2021 changes to your PEBB benefits

All changes are effective January 1, 2021 unless otherwise noted. For 2021 monthly premiums, see the enclosed letter. Learn more about the changes listed below on the HCA website at hca.wa.gov/pebb-oe.

Kaiser Permanente of the Northwest will:
- Cover one hearing instrument per ear every five years at no cost, up to the plan’s allowed amount (or, for Consumer-Directed Health Plan [CDHP] members, after the deductible is met). In-network providers may not balance bill you for this service.
- Change office visit copays to $25 for primary care and $35 for specialty care for Senior Advantage members.

Kaiser Permanente of Washington will:
- Cover one hearing instrument per ear every five years at no cost to the member, up to an allowance of $1,400 for Medicare Advantage and Original Medicare members. In-network providers may not balance bill for this service.
- Cover one hearing instrument per ear every five years at no cost to the member, up to the plan’s allowed amount, for non-Medicare retirees (or for CDHP members, after the deductible is met). In-network providers may not balance bill for this service.
- Change office visit copays to $15 for primary care and $30 for specialty care for Medicare Advantage members.
- Increase the visit limit for chiropractic care for Original Medicare members.

Uniform Medical Plan (UMP) will:
- Add a new medical plan option called UMP Select, available to subscribers and their dependents who are not enrolled in Medicare Part A or Part B. This plan has the same covered services and provider networks as UMP Classic. Some cost shares differ, though. Learn more about UMP Select on the UMP website at regence.com/ump/pebb.
- Cover one hearing instrument per ear every five years at no cost, up to the plan’s allowed amount (or, for CDHP members, after the deductible is met). Providers may not balance bill you for this service.
- Offer vision coverage through Vision Service Plan (VSP) providers.
- Add Chelan and Douglas counties to UMP Plus—Puget Sound High Value Network’s (PSHVN) service area.
- Add The Everett Clinic to UMP Plus—PSHVN’s provider network effective October 2020.
- Add Confluence Health to UMP Plus—PSHVN’s provider network effective January 1, 2021.

(continued)
UnitedHealthcare (UHC) will administer two new Medicare Advantage Prescription Drug (MAPD) plans. These plans offer Medicare Part D coverage and are available nationwide. They will be available to retirees and PEBB Continuation Coverage (COBRA) members who are enrolled in Medicare Part A and Part B. If a subscriber selects a PEBB Program MAPD plan, any non-Medicare members on the account will be enrolled in UMP Classic.

Visit the UHC website at UHCRetiree.com/wapebb or call 1-855-873-3268 to learn more about these plans. UnitedHealthcare is offering virtual town halls in October and November to provide benefit details and answer your questions.

The town halls will take place on the dates and times listed here. You can choose to call into a teleconference or join a visual presentation at a video meeting (called Webex). All times are in Pacific Time. For the teleconferences listed in the next column, at the time of the event, call 1-844-291-6360 toll-free to join. Use access code 9402742. Visit HCA’s website at hca.wa.gov/pebb-mapd to join a Webex meeting at the time of the event.
Health savings accounts (for non-Medicare subscribers)
The maximum annual contribution for health savings accounts will increase to $3,600 for individuals (up from $3,550 in 2020) and $7,200 for families (up from $7,100 in 2020). Subscribers ages 55 and older can continue to contribute an extra $1,000 per year.

Rule changes
All changes to PEBB rules that take effect January 1, 2021 will be available on the PEBB rules and policies webpage at hca.wa.gov/pebb-rules.

One important rule change concerns enrolling certain types of dependents. If a special open enrollment event allows the enrollment of an extended dependent or a dependent with a disability, their enrollment will start the first day of the month after the event date or the eligibility certification, whichever is later.

PEB Board resolutions
The PEB Board passed resolutions that make the following changes:
- Create a new self-insured medical plan called UMP Select.
- Authorize two new Medicare Advantage Prescription Drug (MAPD) plans administered by UnitedHealthcare.

How to tell the two Delta Dental plans apart
The PEBB Program offers two Delta Dental plans: DeltaCare and Uniform Dental Plan (UDP).

DeltaCare (Group 3100) is a managed-care plan. You must choose a primary care dental provider within the network. This plan will not pay claims if you see a provider outside of their network.

UDP (Group 3000) is a preferred-provider plan. You may choose any dental provider, but you will usually have lower out-of-pocket costs if you see network providers.

Covering a spouse or state-registered domestic partner for 2021?
Non-Medicare subscribers only: Even if you do not make plan changes, you may have to reattest to the $50 spouse or state-registered domestic partner coverage premium surcharge. You must do so if you attested in 2020 and will continue to cover your spouse or partner on your PEBB medical in 2021.

If you have to reattest, the PEBB Program will mail a letter to you at the address we have on file in late October. Starting November 1, you can also use PEBB My Account at hca.wa.gov/my-account to find out if you must reattest. If required, you must reattest by November 30, 2020. If you are required to reattest but do not, or if your attestation means you will incur the surcharge, you will be charged the monthly $50 surcharge in addition to your monthly medical premium starting January 1, 2021.

To learn more, visit the HCA’s website at hca.wa.gov/pebb-retirees and click on Surcharges.
Remember, Medicare doesn’t mix with CDHPs, UMP Select, or UMP Plus!

If you or a covered dependent enrolls in Medicare while you are enrolled in UMP Select, a UMP Plus plan, or a consumer-directed health plan (CDHP) with a health savings account (HSA) in 2021, you must change your PEBB medical plan or remove the Medicare-eligible dependent from your coverage. The dependent you remove would not be eligible for PEBB Continuation Coverage.

You may also want to consider changing your medical plan during the PEBB Program’s annual open enrollment. If you wait until you or a covered dependent enrolls in Medicare to change medical plans, you will need to choose a new plan no later than 60 days after your or your dependent’s enrollment in Medicare. (Exceptions apply if you select a new Medicare Advantage Prescription Drug plan.) The effective date of your plan change will be the first of the month after the date your medical plan becomes unavailable, or the date we receive the required form, whichever is later. If that day is the first of the month, the plan change begins on that day.

If you are enrolled in Medicare and a CDHP with an HSA, you will be responsible for any tax penalties that result from contributions to your HSA after you are no longer eligible. Plus, any amount you’ve paid toward your deductible and out-of-pocket maximum during the plan year will be lost—you’ll have to start over with your new medical plan.

Forms for open enrollment

Forms will be available on November 1 on our open enrollment webpage, hca.wa.gov/pebb-oe. If you would like paper forms, you can order a retiree forms packet by calling the PEBB Program’s automated line at 1-866-577-2793. We must receive your forms by November 30.

Sign up for email delivery

During these unprecedented times, email is the fastest and most efficient way to receive updates and policy changes related to the COVID-19 pandemic. Sign up to receive For Your Benefit and other news about your PEBB benefits quickly by email instead of your mailbox.

Here’s how: Visit PEBB My Account on HCA’s website at hca.wa.gov/my-account. Go to the My medical/dental coverage tab. Under Section A — Subscriber Account Information, select Subscribe/unsubscribe to email service.
You can make the changes listed here during the PEBB Program’s annual open enrollment, November 1 through 30, 2020.

Retirees can make some changes online through PEBB My Account at hca.wa.gov/my-account before midnight on November 30. If you cannot make changes online, PEBB My Account will direct you to the correct forms.

**Change your medical plan**
Log into PEBB My Account or submit the 2021 PEBB Retiree Open Enrollment Election/Change Form (Form A-OE). Questions? Visit HCA’s website at hca.wa.gov/pebb-oe or call 1-800-200-1004.

**Change your dental plan**
Log into PEBB My Account or submit the 2021 PEBB Retiree Open Enrollment Election/Change Form (Form A-OE). DeltaCare and Uniform Dental Plan, administered by Delta Dental are often confused. See “How to tell the two Delta Dental plans apart” on page 3.

**Defer or terminate your PEBB health plan coverage**
Submit the 2021 PEBB Retiree Open Enrollment Election/Change Form (Form A-OE) and any other applicable forms. If you defer or terminate your coverage, your dependents’ coverage will also end. If you defer your coverage, you cannot remain enrolled only in dental.

**Add or remove a dependent**
Submit the 2021 PEBB Retiree Open Enrollment Election/Change Form (Form A-OE) and any other applicable forms. If you are adding a dependent, non-Medicare subscribers must provide proof of the dependent’s eligibility. All subscribers (regardless of Medicare enrollment) who are enrolling a state-registered domestic partner must provide proof of their eligibility. A list of documents to verify eligibility is available on HCA’s website at hca.wa.gov/pebb-retirees.

**Non-Medicare subscribers only: Reattest to the spouse or state-registered domestic partner coverage premium surcharge**
The PEBB Program will mail you a letter at the address we have on file if you must reattest for 2021. You can also check whether you need to reattest in PEBB My Account starting November 1. Make changes in PEBB My Account or submit the PEBB Premium Surcharge Attestation Form.

Remember, you may not need to reattest to the tobacco use premium surcharge during open enrollment. You reattest to this surcharge only if you (or a dependent age 13 or older enrolled in medical coverage) have a change in tobacco use status. If you need to report a change to your previous tobacco surcharge attestation, you can do it online through PEBB My Account or submit the PEBB Premium Surcharge Attestation Change Form, available on HCA’s website at hca.wa.gov/pebb-retirees.
Want more information? Go online!

Visit the PEBB Program’s open enrollment webpage on HCA’s website at hca.wa.gov/pebb-oe to:

• Compare medical and dental plans, including new PEBB medical plans for 2021. You can also read the Summary of Benefits and Coverage (SBC) for details about medical plan benefits.
• Register for a webinar to learn more about plans or benefits you’re interested in.
• Learn more about the premium surcharges. Visit the virtual benefits fair at hca.wa.gov/vbf-pebb. See page 7 for information about the virtual benefits fair.

During open enrollment, make changes and reattest to the spouse or state-registered domestic partner coverage premium surcharge using PEBB My Account at hca.wa.gov/my-account.

If you are required to submit a form instead of using PEBB My Account, the system will direct you to the correct forms. Forms will be available starting November 1 on HCA’s website at hca.wa.gov/pebb-oe. You can also order a retiree forms packet by calling the PEBB Program’s automated line at 1-866-577-2793.

You don’t have to handle COVID-19 stress alone

Someone to talk to
Washington Listens is a program that provides non-clinical support to people experiencing stress due to COVID-19. Speak to a support specialist and get connected to community resources in your area. The program is anonymous. Call Washington Listens at 1-833-681-0211, Monday through Friday, 9 a.m. to 9 p.m.; and weekends, 9 a.m. to 6 p.m.

More to know
For details on the PEBB Program’s response to the pandemic, see our COVID-19 webpage at hca.wa.gov/coronavirus. For general information, visit the Department of Health’s website at coronavirus.wa.gov.
During open enrollment, you can learn more about your health plan and other insurance options by visiting the virtual benefits fair.

**No in-person fairs or lobby services this year**
In an effort to keep our members’ health and safety a top priority during the COVID-19 pandemic, and follow the state guidelines for large gatherings, we will not offer in-person benefits fairs in November. The PEBB Program will also not offer in-person lobby services for the foreseeable future due to the COVID-19 pandemic. As a result, these services will not be available during open enrollment this year.

**Attend the virtual benefits fair instead**
We understand how important benefits fairs are to our members, which is why we are offering a new way to learn about benefits from the comfort and safety of your home. A virtual benefits fair is a great way to learn about your benefit options through an online experience — and it’s available anytime, day or night, during open enrollment.

Use your computer, tablet, or smartphone to explore at your own pace. Start out in the virtual “lobby” and decide where to go within the fair. Want to learn about changes to your PEBB benefits for 2021? Explore the various plan “booths.” You will find links to videos, plan comparisons, downloadable content, and other information to help you choose the right benefits for you and your family.

To get started, visit the virtual benefits fair on the HCA website at [hca.wa.gov/vbf-pebb](http://hca.wa.gov/vbf-pebb) — it will be available in mid-October. See below for a preview of what it will look like.

**Learn more with webinars**
On our open enrollment webpage at [hca.wa.gov/pebb-oe](http://hca.wa.gov/pebb-oe), you can also register for informative webinars hosted by some PEBB medical plans.
Who to contact for help

**Contact the plans directly for help with:**
- Benefit questions
- ID cards
- Claims
- Making sure your doctor or dentist contracts with the plan
- Choosing a doctor or dentist
- Making sure your prescriptions are covered

**Contact the PEBB Program for help with:**
- Eligibility questions or changes (Medicare, divorce, adoption, etc.)
- Enrollment questions or procedures
- Premium surcharge questions
- Changing your name, address, phone number, etc.
- Adding or removing dependents
- Premium payments
- Getting forms. You can find them on the PEBB retiree webpages at [hca.wa.gov/pebb-retirees](http://hca.wa.gov/pebb-retirees).

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**Medical plans**

- **Kaiser Permanente NW Classic**, **CDHP**, or **Senior Advantage**
  - [my.kp.org/wapebb](http://my.kp.org/wapebb)
  - 503-813-2000 or 1-800-813-2000
  - Medicare members: 1-877-221-8221 (TRS: 711)

- **Kaiser Permanente WA Classic**, **CDHP**, **Medicare Advantage**, **Original Medicare**, **SoundChoice**, or **Value**
  - [kp.org/wa/pebb](http://kp.org/wa/pebb)
  - 1-866-648-1928
  - For Medicare questions: 1-888-901-4600 (TTY: 1-800-833-6388)

- **Premera Blue Cross Medicare Supplement Plan F and Medicare Supplement Plan G**
  - [hca.wa.gov/pebb-retirees](http://hca.wa.gov/pebb-retirees) (under Medical plans & benefits)
  - 1-800-817-3049
  - (TTY: 1-800-842-5357)

- **UnitedHealthcare PEBB Balance or UnitedHealthcare PEBB Complete**
  - [UHCRetiree.com/wapebb](http://UHCRetiree.com/wapebb)
  - 1-855-873-3268

- **UMP Plus–Puget Sound High Value Network**
  - [pugetsoundhighvaluenetwork.org](http://pugetsoundhighvaluenetwork.org)
  - 1-855-776-9503 (TRS: 711)

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**Health savings account (HSA) trustee**

- **HealthEquity**
  - [learn.healthequity.com/pebb](http://learn.healthequity.com/pebb)
  - UMP members: 1-844-351-6853 (TRS: 711)
  - All other members: 1-877-873-8823 (TRS: 711)

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**Life insurance**

- **MetLife**
  - [mybenefits.metlife.com/wapebb](http://mybenefits.metlife.com/wapebb)
  - 1-866-548-7139

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**Wellness**

- **SmartHealth**
  - [hca.wa.gov/pebb-smarthealth](http://hca.wa.gov/pebb-smarthealth)
  - 1-855-750-8866

- **Diabetes prevention**
  - [hca.wa.gov/prevent-diabetes](http://hca.wa.gov/prevent-diabetes)
  - Contact your medical plan’s customer service.

- **Living tobacco free**
  - [hca.wa.gov/tobacco-free](http://hca.wa.gov/tobacco-free)
  - Contact your medical plan’s customer service.

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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.
Summary of benefits and coverage available to you

The Affordable Care Act requires the PEBB Program and its medical plans to provide a Summary of Benefits and Coverage (SBC) to help you compare medical plan benefits, terms, and your costs for care from network and out-of-network providers. To get an SBC from a PEBB medical plan, you can:

- Go to the Health Care Authority website at hca.wa.gov/erb (or the plan’s website) to view or print it online.
- Request a paper copy at no charge.
- For your current PEBB medical plan: Call your plan. Your medical plan can also provide paper copies translated in other languages.
- For other PEBB medical plans: Call the PEBB Program at 1-800-200-1004.

SBCs are not available for the Premera Blue Cross Medicare Supplement plans or Medicare Advantage plans offered by the PEBB Program.

Annual notice of creditable prescription drug coverage

If you or a family member is (or will soon be) enrolled in Medicare, you may hear about your opportunity to enroll in Medicare Part D for prescription drug coverage.

Premera Blue Cross Medicare Supplement plans do not provide creditable prescription drug coverage. The new UnitedHealthcare Medicare Advantage Prescription Drug (MAPD) plans include Medicare Part D prescription drug coverage.

All other PEBB medical plans provide creditable prescription drug coverage, so you do not have to enroll in Medicare Part D. The prescription drug coverage offered by these PEBB medical plans is expected to pay out, on average, as much as Medicare Part D coverage.

When you enroll in Medicare, you can keep your PEBB medical plan and not pay a penalty if you enroll in Medicare Part D later (see next column).

If you lose or terminate your current PEBB medical plan

To avoid paying a higher Medicare Part D plan premium, you should enroll in a Medicare Part D plan within 63 days after your PEBB medical plan ends. If you enroll after the 63-day deadline, your Medicare Part D plan’s monthly premium may increase by 1 percent or more for every month you didn’t have coverage.

Employees and PEBB Continuation Coverage members: If you enroll in a Medicare Part D plan, your PEBB medical plan may not coordinate prescription drug benefits with Medicare Part D.

PEBB Continuation Coverage (COBRA) members enrolled in Medicare Part A and Part B: If you enroll in a Medicare Part D plan, you will need to enroll in a Premera Blue Cross Medicare Supplement plan offered by the PEBB Program. Otherwise, your PEBB medical plan may not coordinate prescription drug benefits with Medicare Part D.

Retirees enrolled in Medicare Part A and Part B: If you enroll in a Medicare Part D plan, you will need to enroll in Premera Blue Cross Medicare Supplement plan offered by the PEBB Program to keep your PEBB health plan coverage. You cannot enroll in Medicare Part D and stay enrolled in any other PEBB medical plan.

For questions about Medicare Part D, visit the Centers for Medicare & Medicaid Services website at medicare.gov or call 1-800-633-4227.
Important dates to remember

**Mid-October through November 30**
Unfortunately, the COVID-19 pandemic prevents us from holding our normal in-person benefits fairs this year. Instead, we are offering a virtual benefits fair on HCA’s website at [hca.wa.gov/vbf-pebb](http://hca.wa.gov/vbf-pebb). It will be available in mid-October — learn about it on page 7.

**November 1 through 30**
Open enrollment for the 2021 plan year. See “Changes you can make during open enrollment” on page 5. If you do not want to make any changes to medical or dental plans and they are still available in your county for 2021, you do not have to do anything. You will stay enrolled in your current plans for 2021. However, you may have to reattest to the spouse or state-registered domestic partner premium surcharge (see page 3).

**November 30**
Last day for open enrollment changes. Also, last day to qualify for the SmartHealth $125 wellness incentive (if you’re eligible).

**December 31**
Last day to qualify for and claim the SmartHealth $25 Amazon.com wellness incentive (if you’re eligible). The gift card is a taxable benefit.

**January 1, 2021**
New plan year begins. Open enrollment changes become effective, if you made any.