

Washington State Health Care Authority Public Employees Benefits Board

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April 27, 2006

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

FROM: Megan Atkinson

Financial Services Manager

SUBJECT: Fiscal Year 2007 PEBB Program Rates – Composite

Effective July 1, 2006 through December 31, 2006, your employer funding rate is \$684.00 per active employee, per month. This rate covers health benefits under the Public Employees Benefits Board (PEBB) program.

Employee contributions, COBRA, and self-pay rates will remain the same until January 1, 2007, when the new plan year begins. You will receive these revised rate sheets 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. You are responsible for collecting the employees' premiums and sending the total billed amount to the HCA.

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

Enclosure

cc: Mary Fliss

Rene Bourbeau
Barbara Scott
Michelle George
Sandy Lakey
Debbie Allen
Lonnie Budd
Kim Grindrod

Fiscal Year 2007 Program Rates Composite Active Rates for Employer Groups (Political Subdivisions) (for 07/01/06 through 12/31/06 only) Final 2006 PEBB Bid Rates

HCA Financial Services

	07/01/06												
	through												
	06/30/07	01/01/06 through 12/31/06								07/01/06 through 12/31/06			
		Employee Contributions								Total Base Rates With Employee Contributions			
				Si	ubscriber	S	Subscriber				Subscriber	Subscriber	
<u>Plan Name</u>	Base Rate	Su	<u>bscriber</u>	an	d Spouse	and	d Child(ren)	Fι	ıll Family	<u>Subscriber</u>	and Spouse	and Child(ren)	Full Family
CHPWA	\$684.00	\$	73.00	\$	155.00	\$	127.00	\$	210.00	\$757.00	\$839.00	\$811.00	\$894.00
Group Health Cooperative of Puget Sound	\$684.00	\$	51.00	\$	113.00	\$	90.00	\$	151.00	\$735.00	\$797.00	\$774.00	\$835.00
Group Health Options Inc.	\$684.00	\$	98.00	\$	205.00	\$	171.00	\$	278.00	\$782.00	\$889.00	\$855.00	\$962.00
Kaiser Foundation Health Plan of the NW	\$684.00	\$	55.00	\$	120.00	\$	96.00	\$	161.00	\$739.00	\$804.00	\$780.00	\$845.00
PacifiCare of Washington, Inc	\$684.00	\$	131.00	\$	272.00	\$	230.00	\$	371.00	\$815.00	\$956.00	\$914.00	\$1,055.00
Regence BlueShield	\$684.00	\$	136.00	\$	282.00	\$	238.00	\$	385.00	\$820.00	\$966.00	\$922.00	\$1,069.00
Uniform Medical Plan PPO	\$684.00	\$	14.00	\$	38.00	\$	25.00	\$	49.00	\$698.00	\$722.00	\$709.00	\$733.00
UMP Neighborhood	\$684.00	\$	12.00	\$	34.00	\$	21.00	\$	43.00	\$696.00	\$718.00	\$705.00	\$727.00