

Washington State Health Care Authority

Public Employees Benefits Board

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May 6, 2010

TO: Ms. Rita Lauzon

Center for Information Services 3101 Northup Way, Suite 100 Bellevue, WA 98004-1449

FROM: Steve Norsen, Manager

PEBB Outreach & Training Team

SUBJECT: Fiscal Year (FY) 2011 PEBB Program Rates - Composite

Starting July 1, 2010 (FY 2011), the monthly employer funding rate will increase to \$850.00. These rates were established in the 2010 supplemental operating budget (ESSB 6444.PL, Section 906) and cover benefits under the Public Employees Benefits Board (PEBB) program.

Employee contributions, COBRA, and self-pay rates will remain the same until January 1, 2011, when the new plan year begins. You will receive these revised rates before open enrollment this fall.

The employer funding rate does not represent the actual cost of providing benefits to employees during the calendar year. The amounts shown below are the breakout of the current funding rate, which may vary from the actual costs.

	Funding Rate
Benefit	Breakout
Medical	\$763.76
Dental	\$79.17
Life	\$5.07
LTD	\$2.00
Total Funding Rate	\$850.00

If you have questions, please contact me at 360-412-4201 or steve.norsen@hca.wa.gov.

c: Kim Grindrod, PEBB Budget Analyst

Composite Active Rates for STATE and HIGHER ED, and Employer Groups (for 07/01/10 through 12/31/10 only)

2010 PEBB Bid Rates HCA Financial Services

	th	/01/10 rough /30/11			01	/01/10 thr	oug	jh 12/31/10			07/01/10 through 12/31/10								
			Employee Contributions									Total Base Rates With Employee Contributions							
					Subscriber			Subscriber					Subscriber		Subscriber				
Plan Name	Bas	se Rate	Sι	ubscriber	an	d Spouse	and	d Child(ren)	Fι	ıll Family	Su	ubscriber	an	nd Spouse	and	Child(ren)	F	ull Family	
Aetna Public Employee Plan	\$	850.00	\$	132.00	\$	274.00	\$	231.00	\$	373.00	\$	982.00	\$	1,124.00	\$	1,081.00	\$	1,223.00	
Group Health Classic	\$	850.00	\$	71.00	\$	152.00	\$	124.00	\$	205.00	\$	921.00	\$	1,002.00	\$	974.00	\$	1,055.00	
Group Health Value	\$	850.00	\$	22.00	\$	54.00	\$	39.00	\$	71.00	\$	872.00	\$	904.00	\$	889.00	\$	921.00	
Kaiser Permanente Classic	\$	850.00	\$	72.00	\$	154.00	\$	126.00	\$	208.00	\$	922.00	\$	1,004.00	\$	976.00	\$	1,058.00	
Kaiser Permanente Value	\$	850.00	\$	42.00	\$	94.00	\$	74.00	\$	126.00	\$	892.00	\$	944.00	\$	924.00	\$	976.00	
Uniform Medical Plan PPO	\$	850.00	\$	41.00	\$	92.00	\$	72.00	\$	123.00	\$	891.00	\$	942.00	\$	922.00	\$	973.00	