

Public Employees Benefits Division

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June 16, 2011

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) 2012 PEBB Program Rates - Composite

Starting July 1, 2011 (FY 2012), the monthly employer funding rate will remain \$850.00 per active employee per month. These rates were established in the 2011 Laws, 1st Special Session PV, Chapter 50 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, 2012, when the new plan year begins. You will receive these revised rates before open enrollment this fall.

As a reminder, you must pay the full employer funding rate for every eligible employee as outlined in WAC 182-12, including those who have waived medical coverage.

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, Commodity Commissions and Employer Groups (for 07/01/11 through 12/31/11 only)

2011 PEBB Bid Rates HCA Financial Services

	07/01/11 through 06/30/12		01/01/11 through 12/31/11								07/01/11 through 12/31/11							
			Employee Contributions								Total Base Rates With Employee Contributions							
		ſ		Subscriber			Subscriber					Subscriber		Subscriber				
Plan Name	Base Rate	•	Subscriber	an	d Spouse	and	Child(ren)	Fι	ull Family	S	ubscriber	ar	nd Spouse	and	d Child(ren)	F	ull Family	
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	\$ 30.00	\$	70.00	\$	53.00	\$	93.00	65	880.00	\$	920.00	\$	903.00	\$	943.00	
Kaiser Permanente Classic	\$ 850.	00	\$ 105.00	\$	220.00	\$	184.00	\$	299.00	\$	955.00	\$	1,070.00	\$	1,034.00	\$	1,149.00	
Uniform Medical Plan PPO	\$ 850.	00	\$ 60.00	\$	130.00	\$	105.00	\$	175.00	\$	910.00	\$	980.00	\$	955.00	\$	1,025.00	