

For Your Benefit

General Audience Edition | May 2025

Public Employees Benefits Board (PEBB) Program

A conversation that matters

Taking care of your whole self includes taking care of your mental health. Often, we don't recognize when we need support for our mental health. If you had a broken leg, most people would seek treatment immediately. Starting with mental health treatment can be daunting, but you're not alone.

The National Alliance on Mental Illness (NAMI), [nami.org](https://www.nami.org), provides the following statistics:

- **1 in 5** U.S. adults experience mental illness each year
- **1 in 20** U.S. adults experience serious mental illness each year
- **1 in 6** U.S. youth age 6 to 17 experience a mental health disorder each year
- **50%** of all lifetime mental illness begins by age 14, and 75% by age 24
- Suicide is the **second leading** cause of death among people age 10 to 14

Struggles with mental health don't mean you're broken or wrong, and there are resources to help you.

What signs should I be aware of?

If you or someone you know is having a mental health crisis, it's important to get help immediately. But that's not the only time you should consider connecting with mental health services. When you stop feeling like yourself, it's time to think about mental health care. Mental health conditions can take many forms, but the following list has some of the more common symptoms ("Warning Signs and Symptoms," [nami.org](https://www.nami.org)):

- Loss of interest in things that used to bring you joy
- Excessive worry, fear, or sadness
- Prolonged anger or irritability
- Difficulty communicating or handling relationships or responsibilities
- Inability to cope with problems and daily activities
- Changes in sleep or eating habits
- Overuse of substances like drugs or alcohol
- Multiple physical ailments without obvious causes
- Thoughts of suicide

The Mental Health America Screening, available at [mhascreeing.org](https://www.mhascreeing.org), is a free and anonymous tool to help determine if you're experiencing symptoms that could be because of a mental health condition.

How do I get started?

If you need help with getting started with mental health care, a great first step is to talk to your primary care provider. They can connect you with resources and set you up with a provider who specializes in mental health. If you don't have a primary care provider, that's okay. You can contact your medical plan and ask for help with getting connected with a provider and getting an appointment set up.

What are the different types of providers?

Depending on your mental health needs, there are many different types of providers. The following list comes from NAMI ([nami.org](https://www.nami.org)).

Counselors, clinicians, and therapists are trained to evaluate a person's mental health and use therapeutic techniques based on specific training programs. Working with one of these mental health professionals can lead to symptom reduction and better ways of thinking, feeling, and living. They generally have earned a master's degree in a mental health-related field.

Psychologists are trained to evaluate a person's mental health using interviews, evaluations, and testing. They can make diagnoses and provide individual and group therapy. They have earned a doctoral degree in clinical psychology or another specialty such as counseling or education.

Psychiatrists are licensed medical doctors who have completed psychiatric training. They can prescribe and monitor medications, provide therapy, and diagnose mental health conditions.

(continued on next page)

(continued from previous page)

My appointment is scheduled pretty far out. Should I even go?

While there are regulations about how long medical plans have to make sure you have an appointment (see Brennen's Law, RCW 48-43-765, on the Washington State Legislature's website, leg.wa.gov), the appointments are often far out for non-emergency care. Your mental health is worth taking care of, and the first step is keeping your appointment and following through with getting care.

What should I expect during an appointment?

It's normal to be a little anxious and overwhelmed about your first appointment. It takes a lot of strength to make that appointment, but now that you have, you might be wondering what it will involve.

Provider's questions

You can expect the provider will ask you the reason you're coming in to see them. They might ask in a variety of different ways, including:

- "So, what brings you in today?"
- "Tell me what you're here for."
- "How're you doing?"
- "How can I help you?"

Being asked open-ended questions might make you nervous, especially if you don't know where to begin, or how to start. Be sure to communicate what you've been experiencing, and if you feel comfortable, share the goals you'd like to achieve from being in treatment.

Make the most of your appointment

- **Be open and honest.** It may be difficult to talk about sensitive information, but it is important to remember your provider cannot provide appropriate treatment unless they fully understand your situation.
- **Ask questions.** If you need more information or don't understand something, ask for clarification.
- **Bring a support person.** If you're feeling anxious, you may want to bring a supportive friend or family member with you.
- **Take notes.** It's normal to feel overwhelmed by all the information you might be taking in. Taking notes can help you remember what you discussed.

Going forward with treatment

It's important to form a relationship with your provider so you can be open and honest with them and they with you. As you build a foundation with your provider, remember the first session (or first few sessions) are just as much about them getting to know you as you getting to know them. If you find that you're not connecting with a provider, ask to



change to a different one. Also, one appointment is unlikely to be all you need. If you need medication, sometimes the first medication isn't the best fit for you. Everyone is different, so it might take some time to find a medication that works for you. It's important to keep trying and to advocate for yourself. Attending therapy isn't a quick fix, but by going to your first appointment, you're making an important step. It's important not to drop out after one session.

Resources

To find information and how to contact your medical plan for help with behavioral health services, visit our *Behavioral health services by plan* webpage at hca.wa.gov/bh-pebb.

For education about and resources for mental health treatment:

- Mental Health America, MHA, mhanational.org
- National Alliance on Mental Illness, NAMI, nami.org

Crisis resources

These resources are available for all people in Washington regardless of your income or whether you have insurance or not.

- For a life-threatening emergency: Call 911.
- For 24-hour suicide prevention or a mental health crisis: Call or text 988.
- For substance use, problem gambling, or mental health support: Call the Washington Recovery Help Line at 1-866-789-1511 or the mental health crisis line in your area.

Get started with retiree insurance coverage

So, you plan to retire soon—congratulations! Here are some important things to know about PEBB retiree insurance coverage as you start preparing.

Know if you are eligible

Generally, you may be eligible if you are a retiring or separating employee of a state agency, higher-education institution, or PEBB-participating employer group. Additionally, surviving dependents or spouses and full-time elected or appointed officials may be eligible.

Review benefits

As a retiree, your PEBB benefit choices include medical, dental, and vision coverage. You may also be eligible for retiree term life insurance, for which you must name a beneficiary.

You must enroll in medical coverage to enroll in dental or vision. **You cannot enroll in dental or vision coverage only.** For most Medicare plans, vision is included with medical.

When selecting PEBB health plans, your options are based on eligibility and where you live. If you cover dependents, **everyone must enroll in the same medical, dental, and vision plans** (with some exceptions, based on eligibility for Medicare Part A and Part B).

Understand the deadlines

The PEBB Program must receive your request to enroll in or defer enrollment in PEBB retiree insurance coverage **no later than 60 days** after your employer-paid, COBRA, or continuation coverage ends, or you will lose your right to enroll later.

You can enroll later

If you are eligible to enroll in PEBB retiree insurance coverage, you may be eligible to defer. Deferring allows you to pause or postpone enrollment in PEBB retiree insurance coverage and maintain your eligibility to enroll in the future. Specific qualifying reasons allow you to defer (for example, federal retiree coverage or enrollment in employer-based group medical as an employee or spouse). Find out more at hca.wa.gov/defer-coverage.

How to prepare

You should begin the process of retiring about six months before you plan to stop working. Here is a timeline to keep in mind:

Six months before retirement

If you have a Department of Retirement Systems (DRS) retirement plan, contact DRS to request an estimate of your pension benefit. If you don't have a DRS retirement plan, contact your employer to determine if you have a retirement plan and, if so, when you will be eligible to retire from the plan.

Three months before you turn 65

You or any dependents who will soon turn 65 must enroll in both Medicare Part A and Part B to stay enrolled in a PEBB retiree health plan. To enroll in Medicare, call the Social Security Administration (SSA) at 1-800-772-1213 (TTY: 1-800-325-0778), or visit ssa.gov.

60 days before retirement

- Submit your retirement application to DRS.
- Check with your employer to confirm your eligibility in the Voluntary Employees' Beneficiary Association (VEBA). Visit hca.wa.gov/pebb-retirees and select *Paying for benefits* to learn more about VEBA and other options to pay for PEBB retiree insurance.
- Apply for PEBB retiree insurance coverage using Benefits 24/7 at benefits247.hca.wa.gov or the *PEBB Retiree Election Form* (form A) and submit supporting documents, including proof of Medicare (copy of Medicare card, benefit verification letter, or denial letter from the SSA).

What if I'm not retiring at 65?

- If you retire **before** age 65, you can enroll in a PEBB retiree non-Medicare medical plan until you become eligible to enroll in Medicare Part A and Part B.
- If you are still working and on employee coverage **beyond** age 65, you can defer your Medicare Part B enrollment. When you retire **after** age 65, you need to enroll in Medicare Part B to enroll in a PEBB Medicare plan.

Retirement resources

- Preparing for retirement webpage: hca.wa.gov/prepare-to-retire
- Retiree webpages: hca.wa.gov/pebb-retirees
- Retiree webinars: hca.wa.gov/retiree-webinars
- Compare medical plan options: hca.wa.gov/compare-medical-pebb

To request a *PEBB Retiree Enrollment Guide* or ask enrollment and eligibility questions, send us a secure message using HCA Support at support.hca.wa.gov or call us at 1-800-200-1004 (TRS: 711).

Summer is here! Stay safe in the sun

Summer is full of outdoor activities. You probably put sunscreen on when you go to the pool or the beach. But do you know you should protect your skin with more than just sunscreen anytime you're outside?

Protect yourself

Sun protection is important all year round, and it's best to use several different kinds. When you're working in the yard, watching a ballgame, or taking an afternoon walk, make sun safety an everyday habit.

- When you're outdoors, protect your skin by seeking shade (especially during late morning through mid-afternoon), wearing sun-protective clothing, and applying sunscreen.
- You can get sunburned on a cloudy day and during the winter. Unprotected skin can be damaged by the sun's UV rays in as little as 15 minutes.
- Reapply sunscreen every 2 hours and after swimming or sweating. (Make sure to get your ears!) It's a myth that higher SPF sunscreens can be applied less frequently.

Skin cancer facts

With over 5 million cases diagnosed in the United States each year, **skin cancer is America's most common cancer**. Fortunately, skin cancer is also one of the most preventable cancers. The Skin Cancer Foundation ([skincancer.org](https://www.skincancer.org)) provides the following facts.

- Everyone is at risk of getting skin cancer; about 1 in 5 Americans will develop skin cancer by the age of 70.
- When detected early, the five-year survival rate for melanoma is 99 percent. Melanoma is a type of skin cancer that is more dangerous because it's much more likely to spread to other parts of the body if not found and treated early.
- Having five or more sunburns doubles your risk for melanoma.

What's in your tote bag?

Get ready for summer with a tote bag full of different ways to protect your skin. Keep the tote bag handy so you can grab it whenever you head out for summer fun! Some important things to pack:

- A lightweight long-sleeved shirt and pants. For more effective protection, choose sun-protective clothing with an ultraviolet protection factor (UPF) number on the label.
- A hat with a wide brim that shades your face, head, ears, and neck.
- Sunglasses that block both UVA and UVB rays.
- Sunscreen with SPF 30 or higher that offers broad spectrum protection (both UVA and UVB) and is water resistant.

See something new, changing, or unusual?

It could be skin cancer. Go get checked! The most common signs of skin cancer are changes on your skin, such as a new growth, a sore that doesn't heal, or a change in a mole. Early detection can save your life.

Examine your skin head to toe every month. While self-exams shouldn't replace the important annual skin exam performed by a medical provider, they offer the best chance of detecting the early warning signs of skin cancer. If you spot any change in an existing mole or discover any new spot that doesn't heal after several weeks, see a medical provider immediately.

Get a professional skin exam every year. Get a full-body, professional skin exam once a year or more often if you are at higher risk for skin cancer.

Take your benefits with you when you travel

Planning a trip this summer? It's important to know how your benefits work while you're away. For a quick overview, visit hca.wa.gov/erb, select your member type, then select *Benefits while traveling*.

Explore your benefits

Along with packing your suitcase, don't forget to research the health care options at your destination in case you need to see a provider. Visit hca.wa.gov/erb, select your member type, then select *Contact the plans* to visit your plan's website or contact your plan's customer service for more information.



Domestic travel

If you're traveling within the U.S., your health plans likely cover emergency care. However, routine care may not be included. Here are a few things to note:

- **Know your network:** Check if your plans have nationwide providers or if you'll need to seek out-of-network care.
- **Emergency vs. urgent care:** Emergency care is covered under all plans, but costs may vary for urgent care visits depending on the provider.



International travel

Your health plans generally cover emergency care abroad, but non-emergency services may not be included. Keep these points in mind:

- **Emergency care:** Most plans will reimburse you for emergency services received abroad, but you may need to pay up front and submit a claim for reimbursement.
- **Travel restrictions:** Research any travel restrictions or other requirements, such as required vaccinations.

Trip tips



ID cards: Carry your plan ID cards and know your plans' contact information.



Prescriptions: If you take medications, bring enough for your trip and check with your plan about coverage for refills or short-term travel overrides.



Get the app: Download your plans' mobile apps (if available) for quick access to telehealth and provider directories.



Telehealth services: Look into your plan's virtual care options, which can be a convenient alternative for minor health concerns.

Five benefits you may not know you have

There are many ways to use your benefits to get care. Here are some benefits you may not know you have. **Note:** Benefits may be different for COBRA Medicare subscribers. Check with your plan for details.



1. Centers of Excellence

Uniform Medical Plan (UMP) members (except UMP Plus) have access to a unique joint replacement or spinal care benefit: UMP Centers of Excellence (COE). If you are considering knee or hip joint replacement, the UMP COE Program offers evaluation and surgery at low to no cost to you including travel and lodging expenses for you and a care companion up to IRS guidelines. The COE Program also provides spine care services. To learn more, visit the Premera website at premera.com/health-care-authority or call 1-855-784-4563 (TRS: 711).



2. Maternity and newborn care

During pregnancy, you have access to maternity care programs and apps. Learn about what prenatal care is recommended before baby's arrival, talk to a nurse (or if high risk, an assigned case manager), and track milestones for your and baby's care.

- Kaiser Permanente members, visit kp.org/maternity.
- UMP members, visit ump.regence.com/pebb/benefits/programs#maternity-support.



3. Telehealth services

You can receive care from home or while traveling by using your plan's telehealth services. Visit your plan's website or member portal to learn more.

4. Speak to a dentist whenever you need

Dental trouble doesn't always strike when your dentist's office is open. Uniform Dental Plan and DeltaCare offer teledentistry service 24/7 so you can connect with a dentist for advice and, if needed, prescriptions for medicines such as anti-inflammatories or antibiotics. Visit deltadentalwa.com/pebb and log in to your My Smile account to find a link to the *Virtual Dentistry Login*.



5. Grief counseling, will preparation, and other MetLife Advantages

Members with life and accidental death and dismemberment (AD&D) insurance have access to MetLife Advantages. These benefits include services to help you prepare a will or support you while you grieve. You can view the full list at metlife.com/info/wshca/benefits/metlife-advantages.



Your path to a tobacco-free life

Quitting tobacco is one of the best decisions you can make for your health. According to the Centers for Disease Control and Prevention (CDC), it significantly reduces the risk of premature death and can add up to 10 years to your life ([cdc.gov/tobacco](https://www.cdc.gov/tobacco)). Through your benefits, you and your dependents age 13 and older can access free resources to help you quit successfully.

Where can I find support?

Quitting may take multiple tries, so don't get discouraged. You don't have to do it alone. Your medical plan offers tobacco cessation programs that may include personalized coaching, online support, and FDA-approved medications like nicotine patches or gum. Visit hca.wa.gov/tobacco-free for more information.

Additionally, your benefits include SmartHealth, a voluntary wellness program. With SmartHealth, you're encouraged to build healthy habits, participate in activities, and learn how to maintain a tobacco-free life. Get started at smarthealth.hca.wa.gov.

How can I update my attestation?

Good news! You can save money on the \$25 monthly tobacco use premium surcharge if you or a dependent stops using tobacco products for at least two months or enrolls in your medical plan's tobacco cessation program. For more information, visit hca.wa.gov/erb, select your member type, and then select *Surcharges*.

A new way to submit appeals

In addition to mail, fax, or in person, you can now submit your appeal via our secure online portal at support.hca.wa.gov. You have the right to appeal if you or your dependent disagrees with a decision made by your employer or the PEBB Program. Employees have **30 days from the date of the decision** and PEBB Continuation Coverage subscribers have **60 days from the date of the decision** to request an appeal with the PEBB Appeals Unit. Visit the HCA website at hca.wa.gov/pebb-appeals for details.

HCA complies with all applicable federal and Washington State civil rights laws and is committed to providing equal access to our services. If you need an accommodation or require documents in another format, please call 1-800-200-1004 (TRS: 711) or visit hca.wa.gov/about-hca/nondiscrimination-statement.

La HCA cumple con todas las leyes vigentes federales y del Estado de Washington sobre derechos civiles y tiene el compromiso de ofrecer un acceso equitativo a nuestros servicios. Si necesita alguna facilidad, o si requiere documentos en otro formato o idioma, llame al 1-800-200-1004 (TRS: 711) o visite hca.wa.gov/about-hca/nondiscrimination-statement.

Управление здравоохранения (HCA) соблюдает все применимые федеральные законы и законы штата Вашингтон в отношении гражданских прав и обязуется обеспечивать равный доступ к своим услугам. Если вам потребуются специальные услуги или документы в другом формате или на другом языке, позвоните по телефону 1-800-200-1004 (TRS: 711) или посетите сайт hca.wa.gov/about-hca/nondiscrimination-statement.

Here's your **forYourBenefit** newsletter

**Caring for your
mental health starts
with a conversation**

