
<b>Kaiser Permanente NW CDHP<sup>2</sup></b>	\$618.76	\$1,226.30	\$1,089.00	\$1,638.21
<b>Kaiser Permanente WA Classic</b>	\$775.39	\$1,545.22	\$1,352.76	\$2,122.58
<b>Kaiser Permanente WA CDHP</b>	\$619.29	\$1,227.86	\$1,090.30	\$1,640.54
<b>Kaiser Permanente WA SoundChoice</b>	\$641.43	\$1,277.28	\$1,118.32	\$1,754.17
<b>Kaiser Permanente WA Value</b>	\$698.96	\$1,392.34	\$1,219.00	\$1,912.38
<b>UMP Classic</b>	\$691.72	\$1,377.86	\$1,206.32	\$1,892.47
<b>UMP Select</b>	\$623.50	\$1,241.43	\$1,086.95	\$1,704.88
<b>UMP CDHP</b>	\$618.52	\$1,226.31	\$1,088.95	\$1,638.41
<b>UMP Plus—PSHVN</b>	\$658.79	\$1,312.02	\$1,148.71	\$1,801.93
<b>UMP Plus—UW Medicine ACN</b>	\$658.79	\$1,312.02	\$1,148.71	\$1,801.93

## Medical premium surcharges (for non-Medicare subscribers only)

Two premium surcharges may apply in addition to your monthly medical premium if you, the subscriber, are not enrolled in Medicare Part A and Part B. You will be charged for them if the conditions described below apply, or if you do not attest to the surcharges.

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

For more guidance on whether these premium surcharges apply to you, see the *2021 PEBB Premium Surcharge Attestation Help Sheet* under *Forms & publications* on the HCA website at [hca.wa.gov/erb](http://hca.wa.gov/erb).

## PEBB Continuation Coverage dental plan premiums

	Subscriber	Subscriber & spouse <sup>1</sup>	Subscriber & children	Subscriber, spouse <sup>1</sup> & children
<b>DeltaCare<sup>3</sup></b>	\$39.53	\$79.06	\$79.06	\$118.59
<b>Uniform Dental Plan<sup>3</sup></b>	\$48.00	\$96.00	\$96.00	\$144.00
<b>Willamette Dental of Washington, inc.</b>	\$44.45	\$88.90	\$88.90	\$133.35

<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> If a Medicare supplement plan is selected, non-Medicare enrollees are enrolled in UMP Classic. The rates shown reflect the total due, including premiums for both plans

<sup>3</sup> Administered by Delta Dental of Washington

## Special requirement for Medicare premiums

- At least one member on your account must be enrolled in Medicare Part A and Part B.
- Medicare premiums are not available to PEBB Continuation Coverage (Unpaid Leave) members.

For more information on this requirement, contact your medical plan's customer service department. For more information on premiums, contact the PEBB Program at 1-800-200-1004 (TRS: 711).

## PEBB Continuation Coverage Medicare medical plan premiums

For members enrolled in Medicare Part A and Part B	Subscriber		Subscriber & spouse <sup>1</sup>		Subscriber & children		Subscriber, spouse <sup>1</sup> & children		
	1 Medicare eligible	2 Medicare eligible	1 Medicare eligible	2 Medicare eligible	1 Medicare eligible	2 Medicare eligible	1 Medicare eligible	2 Medicare eligible	3 Medicare eligible
<b>Kaiser Permanente NW Senior Advantage<sup>2</sup></b>	\$343.26	\$1,083.35 <sup>3</sup>	\$680.96	\$898.33 <sup>3</sup>	\$680.96	\$1,638.42 <sup>3</sup>	\$1,236.03 <sup>3</sup>	\$1,018.65	
<b>Kaiser Permanente WA Classic</b>	N/A	\$1,118.47	N/A <sup>4</sup>	\$926.01	N/A <sup>4</sup>	\$1,695.83	\$1,269.08	N/A <sup>4</sup>	
<b>Kaiser Permanente WA Medicare Plan</b>	\$348.64	N/A <sup>4</sup>	\$691.71	N/A <sup>4</sup>	\$691.71	N/A <sup>4</sup>	N/A <sup>4</sup>	\$1,034.79	
<b>Kaiser Permanente WA SoundChoice</b>	N/A	\$984.50	N/A <sup>4</sup>	\$825.53	N/A <sup>4</sup>	\$1,461.39	\$1,168.61	N/A <sup>4</sup>	
<b>Kaiser Permanente WA Value</b>	N/A	\$1,042.03	N/A <sup>4</sup>	\$868.68	N/A <sup>4</sup>	\$1,562.07	\$1,211.75	N/A <sup>4</sup>	
<b>UMP Classic</b>	\$519.30	\$1,205.45	\$1,033.04	\$1,033.91	\$1,033.04	\$1,720.06	\$1,547.65	\$1,546.77	
<b>UnitedHealthcare<sup>5</sup> PEBB Balance</b>	\$260.29	\$946.44	\$515.01	\$774.90	\$515.01	\$1,461.04	\$1,029.62	\$769.73	
<b>UnitedHealthcare<sup>5</sup> PEBB Complete</b>	\$308.05	\$994.20	\$610.53	\$822.66	\$610.53	\$1,508.50	\$1,125.14	\$913.01	

<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> 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.

<sup>3</sup> If a Kaiser Permanente NW member is enrolled in Medicare Part A and Part B and other enrolled members are not eligible for Medicare, the non-Medicare members will be enrolled in Kaiser Permanente NW Classic. The subscriber will pay the combined Medicare and non-Medicare premium shown for Kaiser Permanente NW Senior Advantage.

<sup>4</sup> If a Kaiser Permanente WA member is enrolled in Medicare Part A and Part B, and other enrolled members are not eligible for Medicare, the non-Medicare members must enroll in Kaiser Permanente WA Classic, SoundChoice, or Value plan. The subscriber will pay a combined Medicare and non-Medicare premium.

<sup>5</sup> UnitedHealthcare (UHC) plans are Medicare Advantage plus Part D (MAPD) plans. If a UHC Medicare plan is selected, non-Medicare eligible members are enrolled in UMP Classic. The rates shown reflect the total due, including premiums for both plans.

## PEBB Continuation Coverage Blue Cross Medicare Supplement Plan F and Plan G premiums

	Subscriber	Subscriber & spouse <sup>1</sup>		Subscriber & children	Subscriber, spouse <sup>1</sup> & children			
	<i>1 Medicare eligible</i>	<i>1 Medicare eligible<sup>2</sup></i>	<i>2 Medicare eligible: 1 retired, 1 disabled</i>	<i>2 Medicare eligible</i>	<i>1 Medicare eligible<sup>2</sup></i>	<i>1 Medicare eligible<sup>2</sup></i>	<i>2 Medicare eligible: 1 retired, 1 disabled<sup>2</sup></i>	<i>2 Medicare eligible<sup>2</sup></i>
<b>Plan F</b> Age 65 or older, eligible by age	\$222.23	\$913.95	\$600.00	\$444.46	\$742.41	\$1,428.56	\$1,120.18	\$964.64
<b>Plan F</b> Under age 65, eligible by disability	\$377.77	\$1,069.49	\$600.00	\$755.54	\$897.95	\$1,584.09	\$1,120.18	\$1,275.72
<b>Plan G</b> Age 65 or older, eligible by age	\$188.70	\$880.42	\$509.49	\$377.40	\$708.88	\$1,395.02	\$1,029.67	\$897.58
<b>Plan G</b> Under age 65, eligible by disability	\$320.79	\$1,012.51	\$509.49	\$641.58	\$840.97	\$1,527.12	\$1,029.67	\$1,161.76

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).

<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> If a Medicare supplement plan is selected, non-Medicare enrollees are enrolled in UMP Classic. The rates shown reflect the total due, including premiums for both plans