



Washington State Health Care Authority  
*Public Employees Benefits Board*

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May 20, 2009

TO: Personnel, Payroll, and Insurance Offices of K-12 School Districts and Educational Service Districts (ESDs)

FROM: Steve Norsen, Manager  
PEBB Outreach & Training Team

SUBJECT: Fiscal Year (FY) 2010 PEBB Program Rates – Composite

**Starting July 1, 2009 (FY 2010), the monthly employer funding rate will increase to \$745.00 per active employee per month.** These rates were established in the 2009 – 2011 operating budget (ESHB 1244 PL) and cover benefits under the Public Employees Benefits Board (PEBB) program.

Engrossed Substitute House Bill 2245 PL revised RCW 41.05.050 (4)(a) to allow the Health Care Authority the option of changing the employer portion of the PEBB rates (funding rate) to a school year basis instead of a fiscal year basis. However, the revision to the law will not take effect until January 2010. Therefore, for this year, your rate change will take effect on July 1, 2009. HCA expects to be able to implement the revised funding period next year.

Employee contributions, COBRA (unsubsidized), and self-pay rates will remain the same until January 1, 2010, when the new plan year begins. You will receive these revised rates before open enrollment this fall.

Enclosed is a rate sheet titled "Composite Active Rates for State and Higher ED, Commodity Commissions, Employer Groups, and ESDs/K-12 School Districts," for 7/1/09 through 12/31/09 only.

As a reminder, you must pay the full employer funding rate for every eligible employee working half-time or more, 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 me at 360-412-4201 or [steve.norsen@hca.wa.gov](mailto:steve.norsen@hca.wa.gov).

c: Kim Grindrod, PEBB Budget Analyst

**Composite Active Rates for STATE and HIGHER ED,  
Commodity Commissions, Employer Groups, and ESDs/K-12 School Districts  
(for 07/01/09 through 12/31/09 only)**

2009 Rates

HCA Financial Services

|                            | 07/01/09<br>through<br>06/30/10 | 01/01/09 through 12/31/09 |                          |                              |             | 07/01/09 through 12/31/09                    |                          |                              |             |
|----------------------------|---------------------------------|---------------------------|--------------------------|------------------------------|-------------|--|--------------------------|------------------------------|-------------|
| Plan Name                  | Base Rate                       | Employee Contributions    |                          |                              |             | Total Base Rates With Employee Contributions |                          |                              |             |
|                            |                                 | Subscriber                | Subscriber<br>and Spouse | Subscriber<br>and Child(ren) | Full Family | Subscriber                                   | Subscriber<br>and Spouse | Subscriber<br>and Child(ren) | Full Family |
| Aetna Public Employee Plan | \$ 745.00                       | \$ 112.00                 | \$ 234.00                | \$ 196.00                    | \$ 318.00   | \$ 857.00                                    | \$ 979.00                | \$ 941.00                    | \$ 1,063.00 |
| Group Health Classic       | \$ 745.00                       | \$ 107.00                 | \$ 224.00                | \$ 187.00                    | \$ 304.00   | \$ 852.00                                    | \$ 969.00                | \$ 932.00                    | \$ 1,049.00 |
| Group Health Value         | \$ 745.00                       | \$ 25.00                  | \$ 60.00                 | \$ 44.00                     | \$ 79.00    | \$ 770.00                                    | \$ 805.00                | \$ 789.00                    | \$ 824.00   |
| Kaiser Permanente Classic  | \$ 745.00                       | \$ 76.00                  | \$ 162.00                | \$ 133.00                    | \$ 219.00   | \$ 821.00                                    | \$ 907.00                | \$ 878.00                    | \$ 964.00   |
| Kaiser Permanente Value    | \$ 745.00                       | \$ 33.00                  | \$ 76.00                 | \$ 58.00                     | \$ 101.00   | \$ 778.00                                    | \$ 821.00                | \$ 803.00                    | \$ 846.00   |
| Uniform Medical Plan PPO   | \$ 745.00                       | \$ 26.00                  | \$ 62.00                 | \$ 46.00                     | \$ 82.00    | \$ 771.00                                    | \$ 807.00                | \$ 791.00                    | \$ 827.00   |