



School Employees Benefits Board (SEBB) Program
Continuation Coverage | October 2020

Another year, same great SEBB benefits

It's time to think about your SEBB benefits and any changes you would like to make for 2021. This year's annual open enrollment is quickly approaching and will be held from October 26 through November 23. During this time, you can make changes to your selections for health care and other benefits for the 2021 plan year.

This newsletter will describe the upcoming annual open enrollment, including important dates, information about the virtual benefits fair, as well as any changes to health plans, premiums, and other benefits.

You are not required to make any changes to your health plans during open enrollment unless they are no longer available to you. For information on changes to the SEBB Program, see "Changes you can make during open enrollment" on page 3. However, **please note:** If you're covering a spouse or state-registered domestic partner, you may need to reattest to the premium surcharge, see page 6.

**This is your only 2021
open enrollment notice.**

Important dates

September 25

Annual open enrollment information is available on the *Open enrollment* webpage at hca.wa.gov/sebb-oe.

September 25 – November 23

The SEBB virtual benefits fair is open 24/7 to help you make benefits choices.

October 15

Tune in for a Facebook Live Q&A at 4 p.m. For more details, see page 8.

October 26

Annual open enrollment period for the 2021 plan year begins. See "Changes you can make during open enrollment" on page 3. If you need paper forms, contact the SEBB program.

November 23

Last day to make changes to your account.

November 30

Last day to qualify for and claim the SmartHealth \$125 wellness incentive (if you're eligible) on HCA's website at smarthealth.hca.wa.gov.

January 1, 2021

New plan year begins. Your open enrollment changes become effective (if you made any).

2021 SEBB Program changes

All changes are effective January 1, 2021, unless otherwise noted. For 2021 monthly premiums, see pages 4 and 5.



UMP Plus—Puget Sound High Value Network (PSHVN) will add Chelan and Douglas counties to its service area. The Everett Clinic will be added to the PSHVN provider network, effective October 2020. Confluence Health will be added to the provider network, effective January 2021.



Davis Vision has added a fourth coverage tier for some benefits for 2021. This means members will have a copay for progressive lenses and anti-reflective coating, rather than paying the full retail price.



Premera Blue Cross will offer a virtual diabetes prevention program starting in 2021 and offer bariatric surgery at in-network and approved facilities, subject to medical necessity review. For questions about this benefit, please call Premera at 1-800-807-7310 (TRS: 711).

Hearing benefits

Premera medical plans will cover one hearing instrument per ear in full, up to the plan's allowed amount, once every five calendar years for in-network providers. UMP medical plans will cover one hearing instrument per ear in full (for UMP High Deductible members, after the deductible is met), up to the plan's allowed amount, once every five calendar years for network providers. Kaiser medical plans will cover one hearing instrument per ear in full, up to the plan's allowed amount, every 60 consecutive months for in-network providers.

In-network providers may not balance bill members for this service. See your plan's certificate of coverage for more information

Choosing a medical plan based on where you live or work

Subscribers will be able to choose their medical plans based on either the county where they live or the county where they work. **Exception:** UMP Plus members must live in a county serviced by the plan.

For additional changes, see "Recent changes in SEBB Program rules" on page 3.

Who to contact for help

Contact the SEBB Program for help with:

- Eligibility for coverage, enrollment, or changes to your account
- Premium surcharge questions
- Updating your name, address, and phone number
- Adding or removing dependents
- Getting paper forms. You can find them on HCA's website at hca.wa.gov/sebb-oe.

Contact your medical, dental, or vision plan 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

Find your plans' contact information:

Find websites, phone numbers, and mailing addresses on the HCA website at hca.wa.gov/sebb-continuation-contact-plan.

Contact HealthEquity about:

- Health savings account (HSA) for UMP High Deductible medical plan

Go to HealthEquity's website at learn.healthequity.com/sebb/hsa, or call 1-844-351-6853 (TRS: 711).

Contact Metropolitan Life Insurance Company (MetLife) about:

- Life insurance
- Accidental death and dismemberment insurance

Go to MetLife's website at metlife.com/wshca-sebb, or call 1-833-854-9624 (TTY: 1-833-854-9624).

Recent changes in SEBB Program rules

The SEBB Program rules have been updated. Here are some of the most impactful changes for you to be aware of. To see all the rules, visit the HCA website at hca.wa.gov/sebb-rules.

Change in health plan coverage because of adding extended or disabled dependent due to SOE

If a special open enrollment event (SOE) allows the enrollment of an extended dependent or a dependent child with a disability, the change in enrollment will begin the first day of the month following the later of the event date or eligibility certification.

SOE event doesn't include someone who is regaining eligibility

If a school employee is regaining SEBB Program eligibility after a period of approved leave, as described in SEBB Program rules, and has a life event that qualifies as an SOE at the same time, they will have 31 days to make new benefit elections.

Correcting errors

Rules for the SEBB Program have expanded to add further details to the requirements and process that should be followed when a SEBB organization makes an error related to SEBB Program eligibility or enrollment.

Changes you can make during open enrollment

You can make the changes listed below during the SEBB Program's annual open enrollment, **October 26 through November 23, 2020**. Change forms will be available October 26. You can find the forms on the *Open enrollment* webpages at hca.wa.gov/sebb-oe. The SEBB Program must **receive** your forms and other documents by November 23. Changes are effective January 1, 2021.

Changes you can make and how to make them

Change your medical, dental, or vision plan

The SEBB Program must receive the appropriate *SEBB Continuation Coverage (COBRA) Election/Change* or *SEBB Continuation Coverage (Unpaid Leave) Election/Change* form by November 23. DeltaCare and Uniform Dental Plan (UDP), administered by DeltaDental, are often confused. Please see "How to tell your dental plans apart" on page 6.

Add a dependent to your medical, dental, or vision plan

The SEBB Program must receive the appropriate *SEBB Continuation Coverage (COBRA) Election/Change* or *SEBB Continuation Coverage (Unpaid Leave) Election/Change* form by **November 23**. If enrolling a state-registered domestic partner, partner of a legal union, or children of your state-registered domestic partner or partner of a legal union, you must provide proof of the dependents' eligibility (see page 7). A list of documents to verify eligibility is available on HCA's website at hca.wa.gov/sebb-continuation under *Eligibility and enrollment*. You must attest to the tobacco use premium surcharge for each dependent (age 13 and older) you are enrolling on your SEBB medical coverage. If you are enrolling a spouse or state-registered domestic partner, you must attest to the spouse or state-registered domestic partner coverage premium surcharge. Please see "Do you need to pay premium surcharges?" on page 6.

Remove a dependent from your medical, dental, or vision plan

The SEBB Program must receive the appropriate *SEBB Continuation Coverage (COBRA) Election/Change* or *SEBB Continuation Coverage (Unpaid Leave) Election/Change* form by November 23.

Reattest to the spouse or state-registered domestic partner coverage premium surcharge

The SEBB Program will mail you a letter if you must reattest to this premium surcharge for 2021. Make changes using the *SEBB Premium Surcharge Attestation Change* form.

Intercom is produced by the Washington State Health Care Authority for members of the School Employees Benefits Board (SEBB) Program. Mailing address: Health Care Authority, SEBB Program, PO Box 42720, Olympia, WA 98504-2720.



2021 SEBB Continuation Coverage monthly medical premiums

Effective January 1, 2021

Plan	Subscriber	Subscriber & spouse ¹	Subscriber & children ²	Subscriber, spouse ¹ & children ²
Kaiser Permanente NW ³ 1	\$599.37	\$1,193.76	\$1,045.16	\$1,788.15
Kaiser Permanente NW ³ 2	\$612.42	\$1,219.86	\$1,068.00	\$1,827.30
Kaiser Permanente NW ³ 3	\$678.95	\$1,352.92	\$1,184.43	\$2,026.89
Kaiser Permanente WA Core 1	\$576.14	\$1,147.31	\$1,004.52	\$1,718.47
Kaiser Permanente WA Core 2	\$581.20	\$1,157.42	\$1,013.37	\$1,733.64
Kaiser Permanente WA Core 3	\$651.16	\$1,297.33	\$1,135.79	\$1,943.51
Kaiser Permanente WA SoundChoice	\$611.22	\$1,217.46	\$1,065.90	\$1,823.69
Kaiser Permanente WA Options Access PPO 1	\$625.71	\$1,246.44	\$1,091.26	\$1,867.17
Kaiser Permanente WA Options Access PPO 2	\$656.81	\$1,308.64	\$1,145.68	\$1,960.47
Kaiser Permanente WA Options Access PPO 3	\$706.29	\$1,407.60	\$1,232.28	\$2,108.91
Premiera Blue Cross High PPO	\$636.25	\$1,267.51	\$1,109.70	\$1,898.78
Premiera Blue Cross Peak Care EPO	\$597.02	\$1,189.07	\$1,041.05	\$1,781.11
Premiera Blue Cross Standard PPO	\$587.79	\$1,170.60	\$1,024.90	\$1,753.41
Uniform Medical Plan (UMP) Achieve 1	\$592.92	\$1,180.86	\$1,033.88	\$1,768.81
UMP Achieve 2	\$657.51	\$1,310.04	\$1,146.90	\$1,962.56
UMP High Deductible with a health savings account	\$591.89	\$1,175.85	\$1,037.68	\$1,728.57
UMP Plus – Puget Sound High Value Network	\$628.10	\$1,251.22	\$1,095.44	\$1,874.34
UMP Plus – UW Medicine Accountable Care Network	\$628.10	\$1,251.22	\$1,095.44	\$1,874.34

¹ Or a state-registered domestic partner

² You pay the same regardless of how many children you enroll.

³ 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."

2021 SEBB Continuation Coverage monthly dental premiums

Plan	Subscriber	Subscriber & spouse ¹	Subscriber & children ²	Subscriber, spouse ¹ & children
DeltaCare ³	\$41.33	\$82.66	\$82.66	\$123.99
Uniform Dental Plan (UDP) ³	\$47.63	\$95.26	\$95.26	\$142.89
Willamette Dental Group	\$49.90	\$99.80	\$99.80	\$149.70

2021 SEBB Continuation Coverage monthly vision premiums

Plan	Subscriber	Subscriber & spouse ¹	Subscriber & children ²	Subscriber, spouse ¹ & children
Davis Vision ⁴	\$4.36	\$8.72	\$7.63	\$13.08
EyeMed Vision Care ⁵	\$5.96	\$11.92	\$10.43	\$17.88
MetLife Vision ⁶	\$6.66	\$13.32	\$11.66	\$19.98

¹ Or state-registered domestic partner

² You pay the same regardless of how many children you enroll.

³ Administered by Delta Dental

⁴ Underwritten by HM Life Insurance Company

⁵ Underwritten by Fidelity Security Life Insurance Company

⁶ Underwritten by Metropolitan Life Insurance Company

Subscribers may also have to pay the following premium surcharges (see page 6)

Tobacco use premium surcharge: \$25

Spouse or state-registered domestic partner coverage premium surcharge: \$50

Questions? Find answers online

Are you looking for more details about your SEBB benefits? Visit the HCA website at hca.wa.gov/sebb-continuation.

Do you need to pay premium surcharges?

The Legislature requires that two surcharges be added to your monthly medical premiums, if applicable.

Tobacco use premium surcharge

You do not need to re-attest to the tobacco use premium surcharge at open enrollment. However, you must attest any time there is a change in your or any enrolled dependents tobacco use.

If you or any enrolled dependent age 13 or over use tobacco products, this surcharge applies to you. A \$25-per-account premium surcharge will be added to your monthly medical premiums.

You can report a change in tobacco use at any time you or any enrolled dependents do any of the following:

- Stop using tobacco products for at least two months.
- Enroll in your SEBB medical plan's tobacco cessation program (for ages 18 and older).
- Access the information and resources on the Smokefree Teen website at teen.smokefree.gov (for ages 13 to 17).

You may be exempt from the tobacco surcharge if your provider finds that ending tobacco use or participating in your medical plan's tobacco cessation program will negatively affect your or your dependent's health. For more information see SEBB Program

Administrative Policy 91-1 on HCA's website at hca.wa.gov/sebb-rules. For information on cessation programs see the HCA website at hca.wa.gov/tobacco-free-sebb.

Spouse or state-registered domestic partner coverage premium surcharge

If your spouse or state-registered domestic partner is enrolled on your SEBB medical plan rather than their own employer-based group medical plan that is comparable to PEBB's UMP Classic, you will need to reattest to this surcharge during annual open enrollment.

How do I know if the surcharges apply to me?

For more guidance on whether these premium surcharges apply to you, see the

SEBB Premium Surcharge Attestation Help Sheet at hca.wa.gov/sebb-employee.

How do I attest to the spouse or state-registered domestic partner premium surcharges?

1. Use the *SEBB Premium Surcharge Attestation Help Sheet* or the online *Spousal Plan Questionnaire (2021)* to determine if you will pay a surcharge.
2. During annual open enrollment, we will mail you a letter with instructions on how to reattest.
3. Use the *SEBB Premium Surcharge Attestation Change Form (2021)* to reattest to the surcharge for the 2021 plan year.

How do I report a change or reattest?

More information is available on the HCA website at hca.wa.gov/sebb-oe. Forms and the help sheet will be available October 26.

Reattest each year for your spouse or state-registered domestic partner

If your spouse or state-registered domestic partner is covered on your SEBB benefits, you may be required to reattest each year during annual open enrollment. If you need to reattest, the SEBB Program will mail you a letter requiring you to reattest to this surcharge.

How to tell your dental plans apart

The SEBB Program offers three dental plans: Willamette Dental Group, DeltaCare, and Uniform Dental Plan (UDP). Sometimes members get confused by DeltaCare and UDP because they are both managed by Delta Dental. During open enrollment, be careful to choose the plan your dentist belongs to.

Before you select a plan or provider, keep in mind

DeltaCare (Group 09601) and Willamette Dental Group (Group WA733) are managed-care plans. You must choose a primary dental provider within their network. These plans will not pay claims if you see a provider outside of their network.

UDP, managed by Delta Dental, (Group 09600), 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.

Compare your dental plan options on HCA's website located at hca.wa.gov/sebb-continuation-dental.

Before you enroll in a dental plan, check with the plan to see if your dentist is in the plan's network and confirm the group number. You can call the dental plan's customer service or use the plan's online directory.

Approved documents for dependent verification

If you add newly eligible dependents to your SEBB health plans for 2021 plan year, such as a state-registered domestic partner or partner of a legal union, or their children, you will need to provide proof that they are eligible before they can be enrolled under your coverage.

See the SEBB Program webpages at hca.wa.gov/sebb-continuation under *SEBB Continuation Coverage* for additional requirements.

Here are the documents you need to submit:

Documents to enroll a state-registered domestic partner or partner of a legal union

Provide a copy of (choose one option):

- A certificate/card of state-registered domestic partnership or legal union and evidence that the partnership is still valid (e.g., utility bill dated within the past six months showing both you and your state-registered domestic partner's names, a bank statement dated within the past six months [black out financial information] showing both your and your partner's names)
- Petition for invalidity (annulment) of state-registered domestic partnership or legal union
- Petition for dissolution of state-registered domestic partnership or legal union
- Legal separation notice of state-registered domestic partnership or legal union
- Valid J-1 or J-2 visa issued by the U.S. government

If enrolling a state-registered domestic partner, also attach a completed *Declaration of Tax Status* form to indicate whether your state-registered domestic partner qualifies as a dependent for tax purposes under Internal Revenue Code (IRC) Section 152, as modified by IRC Section 105(b).

Documents to enroll children of a state-registered domestic partner or partner of a legal union

Provide a copy of (choose one option):

- The most recent year's federal tax return that includes the child as a dependent and lists them as a son or daughter (black out financial information). You can submit one copy of your tax return as a verification document for all family members listed who require verification.
- Birth certificate (or hospital certificate with the child's footprints on it) showing the name of the parent who is the subscriber, the subscriber's spouse or state-registered domestic partner.
- Certificate or decree of adoption showing the name of the parent who is the subscriber, the subscriber's spouse or state-registered domestic partner
- Court-ordered parenting plan
- National Medical Support Notice
- Defense Enrollment Eligibility Reporting System (DEERS) registration
- Valid J-2 visa issued by the U.S. government



COBRA ends when you're eligible for Medicare

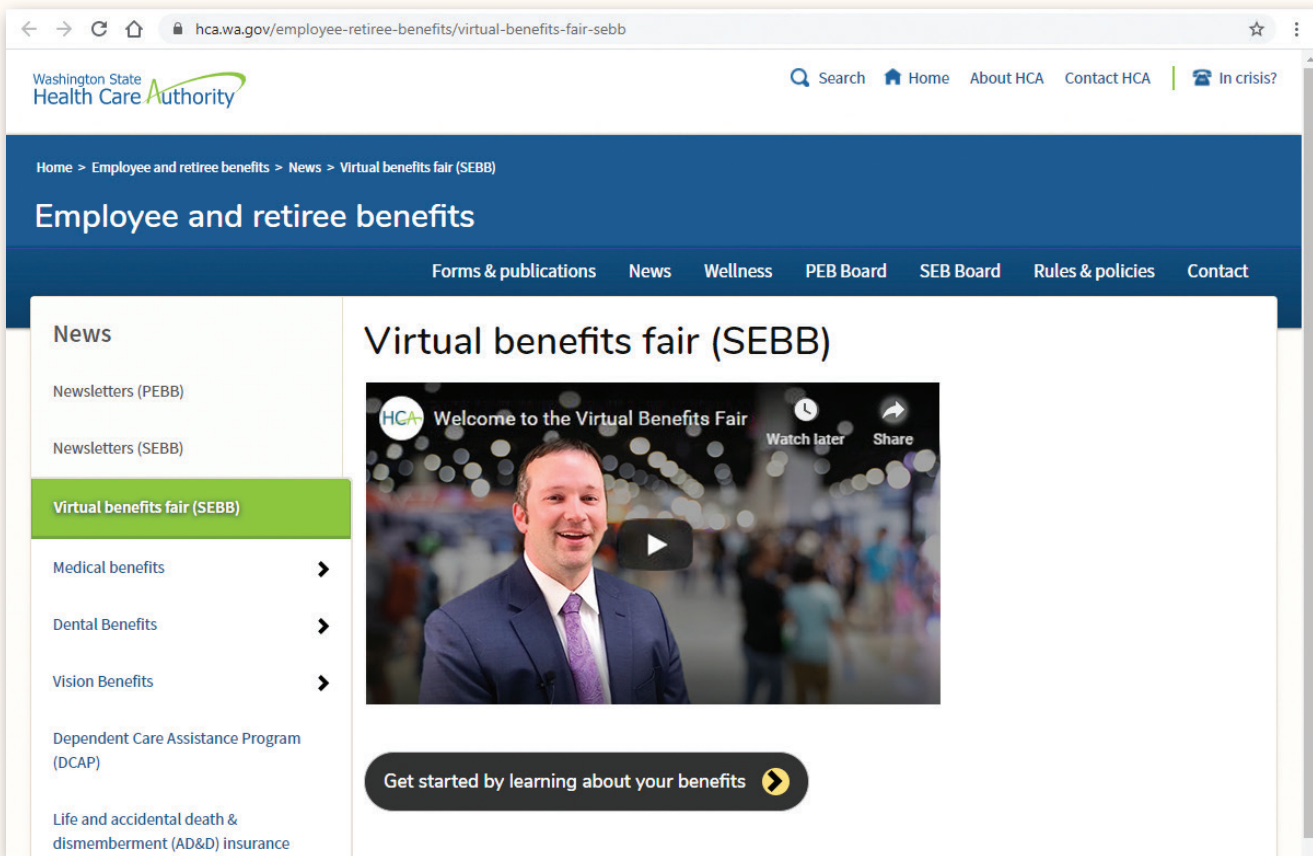
When you turn 65, please note that your COBRA coverage will end when you become eligible for Medicare. SEBB Program rules do not allow enrollment in SEBB Continuation Coverage (COBRA) to continue once you are enrolled in Medicare. Your COBRA coverage will stop at the end of the month before your Medicare Part A and Part B effective date. If dependents covered on your account turn 65, this also applies to them, and their coverage will end.

The early termination does not affect the COBRA rights of other qualified beneficiaries who are not eligible for Medicare benefits (for example, the spouse or child of the Medicare-enrolled beneficiary).

SEBB Continuation Coverage (COBRA) will also end early if you become covered under another employer's group health plan coverage.

You must notify the SEBB Program in writing no later than 60 days after you or a qualified dependent enrolls in Medicare benefits (Part A, Part B, or both) or becomes covered under another employer's group health plan coverage.

It is important that you or your Medicare-eligible dependent do not delay Medicare enrollment. To enroll in Medicare, call the Social Security Administration at 1-800-772-1213 (TTY: 1-800-325-0778) or visit their website at socialsecurity.gov. We encourage you to find a health plan outside of the SEBB Program to avoid a gap in coverage.



Virtual benefits fair helps you decide

In an effort to keep our members' health and safety a number one priority during the COVID-19 pandemic, and follow the state guidelines for large gatherings, we will not offer in-person benefit fairs during open enrollment. The SEBB 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.

We understand the importance of benefits fairs to our members, which is why we are offering an alternative way to learn about benefits from the comfort 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.

Visit and explore to learn more about all the benefits available. You will find links to videos, plan comparisons, webinars, and other information to help you choose the right benefits for you and your dependents. Use your computer, tablet, or smartphone to explore at your own pace.

To learn more, visit the virtual benefits fair webpages at hca.wa.gov/vbf-sebb. You can also find out about webinars hosted by the SEBB benefits plan carriers.

Don't miss out on the \$125

SmartHealth incentive

You still have time to qualify for the \$125 wellness incentive for the 2021 plan year. The deadline is November 30, 2020. Sign in today at smarthealth.hca.wa.gov. Learn more about SmartHealth at hca.wa.gov/sebb-smarthealth.



Get your Open Enrollment questions answered during a Facebook Live Q&A on October 15, 4 p.m. Visit hca.wa.gov/sebb-oe for more information.

Follow [@WAHealthCareAuthority](https://www.facebook.com/WAHealthCareAuthority) on facebook for the latest HCA updates.

Summary of Benefits and Coverage available to you

The Affordable Care Act requires the SEBB 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 SEBB medical plan, you can:

- Go to the 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 SEBB medical plan:

Call your plan. Your medical plan can also provide paper copies translated in other languages.

For other SEBB medical plans: Call the SEBB Program at 1-800-200-1004.

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.

If you are enrolled in SEBB Continuation Coverage (Unpaid Leave), you do not have to enroll in Medicare Part D. All SEBB medical plans provide creditable prescription drug coverage. The prescription drug coverage offered by SEBB's medical plans is expected to pay out, on average, as much as Medicare Part D coverage.

If you are enrolled in SEBB Continuation Coverage (COBRA), you (or your family member) must enroll in Medicare Part D. When you or a family member are eligible to enroll in Medicare, the SEBB medical plan will terminate.

If you lose or terminate your current SEBB 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 SEBB 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.

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

Update your mailing address

Let the SEBB Program know of any address changes, so we can send you important account information.

Here's how

You can write us at the address on the right. Include your first and last name, email address, and the last four digits of your Social Security number, so we can identify your account.

Mail to:

Health Care Authority
SEBB Program
PO Box 42720
Olympia, WA 98504-2720

Or, you can call 1-800-200-1004 (TRS 711). However, please note during open enrollment, the number of calls is higher than usual and wait times are longer.

Want more information? Go online!

Visit the SEBB Program's *Open enrollment* webpage at hca.wa.gov/sebb-oe to:

- Research medical, dental, and vision plans.
- Read the Summary of Benefits and Coverage (SBC) for details about plan benefits.
- Learn more about the premium surcharges.

Visit the virtual benefits fair at hca.wa.gov/vbf-sebb.

