



Washington State Health Care Authority
Public Employees Benefits Board

P.O. Box 42684 • Olympia, Washington 98504-2684
360-725-0440 • TTY 711 • FAX 360-725-0771 • www.pebb.hca.wa.gov

June 2, 2014

TO: Personnel, Payroll, and Insurance Offices of K-12 School Districts and Educational Service Districts (ESDs) on Composite Rates with PEBB

FROM: Amy Corrigan
PEBB Outreach & Training Team

SUBJECT: Fiscal Year (FY) 2015 PEBB Program Rates – Composite

Starting September 1, 2014 (FY 2015), the monthly employer base rate will be \$662.00 per active employee per month. These rates were established in the ESSB 6002.PL, 63rd Legislature, 2014 Regular Session and cover benefits administered by the Health Care Authority (HCA) through the Public Employees Benefits Board (PEBB) Program.

This change does not impact districts or district employees on “tiered rates,” employee contributions, COBRA, or self-pay rates, which will remain the same until January 1, 2015, when the new plan year begins. You will receive these revised rates before open enrollment this fall.

Beginning July 1, 2014, in addition to the employee contribution, employees may be subject to a \$25 tobacco use and \$50 spousal premium surcharge.

As a reminder, you must pay the full employer base rate for every eligible employee as outlined in WAC 182-12, including for those who have waived medical coverage. Employee contributions will automatically be added to your billed rate. You are responsible for collecting employee contributions and applicable premium surcharges and sending the total billed amount to the HCA.

If you have questions, please contact me at 360-725-0826 or Amy.Corrigan@HCA.WA.GOV.

cc: David Donnell, PEBB Fiscal Information and Data Analyst

**Composite Active Rates for ESD's/K-12 School Districts
(for 9/01/14 through 12/31/14 only)**

2014 PEBB Bid Rates
HCA Financial Services

	09/01/14 through 08/31/15	01/01/14 through 12/31/14				09/01/14 through 12/31/14			
Plan Name	Base Rate	Employee Contributions				Total Premium			
		Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Group Health Classic	\$ 662.00	\$ 117.00	\$ 244.00	\$ 205.00	\$ 332.00	\$ 779.00	\$ 906.00	\$ 867.00	\$ 994.00
Group Health Value	\$ 662.00	\$ 65.00	\$ 140.00	\$ 114.00	\$ 189.00	\$ 727.00	\$ 802.00	\$ 776.00	\$ 851.00
Group Health CDHP	\$ 662.00	\$ 21.00	\$ 52.00	\$ 37.00	\$ 68.00	\$ 683.00	\$ 714.00	\$ 699.00	\$ 730.00
Kaiser Permanente Classic	\$ 662.00	\$ 116.00	\$ 242.00	\$ 203.00	\$ 329.00	\$ 778.00	\$ 904.00	\$ 865.00	\$ 991.00
Kaiser CDHP	\$ 662.00	\$ 23.00	\$ 56.00	\$ 40.00	\$ 73.00	\$ 685.00	\$ 718.00	\$ 702.00	\$ 735.00
Uniform Medical Plan Classic	\$ 662.00	\$ 79.00	\$ 168.00	\$ 138.00	\$ 227.00	\$ 741.00	\$ 830.00	\$ 800.00	\$ 889.00
Uniform Medical Plan CDHP	\$ 662.00	\$ 25.00	\$ 60.00	\$ 44.00	\$ 79.00	\$ 687.00	\$ 722.00	\$ 706.00	\$ 741.00

Effective 7/1/2014: The following surcharges will be applied to some employees

Tobacco Use Surcharge		\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00
Spouse Surcharge			\$ 50.00		\$ 50.00		\$ 50.00		\$ 50.00

Pub No. 52-490A, 52-490