



Washington State Health Care Authority
Public Employees Benefits Board

P.O. Box 42684 • Olympia, Washington 98504-2684
360-412-4200 • FAX 360-923-2608 • TTY 360-923-2701 • www.wa.gov/hca/pebb.htm

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TO: Personnel, Payroll, and Insurance Offices of Employer Groups

FROM: Megan Atkinson, Financial Analysis and Budget Manager
Finance and Budget Office

SUBJECT: Fiscal Year 2006 PEBB Program Rates – Composite

Starting July 1, 2005 through December 31, 2005, your employer-funding rate is \$666.21 per active employee per month. This rate covers health benefits under the Public Employees Benefits Board (PEBB) program.

COBRA and self-pay rates will remain the same until January 1, 2006, when the new plan year begins. You will receive revised rate sheets for these members before open enrollment this fall.

As a reminder, you must pay the full employer-funding rate for every eligible employee, including those who have waived medical coverage. Employee premiums will automatically be added to your billed rate. Employer groups are responsible for collecting the employees' premiums and sending the total billed amount to the HCA. Employee premiums will not change until January 1, 2006.

If you have questions, please contact Sandra Lakey at 360-412-4201 or slak107@hca.wa.gov.

Enclosure

cc: Mary Fliss
Katie Rogers
Barbara Scott
Michelle George
Connie Robins
Tony Hildesheim
Sandra Lakey
Debbie Haeger
Lonnie Budd
Kim Grindrod

Fiscal Year 2006 Program Rates
Composite Active Rates for Employer Groups (Political Subdivisions)
(for 7/1/05 through 12/31/05 only)
HCA Finance and Administration

Plan Name	Jul 1, 2005 Dec 31, 2005 Base Rate	Employee Contributions				Total Base Rates With Employee Contributions			
		Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
CHPWA	\$666.21	\$ 57.00	\$ 123.00	\$ 99.00	\$ 166.00	\$723.21	\$789.21	\$765.21	\$832.21
Group Health Cooperative of Puget Sound	\$666.21	\$ 20.00	\$ 51.00	\$ 36.00	\$ 66.00	\$686.21	\$717.21	\$702.21	\$732.21
Group Health Options Inc.	\$666.21	\$ 48.00	\$ 107.00	\$ 85.00	\$ 143.00	\$714.21	\$773.21	\$751.21	\$809.21
Kaiser Foundation Health Plan of the NW	\$666.21	\$ 37.00	\$ 84.00	\$ 65.00	\$ 112.00	\$703.21	\$750.21	\$731.21	\$778.21
PacifiCare of Washington, Inc	\$666.21	\$ 108.00	\$ 226.00	\$ 189.00	\$ 307.00	\$774.21	\$892.21	\$855.21	\$973.21
Regence BlueShield	\$666.21	\$ 102.00	\$ 214.00	\$ 178.00	\$ 290.00	\$768.21	\$880.21	\$844.21	\$956.21
Uniform Medical Plan PPO	\$666.21	\$ 33.00	\$ 76.00	\$ 58.00	\$ 101.00	\$699.21	\$742.21	\$724.21	\$767.21
UMP Neighborhood	\$666.21	\$ 25.00	\$ 59.00	\$ 43.00	\$ 78.00	\$691.21	\$725.21	\$709.21	\$744.21