

# Washington State Health Care Authority

## 2017 PEBB Rate Book

K-12 School Districts, Educational Service Districts, Charter Schools and Other PEBB Participating Employer Groups  
Active Tiered Rates for Full Benefits Package & Medical Only Package Premium Rate Elements

Total Premium	Full Benefits Package			
	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Group Health Classic	\$ 816.88	\$ 1,488.68	\$ 1,320.73	\$ 1,992.53
Group Health Value	\$ 739.17	\$ 1,333.26	\$ 1,184.74	\$ 1,778.83
Group Health CDHP	\$ 703.64	\$ 1,255.70	\$ 1,132.27	\$ 1,626.00
Group Health SoundChoice	\$ 716.16	\$ 1,287.24	\$ 1,144.47	\$ 1,715.55
Kaiser Permanente Classic	\$ 801.46	\$ 1,457.84	\$ 1,293.75	\$ 1,950.13
Kaiser CDHP	\$ 705.19	\$ 1,258.30	\$ 1,134.61	\$ 1,629.39
Uniform Medical Plan Classic	\$ 764.01	\$ 1,382.94	\$ 1,228.21	\$ 1,847.14
Uniform Medical Plan CDHP	\$ 703.27	\$ 1,254.96	\$ 1,131.62	\$ 1,624.98
Uniform Medical Plan ACP	\$ 735.85	\$ 1,326.62	\$ 1,178.93	\$ 1,769.70

Medical Only			
Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
\$ 731.77	\$ 1,403.57	\$ 1,235.62	\$ 1,907.42
\$ 654.06	\$ 1,248.15	\$ 1,099.63	\$ 1,693.72
\$ 618.53	\$ 1,170.59	\$ 1,047.16	\$ 1,540.89
\$ 631.05	\$ 1,202.13	\$ 1,059.36	\$ 1,630.44
\$ 716.35	\$ 1,372.73	\$ 1,208.64	\$ 1,865.02
\$ 620.08	\$ 1,173.19	\$ 1,049.50	\$ 1,544.28
\$ 678.90	\$ 1,297.83	\$ 1,143.10	\$ 1,762.03
\$ 618.16	\$ 1,169.85	\$ 1,046.51	\$ 1,539.87
\$ 650.74	\$ 1,241.51	\$ 1,093.82	\$ 1,684.59

Medical Premium Rate Element	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Group Health Classic	\$ 671.80	\$ 1,343.60	\$ 1,175.65	\$ 1,847.45
Group Health Value	\$ 594.09	\$ 1,188.18	\$ 1,039.66	\$ 1,633.75
Group Health CDHP	\$ 558.56	\$ 1,110.62	\$ 987.19	\$ 1,480.92
Group Health SoundChoice	\$ 571.08	\$ 1,142.16	\$ 999.39	\$ 1,570.47
Kaiser Permanente Classic	\$ 656.38	\$ 1,312.76	\$ 1,148.67	\$ 1,805.05
Kaiser CDHP	\$ 560.11	\$ 1,113.22	\$ 989.53	\$ 1,484.31
Uniform Medical Plan Classic	\$ 618.93	\$ 1,237.86	\$ 1,083.13	\$ 1,702.06
Uniform Medical Plan CDHP	\$ 558.19	\$ 1,109.88	\$ 986.54	\$ 1,479.90
Uniform Medical Plan ACP	\$ 590.77	\$ 1,181.54	\$ 1,033.85	\$ 1,624.62

\$ 671.80	\$ 1,343.60	\$ 1,175.65	\$ 1,847.45
\$ 594.09	\$ 1,188.18	\$ 1,039.66	\$ 1,633.75
\$ 558.56	\$ 1,110.62	\$ 987.19	\$ 1,480.92
\$ 571.08	\$ 1,142.16	\$ 999.39	\$ 1,570.47
\$ 656.38	\$ 1,312.76	\$ 1,148.67	\$ 1,805.05
\$ 560.11	\$ 1,113.22	\$ 989.53	\$ 1,484.31
\$ 618.93	\$ 1,237.86	\$ 1,083.13	\$ 1,702.06
\$ 558.19	\$ 1,109.88	\$ 986.54	\$ 1,479.90
\$ 590.77	\$ 1,181.54	\$ 1,033.85	\$ 1,624.62

Premium Rate elements other than medical	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Tiered and Self-Pay Admin	\$ 4.72	\$ 4.72	\$ 4.72	\$ 4.72
Life	\$ 3.96	\$ 3.96	\$ 3.96	\$ 3.96
LTD	\$ 2.10	\$ 2.10	\$ 2.10	\$ 2.10
Dental	\$ 79.05	\$ 79.05	\$ 79.05	\$ 79.05
Retiree Subsidy Charged	\$ 55.25	\$ 55.25	\$ 55.25	\$ 55.25
Total with Medical Waived	\$ 145.08	\$ 145.08	\$ 145.08	\$ 145.08

\$ 4.72	\$ 4.72	\$ 4.72	\$ 4.72
\$ 55.25	\$ 55.25	\$ 55.25	\$ 55.25
\$ 59.97	\$ 59.97	\$ 59.97	\$ 59.97

Premium Surcharges	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Tobacco Use Premium Surcharge	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00
Spouse Premium Surcharge	\$ -	\$ 50.00	\$ -	\$ 50.00

\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00
\$ -	\$ 50.00	\$ -	\$ 50.00