



School Employees Benefits Board (SEBB) Program October 2025

Open enrollment is October 27 to November 24

Open enrollment is your opportunity to make changes to your SEBB health coverage for 2026. Forms and other helpful tools are available on the *Open enrollment* webpage at hca.wa.gov/sebb-oe.

Whether you're thinking about switching plans, adding or removing dependents, or staying with your current coverage, this is the time to review your options and make sure your benefits are working for you.

Important: UMP Plus–Puget Sound High Value Network (PSHVN) and UMP Plus–UW Medicine Accountable Care Network (ACN) will no longer be available beginning January 1, 2026. If you are enrolled in one of these plans, you must choose a new plan for 2026 or you and your enrolled dependents will be automatically enrolled in UMP Achieve 2.

What changes can I make during open enrollment?

You can make the changes listed below from October 27 to November 24.

Changes are effective January 1, 2026.

Log in to Benefits 24/7 at

benefits247.hca.wa.gov to:

- Change your medical, dental, and vision plans.
- Add or remove dependents.
- Waive medical coverage if you have other employer-based group medical, a TRICARE plan, or Medicare Part A and Part B.
- Enroll in medical coverage if you previously waived coverage.
- Attest to the spousal coverage premium surcharge.
- Enroll (or reenroll) in the flexible spending arrangement (FSA) or Dependent Care Assistance Program (DCAP).

See page 7 for information on how to make changes to your coverage using Benefits 24/7.

Tips for a smooth open enrollment

We've created a list that highlights important topics:

- **Review what's changing.** Look over any changes to your current plan, including premiums, deductibles, copays/coinsurance, and provider networks.
- **Assess your health care needs.** Consider your and any dependents' health status, any upcoming treatments, or anticipated life events (pregnancy, surgery, relocation, etc.) that may affect your coverage needs.
- **Make changes in Benefits 24/7.** This includes adding or removing dependents and changing plans.
- **Stay connected.** Sign up for emails and follow HCA on social media.
- **Need help?** Reach out to your payroll or benefits office.

Important dates

October 20 to November 13

Visit one of the in-person benefits fairs around the state to learn about your health plans and benefits options. See page 5 to find one near you.

October 27

SEBB annual open enrollment begins. Use Benefits 24/7 to make changes. Forms are also available.

November 24

Benefits 24/7 changes must be received by 11:59 p.m. If you are submitting paper forms, your payroll or benefits office must receive them as of this day.

November 30

Last day for most subscribers to qualify for the SmartHealth \$125 wellness incentive for 2026, if eligible, at:

smarthealth.hca.wa.gov.

January 1, 2026

The new plan year begins. Open enrollment changes become effective, and benefits, deductibles, and out-of-pocket maximums reset.

Important changes to your 2026 SEBB benefits

All changes are effective January 1, 2026, unless otherwise noted. Learn more about the changes listed below and other changes on the *Open enrollment* webpage at hca.wa.gov/sebb-oe. Any updates that happen after this newsletter mails will be listed on the *Open enrollment* webpage, so we recommend you check there for the latest information.

Note: Premiums are included on page 4. Please review the premiums closely as many have increased.

Medical plan changes



Kaiser Permanente Northwest (KPNW):

- **Hearing aids** will no longer be capped at a specific dollar amount. Members must see an in-network provider to receive hearing aids or they will not be covered by the plan, and the member will have to pay for them out of pocket. Members can use the hearing aid benefit every 36 months.
- **ClassPass Affinity** (access to discounted fitness and wellness perks) will no longer be offered after December 31, 2025.

Kaiser Permanente Washington (KPWA) and KPWA Options:

- **Hearing aids** will no longer be capped at a specific dollar amount. Members must see an in-network provider to receive hearing aids or they will not be covered by the plan, and the member will have to pay for them out of pocket. Members can use the hearing aid benefit every 36 months.
- **ClassPass Affinity** (access to discounted fitness and wellness perks) will no longer be offered after December 31, 2025.



Premera Blue Cross:

- **Prescriptions:** The copays for a 90-day supply of prescription drugs are changing. All copays will be based on a 30-day supply. As a result, copays for a 90-day supply of prescription drugs (mail order or retail) will increase.
- **Hearing aids** will no longer be capped at a specific dollar amount. Members can use the hearing aid benefit every 36 months.



Uniform Medical Plan (UMP):

- **UMP Plus–Puget Sound High Value Network (PSHVN) and UMP Plus–UW Medicine Accountable Care Network (ACN)** will no longer be offered. If you are enrolled in one of these plans, you must choose a new plan during open enrollment or you and your enrolled dependents will be automatically enrolled in UMP Achieve 2.
- **Hearing aids** will no longer be capped at a specific dollar amount. Members must see an in-network provider to receive hearing aids or they will not be covered by the plan, and the member will have to pay for them out of pocket. Members can use the hearing aid benefit every 36 months.
- **Diagnostic and supplemental breast exams** are covered without member cost share. This change is effective retroactive to January 1, 2025.
- **Deductible for UMP High Deductible:** The IRS raised the minimum deductible for high-deductible health plans to \$1,700 for single subscribers and \$3,400 for families.
- **Health savings accounts (HSAs) for UMP High Deductible members:** The IRS raised the health savings account annual maximum contribution to \$4,400 for single subscribers and \$8,750 for families.

Flexible spending arrangements (FSAs)

- **Flexible spending arrangements (FSAs):** The annual maximum contribution for the FSA and Limited Purpose FSA will increase to \$3,300. If the IRS announces an additional increase in the maximum contribution limit before the end of open enrollment, the SEBB Program will adopt those changes for 2026.
- **Collective Bargaining Agreement (CBA) FSA contribution:** This new benefit for 2026 will provide \$200 for employees who meet the qualifications, including the \$40,000 income limit. See "You may qualify for a \$200 FSA benefit" on page 9 for details.

Dependent Care Assistance Program (DCAP)

The annual maximum contribution for the DCAP will increase to \$7,500 for a single person or a married couple filing a joint income tax return and to \$3,750 for each married person if filing separate income tax returns.

Long-term disability (LTD) insurance

- **Employer-paid LTD:** The monthly benefit for basic (employer-paid) LTD insurance will increase to \$450. This benefit is offered at no cost to all eligible school employees, as long as their employer offers this benefit.
- **Employee-paid LTD:** Rates will decrease by 2 percent.

Rule changes

All changes to SEBB rules will be available on the HCA website at hca.wa.gov/sebb-rules and take effect January 1, 2026, unless otherwise noted. Here are some changes that might affect you:

- Clarified when a school employee will be automatically deferred from PEBB retiree insurance coverage.
- When a PEBB Program subscriber's dependent becomes eligible for the employer contribution toward SEBB benefits, the subscriber's dependent will be automatically disenrolled from PEBB retiree insurance coverage.

Open enrollment quick links

Use these online tools to help you throughout open enrollment.

- **Open enrollment webpage:** hca.wa.gov/sebb-oe. Find forms, benefits comparisons, what's changing, premiums, and what you need to do.
- **Compare medical plans:** hca.wa.gov/compare-medical-sebb. Compare up to three medical plans.
- **Benefits fairs:** hca.wa.gov/oe-fairs. Attend a fair to learn about your benefits.
- **Virtual benefits fairs:** hca.wa.gov/vbf-sebb. Learn about your benefit options online.
- **Benefits 24/7:** benefits247.hca.wa.gov. Sign in to Benefits 24/7 to make changes and attest to the spousal coverage premium surcharge.

2026 School employee monthly medical premiums

These premiums are effective January 1, 2026. You do not pay premiums for dental, vision, basic life, basic accidental death and dismemberment, or employer-paid long-term disability insurance benefits. The term “spouse” is interchangeable with “state-registered domestic partner.”

Managed-care plans								
What you pay 	Kaiser Permanente NW			Kaiser Permanente WA				Premera Blue Cross
	NW 1	NW 2	NW 3	Core 1	Core 2	Core 3	SoundChoice	HMO
Subscriber only	\$83	\$119	\$294	\$24	\$66	\$246	\$130	\$21
Subscriber & spouse	\$166	\$238	\$588	\$48	\$132	\$492	\$260	\$42
Subscriber & children	\$145	\$208	\$515	\$42	\$116	\$431	\$228	\$37
Subscriber, spouse, & children	\$249	\$357	\$882	\$72	\$198	\$738	\$390	\$63

Preferred provider organization (PPO) plans								
What you pay 	Kaiser Permanente WA Options			Premera Blue Cross		Uniform Medical Plan		
	Summit PPO 1	Summit PPO 2	Summit PPO 3	High PPO	Standard PPO	Achieve 1	Achieve 2	High Deductible
Subscriber only	\$45	\$134	\$287	\$157	\$108	\$47	\$135	\$35
Subscriber & spouse	\$90	\$268	\$574	\$314	\$216	\$94	\$270	\$70
Subscriber & children	\$79	\$235	\$502	\$275	\$189	\$82	\$236	\$61
Subscriber, spouse, & children	\$135	\$402	\$861	\$471	\$324	\$141	\$405	\$105

Monthly premium surcharges

In addition to your monthly medical premium, two premium surcharges may apply:

- \$25-per-account tobacco use
- \$50 spouse or state-registered domestic partner coverage

Benefits fairs schedule

During open enrollment, you can speak with health plan and other insurance representatives by attending one of the in-person benefits fairs.

Time: All fairs will run from 10 a.m. to 4:30 p.m., except the fairs held at the University of Washington, which will run from 10 a.m. to 5 p.m.

More information: Get presentation schedules, parking information, maps, and additional details at hca.wa.gov/oe-fairs.

Important: Check HCA's website for any late changes before you go.

Seattle/University of Washington

Note: The SEBB health plans and other insurance representatives will attend benefits fairs held at and sponsored by the University of Washington.

October 20

📍 Harborview Medical Center
Research and Training Building
300 9th Ave.

October 21

📍 Husky Union Building
4001 E. Stevens Way NE

October 22

📍 UW Medical Center – Montlake
Health Science Building
1959 NE Pacific St.

October 23

📍 UW Medical Center – Northwest
E. Wing Auditorium
1550 N. 115th St.

Olympia/Tumwater

October 27

📍 Department of Labor and
Industries
7273 Linderson Way SW
Tumwater

Pasco

October 28

📍 Columbia Basin College
Hawk Union Building (H Building)
2600 N. 20th Ave.

Vancouver

October 29

📍 Clark College
Gaiser Hall
1933 Fort Vancouver Way

Yakima

October 29

📍 Yakima Valley College
Kaminski Conference Center
W. Nob Hill & S. 16th Ave.

Wenatchee

October 30

📍 Wenatchee Convention Center
Orchard Exhibit South
121 N. Wenatchee Ave.

Federal Way/Des Moines

November 3

📍 Highline College
Student Union Building (Building 8)
2400 S 240th St.
Des Moines

Bremerton

November 4

📍 Olympic College
College Instruction Center
(Building 7)
1600 Chester Ave.

Spokane

November 4

📍 Spokane Falls Community College
Student Union Building 17
3410 W. Whistals Way

Cheney

November 5

📍 Eastern Washington University
Hargreaves Hall
616 Study Ln.

Port Angeles

November 5

📍 Red Lion Hotel Port Angeles
Harbor, Main building
221 N. Lincoln St.

Pullman

November 6

📍 City of Pullman Parks and
Recreation Center
Building B
190 SE Crestview St.

Tacoma/Lakewood

November 10

📍 Clover Park Technical College
McGavick Conference Center
4500 Steilacoom Blvd. SW
Lakewood

Lynnwood

November 12

📍 Edmonds College
Woodway Hall (Building 26)
20000 68 Ave. W

Bellingham

November 13

📍 Bellingham Public Schools
District office, Rooms 102/103
1985 Barkley Blvd.

Reminders for open enrollment

Remember your SmartHealth incentive

You can still qualify to receive a \$125 SmartHealth incentive in 2026. Visit hca.wa.gov/sebb-smarthealth to learn how to qualify.

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

The SEBB Program will mail you a letter if you need to reattest for 2026. You can also check if you need to reattest in your Benefits 24/7 dashboard at benefits247.hca.wa.gov starting October 27. You can reattest in Benefits 24/7 or submit the *SEBB Premium Surcharge Attestation Change Form*.

Is your mailing address up to date?

If not, let your payroll or benefits office know your new address.

You've got email!

Prefer to receive emails? You can sign up to receive newsletters in your inbox in Benefits 24/7. Select the *Profile* tile and then *Contact information*. Check the *Opt-in to receive email notifications* box and then click *Submit*.



You cannot enroll in both SEBB and PEBB coverage, or on more than one SEBB account

If you are eligible for enrollment in both the SEBB and PEBB Programs, you are limited to a single enrollment in SEBB or PEBB medical, dental, and vision. You must choose which program you want to be enrolled in for these benefits. If you do not take action to resolve the dual enrollment, the SEBB or PEBB Program will automatically enroll or disenroll you as described in both WAC 182-12-123(6) and 182-31-070(6). You also cannot be enrolled on more than one SEBB account.

Who to contact for help

Contact your plan if you have questions about the topics below. For phone numbers and web addresses, visit hca.wa.gov/sebb-employee and select *Contact the plans* under *Get help*.

- Benefits
- ID cards
- Claims
- Checking if your provider is in network
- Choosing a provider
- Making sure your prescriptions are covered

Contact your employer's payroll or benefits office for questions about:

- Eligibility and enrollment
- Premium surcharges
- Help with Benefits 24/7
- Changing your name, address, or phone number
- Adding or removing dependents
- Premium payments
- Finding forms
- Payroll deductions
- Eligibility and enrollment for life, accidental death and dismemberment (AD&D), and long-term disability (LTD) insurance

Make changes in Benefits 24/7

Use Benefits 24/7 to make changes to your coverage during open enrollment, October 27 to November 24. Changes in Benefits 24/7 must be completed by 11:59 p.m. on November 24. Paper forms are also available from your payroll or benefits office and they must receive your forms by November 24.

Get started

- 1 Log in to your account at **benefits247.hca.wa.gov**.
- 2 Choose the *Open enrollment* option.
- 3 Follow the guide to make changes.
- 4 Save a copy of your confirmation page.
Note: Any changes you make during open enrollment won't show in your account until January 1, 2026.

First time here? Create an account

- 1 Visit **benefits247.hca.wa.gov** and click on the green *Log in to Benefits 24/7* button. You'll be directed to SecureAccess Washington (SAW).
- 2 Click *Sign up* to create a SAW account. (If you already have a SAW account, enter your username and password, and skip to step 5.) Enter your name, email address, a username, and password.
- 3 Check the box to prove you're not a robot, click *Submit*, and follow the link to activate your account.
- 4 Check your email for a message from SAW. Click on the confirmation link, close the *Account Activated!* browser window that opens, and return to your original window. Follow the instructions on the screen to finish creating your account. You will be directed to Benefits 24/7.
- 5 Enter your last name, date of birth, and the last four digits of your Social Security number. Click *Verify my information*.
- 6 Select your security questions and answers. You'll be directed to the Benefits 24/7 dashboard.

Need help?

Visit the *Help with Benefits 24/7* webpage at **benefits247.hca.wa.gov** for FAQs and troubleshooting tips. If you need further assistance, contact your payroll or benefits office.

What to think about when choosing a dental plan

Your SEBB benefits include dental coverage, and you have three dental plan options:

- Uniform Dental Plan (UDP), administered by Delta Dental of Washington (Group 09600)
- DeltaCare, administered by Delta Dental of Washington (Group 09601)
- Willamette Dental (Group WA733)

Here are some things to keep in mind when comparing your dental plan options.

Check if your dental provider is in the plan's network

The best way to do this is by contacting the plan, not your dentist. You can also visit **hca.wa.gov/sebb-employee** and select *Find a SEBB plan provider* to search online provider directories.

Understand the different plan structures

Determine which type of plan best fits your needs.

Uniform Dental Plan is a preferred provider organization (PPO) plan. This means you can change providers at any time and don't need a referral to see a specialist. After meeting your annual deductible, you pay a percentage (coinsurance) of the plan's allowed amount. There is a lower coinsurance when you see a dentist in the Delta Dental PPO network (more than three out of four dentists in Washington State are in network).

DeltaCare and Willamette Dental are both managed-care plans. You must choose a primary care dental provider in the plan's network, and you will need a referral to see a specialist. These plans will not pay claims for services you receive from providers outside their network. When you visit your in-network dentist, you pay a set amount (copay), and there are no annual deductibles. DeltaCare's service area is limited to Washington State, and Willamette Dental has offices in Washington, Oregon, and Idaho.

Don't confuse Uniform Dental Plan and DeltaCare

Double check that you are searching the correct provider directory or calling the right plan to ensure you choose the plan you want during open enrollment.

What is a high-deductible health plan?

If you don't need to visit the doctor often, choosing a high-deductible health plan (HDHP) can save you money. However, they are unique medical plans, so it's best to understand how they work.

How is an HDHP different from other plan types?

An HDHP offers similar coverage to other SEBB medical plans. Three key differences are:

- A lower monthly premium.
- Higher out-of-pocket costs (maximum out-of-pocket limits are \$4,200 for an individual and \$8,400 for a family) with a deductible of \$1,700 for an individual and \$3,400 for a family.
- A health savings account (HSA).

Preventive care is covered before meeting your deductible. While HDHPs have some higher costs, all SEBB medical plans cover the same basic health care services. You can compare plans and costs using the medical benefits comparison tool at hca.wa.gov/compare-medical-sebb.

Not everyone is eligible to enroll in an HDHP. If you are enrolled in another health plan (including Apple Health or your spouse's or state-registered domestic partner's coverage), you cannot enroll in an HDHP because of IRS restrictions. Learn more about who is eligible to enroll in HDHPs at irs.gov/publications/p969.

About the HSA

An HSA is a tax-advantaged account, which means you do not pay payroll taxes on the money you contribute. Your employer is required to make contributions to your HSA and you can choose to make contributions in addition for IRS-qualified out-of-pocket expenses (like deductibles, copays, and coinsurance), including some expenses and services your health plans may not cover.

Your HSA balance can grow over the years, earn interest, and build savings that you can use to pay for health care as needed. The money is yours, even if you change health plans, get a new job, or retire. **It never expires.**

The HSA administrator for the SEBB Program is HealthEquity. Visit learn.healthequity.com/sebb/hsa to learn more about how an HSA works.

Helping you take care of your health

A flexible spending arrangement (FSA) can help your dollars go further by saving you an average of 30 percent on taxes on the dollars you deposit. You can think of it as for every \$100 you would deposit in your bank, you can deposit \$130 in an FSA to use for expenses such as visiting the dentist, getting new eyeglasses or contact lenses, or replacing that broken humidifier.

To find out how much you can save, visit sebb.naviabenefits.com/tools/tax-savings-calculator and use the tax-savings calculator.

Enjoy your hard-earned funds, tax-free

An FSA is a tax-advantaged benefit, so you do not pay payroll taxes on funds when they are deposited or when you use them. You can contribute between \$120 and \$3,300 for 2026. Your contribution will be deducted equally from each paycheck over the year. The full amount will be available January 1 to help you budget for any larger expenses. (**Note:** If you enroll for the maximum contribution limit for either the FSA or Limited Purpose FSA, and the IRS announces an increase to this limit before the last day of open enrollment, your contribution will change to the new limit. This will only happen if you enroll for the maximum contribution amount.)

How to use an FSA

An FSA can be used for eligible medical, dental, and vision expenses for you, your spouse or state-registered domestic partner (SRDP), or qualifying dependents. Not only can you pay for out-of-pocket

costs such as your deductible or prescription drugs, you can also take care of your family's well-being by purchasing a blood pressure monitor or first aid kit. Visit sebb.naviabenefits.com/expenses to view a list of eligible expenses.

Everyone can enjoy tax savings, but if you or your spouse or SRDP are enrolled in a high-deductible health plan (HDHP) with a health savings account (HSA), you may only enroll in a **Limited Purpose FSA**, which can be used for eligible dental and vision expenses.

Already have an FSA? Remember to enroll

You must enroll each year you want to participate. Enroll on Navia's website at sebb.naviabenefits.com.

Remember to submit claims by March 31, 2026 for expenses made in 2025. Also, **you may qualify for carryover**. Funds between \$120 and \$660, and any amount up to \$660 if you enroll for 2026, will carry over to your account for next year.

You may qualify for a \$200 FSA benefit

Beginning January 1, 2026, SEBB employee subscribers who meet certain eligibility requirements will get a \$200 employer-paid contribution towards an FSA. You will likely qualify for this employer-paid benefit if:

- You are employed in a SEBB benefits-eligible position on January 1, 2026 and participate in SEBB Program benefits.
- Your annual earnable compensation, as defined in Chapter 41.32 (TRS) or 41.35 (SERS) RCW, did not exceed \$40,000 as of June 30, 2025.
- You or your spouse or SRDP are not enrolled in a high-deductible health plan (HDHP) with a health savings account (HSA).

This benefit was negotiated through the most recent Collective Bargaining Agreement (CBA), but union membership is not required to qualify. If you enroll in an FSA, the \$200 will not count towards your annual maximum contribution. You do not need to enroll in an FSA to receive this benefit.



Helping you take care of family

The costs for care can be a significant household expense. The Dependent Care Assistance Program (DCAP) is available to help you pay for care for your child or parent who is a qualified tax dependent.

The DCAP limit is increasing!

Effective January 1, 2026, the maximum contribution limit for DCAP is increasing to \$7,500 for a single person or a married couple filing a joint tax return, or \$3,750 for each person for couples filing taxes separately.

How does the DCAP save money?

The DCAP is a tax-advantaged account, so you do not pay payroll taxes on funds you deposit in this account. Savings average 30 percent on funds you deposit, helping your dollars go further. To find out how much you can save, visit sebb.naviabenefits.com/tools/tax-savings-calculator and use the tax-savings calculator.

Funds are deposited in your DCAP in equal increments from each paycheck during the year. The DCAP works like a bank account. You can “withdraw” from funds that have already been deposited and reimburse yourself for eligible expenses such as day care, enrollment fees for after school programs, or a care provider.

Remember to enroll

You must enroll in the DCAP for each year you want to participate. Enroll on Navia’s website.

Learn more

Visit Navia’s website at sebb.naviabenefits.com or call Navia Customer Service Center at 1-800-669-3539, Monday through Friday, between 5 a.m. and 5 p.m. These benefits are administered by Navia Benefit Solutions.

HSA, FSA, and DCAP: Which is best for me?

Differences	HSA	FSA	Limited Purpose FSA	DCAP
Plan eligibility	Enrolled in an HDHP	Enrolled in any non-HDHP medical plan	Enrolled in any medical plan	Enrolled in any medical plan
Annual contribution limits	\$4,400 for single/\$8,750 for family 55 and older can contribute additional \$1,000	\$3,300	\$3,300	\$7,500 for single or married filing jointly/\$3,750 for married filing individually
Spend on qualified medical expenses	✓	✓	✗	✗
Spend on qualified dental and vision expenses	✓	✓	✓	✗
Spend on child care and elder care	✗	✗	✗	✓
100% of unused funds carry over year to year	✓	No, up to \$660	No, up to \$660	✗
Contributions are pre-tax	✓	✓	✓	✓
100% of contribution is available January 1	✗	✓	✓	✗
Account is yours, even if you leave your job	✓	✗	✗	✗
Employer contribution	✓	✗	✗	✗

Required federal notice

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). These documents help you compare medical plan benefits, terms, and your costs for care from network and out-of-network providers.

To get an SBC for your current SEBB medical plan, go to the *Medical plans and benefits* webpage at hca.wa.gov/sebb-employee (or the plan's website) to view or print it. You can also call your plan to ask for a paper copy at no charge. Your plan can also provide copies translated into other languages.

For questions, call the SEBB Program at 1-800-200-1004 (TRS: 711).

Required federal notice

Annual notice of creditable prescription drug coverage

You will receive this notice each year in this newsletter, and you will also receive this notice if your SEBB coverage changes. You may request a copy of this notice at any time by calling the SEBB Program at 1-800-200-1004 (TRS: 711).

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.

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

When you enroll in Medicare, you can keep your SEBB medical plan with creditable drug coverage and not pay a penalty if you enroll in a Medicare Part D plan later.

If you enroll in a Medicare Part D plan, your SEBB medical plan may not coordinate prescription drug benefits with Medicare Part D.

If you lose or terminate your current SEBB medical plan

To avoid paying a Medicare Part D late enrollment penalty, you should enroll in a Medicare Part D plan within 63 days after your SEBB medical plan ends. If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For questions about Medicare Part D

Visit Medicare's website at medicare.gov or call 1-800-633-4227.

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.



iINTERCOM

Your SEBB health benefits newsletter

Open enrollment is
October 27 through
November 24.