



Washington State Health Care Authority  
*Public Employees Benefits Board*

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August 21, 2014

TO: PEBB Participating School Districts and Employer Groups  
(Political Subdivisions & Tribal Governments)

FROM: Amy Corrigan, Manager  
PEBB Outreach & Training Team

SUBJECT: 2015 Rates – Tiered - Full Benefits Package

We have completed the procurement cycle, which resulted in a change in premiums for your employees and early retirees. The revised rate sheet (effective January 1, 2015) for school districts, employer groups, and Tribal Governments on tiered rates accepting the full benefits package is attached.

The biennial budget approved by the Legislature that requires some members to pay tobacco and spousal premium surcharges beginning July 1, 2014 will remain in effect for 2015. The tobacco premium surcharge will remain at \$25 per month in addition to the monthly premium, regardless of the number of tobacco users in the family. The spouse/partner premium surcharge will remain at \$50 per month in addition to the monthly premium for subscribers who cover a spouse or state-registered domestic partner in PEBB medical insurance where the spouse or domestic partner has chosen not to enroll in their own employer-sponsored health insurance. Due to the change in PEBB medical premiums for 2015, employees who cover a spouse or domestic partner on their 2015 medical coverage will be required to re-attest to the spouse or domestic partner premium surcharges during the PEBB annual open enrollment.

Employees' optional life and LTD rates will increase effective January 1, 2015. The increase in optional life is due to the excess reserves that have kept these premiums low since 2011 being spent. The optional LTD increase is due to the plan change to eliminate the gap between the end of LTD insurance benefits and the beginning of a member's Social Security entitlement date. The rate schedule for life and LTD insurance is also attached.

If you have an IRS Section 125 Plan that allows employee premium dollars to be treated as a pre-tax deduction, a portion of the premium employers pay toward the family's coverage is considered taxable income to the employee if the employee has dependents enrolled who do not qualify as an IRS tax dependent. To assist you, we have included examples of how the state calculates these amounts for state agency personnel [Tables 1-7]. These tables should only be used as a template in developing calculations that are based on your employer contribution rate.

August 21, 2014

Open enrollment is November 1 – November 30, 2014. In October, employees will receive the *For Your Benefit* newsletter with open enrollment information. This newsletter is the only notice we send employees about open enrollment. Details will also be available at [www.hca.wa.gov/pebb](http://www.hca.wa.gov/pebb) before open enrollment.

Employees who make an online plan change using E-Coverage will not see a premium rate. Instead, a pop-up box will prompt them to contact their personnel or payroll office. To support their decisions, you may want to distribute information regarding how much your employees are expected to pay before open enrollment so they can have it available when making a plan selection.

If you have questions about the rates, please contact me at 360-725-0826, or [amy.corrigan@hca.wa.gov](mailto:amy.corrigan@hca.wa.gov)

Attachments

c: Janice Baumgardt

**Washington State Health Care Authority****2015 PEBB Rate Book**

K-12 and Employer Groups (Political Subdivisions and Tribal Governments) Active Tiered Rates for Full Benefits Package with Surcharge Tables

**Excluding Tobacco and Spouse Waiver (AV) Surcharges**

Group Health Classic  
Group Health Value  
Group Health CDHP  
Kaiser Permanente Classic  
Kaiser CDHP  
Uniform Medical Plan Classic  
Uniform Medical Plan CDHP  
Medical Waived

Non-Medicare				
Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family	
\$740.45	\$1,335.00	\$1,186.36	\$1,780.91	
\$709.03	\$1,272.16	\$1,131.38	\$1,694.51	
\$669.75	\$1,184.39	\$1,070.31	\$1,526.62	
\$759.30	\$1,372.70	\$1,219.35	\$1,832.75	
\$680.00	\$1,204.39	\$1,087.88	\$1,553.94	
\$718.16	\$1,290.42	\$1,147.36	\$1,719.62	
\$675.47	\$1,195.83	\$1,080.32	\$1,542.35	
\$145.90	\$145.90	\$145.90	\$145.90	

**Surcharges**

Tobacco Use Surcharge  
Spouse Waiver (AV) Surcharge

\$25.00	\$25.00	\$25.00	\$25.00	
\$0.00	\$50.00	\$0.00	\$50.00	

**Washington State Health Care Authority**

**2015 PEBB Rate Book**

PEBB Life and AD&D Rates Paid to Plan and Charged to Subscribers

<b>Employee Basic*</b>	Monthly Cost:	\$4.02
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<b>Retiree</b>	Monthly Cost:	\$7.78
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<b>Spouse/Child Basic</b>	Monthly Cost:	\$0.62
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Pub No.

51-275R, 51-403F, 51-516, 51-205, 51-575

50-100

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<b>Employee/Spouse Supplemental</b> Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments)		
Age	Non-Smoker	Smoker
<25	\$0.029	\$0.038
25-29	\$0.032	\$0.045
30-34	\$0.035	\$0.059
35-39	\$0.044	\$0.068
40-44	\$0.066	\$0.076
45-49	\$0.095	\$0.115
50-54	\$0.148	\$0.176
55-59	\$0.277	\$0.328
60-64	\$0.425	\$0.499
65-69	\$0.784	\$0.961
70+	\$1.170	\$1.562

<b>Supplemental AD&amp;D:</b>		Pub No.				
<b>Rate per Thousand \$</b>		\$0.019	\$0.029	50-100		
				Spouse Only Coverage		Per Child Coverage
	Employee Only Cost	Employee & Dependent(s) Cost		Spouse No Children	Spouse With Children	
Employee Coverage						With Spouse No Spouse
\$25,000	\$0.48	\$0.73		\$12,500	\$10,000	\$1,250 \$2,500
\$50,000	\$0.95	\$1.45		\$25,000	\$20,000	\$2,500 \$5,000
\$75,000	\$1.43	\$2.18		\$37,500	\$30,000	\$3,750 \$7,500
\$100,000	\$1.90	\$2.90		\$50,000	\$40,000	\$5,000 \$10,000
\$125,000	\$2.38	\$3.63		\$62,500	\$50,000	\$6,250 \$12,500
\$150,000	\$2.85	\$4.35		\$75,000	\$60,000	\$7,500 \$15,000
\$175,000	\$3.33	\$5.08		\$87,500	\$70,000	\$8,750 \$17,500
\$200,000	\$3.80	\$5.80		\$100,000	\$80,000	\$10,000 \$20,000
\$225,000	\$4.28	\$6.53		\$112,500	\$90,000	\$11,250 \$22,500
\$250,000	\$4.75	\$7.25		\$125,000	\$100,000	\$12,500 \$25,000

\* Represents premium paid to Plan

For State Actives, Plan A Basic coverage is paid by the employer.

For Actives from Employer Groups, ESDs, and K-12 Districts Accepting the Full Benefits Package, the premium for Plan A Basic coverage is included in the rates for the selected medical plan.

Coverage is not provided to Actives from K-12 Districts Accepting Medical Only Package.

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**2015 PEBB Rate Book**

PEBB Long Term Disability Plan - Rates Paid to Plan and Charged to Subscribers

Pub No.

**Basic Plan for Actives**

Monthly Cost\*:

**\$2.10**

**Optional Plan**

Waiting Period	TIAA/CREF or Higher Education Academic Retirement Plan Employees	TRS, PERS, & other Retirement Plan Employees
30 days	1.95%	1.54%
60 days	1.00%	0.82%
90 days	0.55%	0.45%
120 days	0.32%	0.27%
180 days	0.24%	0.21%
240 days	0.23%	0.21%
300 days	0.21%	0.19%
360 days	0.21%	0.18%

50-100

\* Represents premium paid to plan only.

For State Actives, Basic Plan coverage is funded by the state.

**Washington State Health Care Authority****2015 PEBB Rate Book****Additional Taxable Income for Non-Tax Qualified Dependents****Table 1: Employer Share Medical and Dental**

2014 Monthly State Premium Contribution for Medical and Dental for Active Employees

Additional Taxable Income for Non-Tax Qualified Dependent Coverage

		<b>Subscriber's or Partner's Child(ren)*</b>	<b>Partner and Child(ren)*</b>
<b>MEDICAL AND DENTAL PLAN</b>	<b>Partner*</b>		
All Medical Plans	\$523.00	\$411.00	\$934.00

**Table 2: Employer Share Dental Only**

Sample chart for dental only enrollment-taxable amount for dependents

		<b>Subscriber's or Partner's Child(ren)*</b>	<b>Partner and Child(ren)*</b>
<b>DENTAL PLAN</b>	<b>Partner*</b>		
All Dental Plans	\$45.00	\$45.00	\$90.00

**2015 Monthly State Contribution for Medicare Retirees (monthly state subsidy)\*\*****Additional taxable income for non-tax qualified domestic partners**

Group Health Classic	
Group Health Value	
Group Health CDHP	
Group Health Medicare Only	\$142.00
Kaiser Permanente Classic	\$147.00
Kaiser CDHP	
Uniform Medical Plan Classic	\$150.00
Uniform Medical Plan CDHP	
Plan F Retired	\$104.00
Plan F Disabled	\$150.00

\*Premiums displayed are rounded to the nearest dollar, consistent with IRS tax reporting

\*\*Retiree subsidy is limited to 50% of the total premium paid to the health plan by state law

Pub No. 50-704

**Washington State Health Care Authority**

**2015 PEBB Rate Book**

State and Higher Education Active Employee Monthly Contributions (Deductions) for Non-Tax Qualified Dependents

Table 3: Total Monthly Employee Contribution Owed for All Coverage (Pre-tax and post-tax combined)

Plan Name	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Group Health Classic	\$107.00	\$224.00	\$187.00	\$304.00
Group Health Value	\$75.00	\$160.00	\$131.00	\$216.00
Group Health CDHP	\$26.00	\$62.00	\$46.00	\$82.00
Kaiser Permanente Classic	\$125.00	\$260.00	\$219.00	\$354.00
Kaiser CDHP	\$35.00	\$80.00	\$61.00	\$106.00
Uniform Medical Plan Classic	\$84.00	\$178.00	\$147.00	\$241.00
Uniform Medical Plan CDHP	\$31.00	\$72.00	\$54.00	\$95.00

Table 4: Post-Tax Partner Share for "Subscriber and Spouse" Tier

Plan Name	Subscriber and Spouse	Subscriber	Partner
Group Health Classic	\$224.00	\$107.00	\$117.00
Group Health Value	\$160.00	\$75.00	\$85.00
Group Health CDHP	\$62.00	\$26.00	\$36.00
Kaiser Permanente Classic	\$260.00	\$125.00	\$135.00
Kaiser CDHP	\$80.00	\$35.00	\$45.00
Uniform Medical Plan Classic	\$178.00	\$84.00	\$94.00
Uniform Medical Plan CDHP	\$72.00	\$31.00	\$41.00

Table 5: Post Tax Partner Share for "Full Family" Tier

Plan Name	Full Family	Subscriber and Child(ren)	Partner
Group Health Classic	\$304.00	\$187.00	\$117.00
Group Health Value	\$216.00	\$131.00	\$85.00
Group Health CDHP	\$82.00	\$46.00	\$36.00
Kaiser Permanente Classic	\$354.00	\$219.00	\$135.00
Kaiser CDHP	\$106.00	\$61.00	\$45.00
Uniform Medical Plan Classic	\$241.00	\$147.00	\$94.00
Uniform Medical Plan CDHP	\$95.00	\$54.00	\$41.00

Table 6: Post Tax Partner and Child(ren) Share for "Full Family" Tier

Plan Name	Full Family	Subscriber	Partner and Child(ren)
Group Health Classic	\$304.00	\$107.00	\$197.00
Group Health Value	\$216.00	\$75.00	\$141.00
Group Health CDHP	\$82.00	\$26.00	\$56.00
Kaiser Permanente Classic	\$354.00	\$125.00	\$229.00
Kaiser CDHP	\$106.00	\$35.00	\$71.00
Uniform Medical Plan Classic	\$241.00	\$84.00	\$157.00
Uniform Medical Plan CDHP	\$95.00	\$31.00	\$64.00

Table 7: Post Tax Partner's Child(ren) Share for "Subscriber and Child(ren)" Tier

Plan Name	Subscriber and Child(ren)	Subscriber	Partner's Children
Group Health Classic	\$187.00	\$107.00	\$80.00
Group Health Value	\$131.00	\$75.00	\$56.00
Group Health CDHP	\$46.00	\$26.00	\$20.00
Kaiser Permanente Classic	\$219.00	\$125.00	\$94.00
Kaiser CDHP	\$61.00	\$35.00	\$26.00
Uniform Medical Plan Classic	\$147.00	\$84.00	\$63.00
Uniform Medical Plan CDHP	\$54.00	\$31.00	\$23.00