

**Washington State Health Care Authority  
2017 PEBB Rate Book**

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

<b>Employee Basic*</b>	Monthly Cost:	\$3.96
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<b>Employee Optional</b> Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments)		
Age	Non-Smoker	Smoker
<25	\$0.028	\$0.037
25-29	\$0.031	\$0.043
30-34	\$0.034	\$0.057
35-39	\$0.043	\$0.066
40-44	\$0.064	\$0.073
45-49	\$0.092	\$0.111
50-54	\$0.143	\$0.170
55-59	\$0.268	\$0.317
60-64	\$0.411	\$0.482
65-69	\$0.758	\$0.929
70+	\$1.131	\$1.510

<b>Spouse/Registered Domestic Partner Life</b> Monthly Cost for Each \$1,000 of Coverage (Up to 50% of Employee Optional in \$5,000 increments)		
Age	Non-Smoker	Smoker
<25	\$0.028	\$0.037
25-29	\$0.031	\$0.043
30-34	\$0.034	\$0.057
35-39	\$0.043	\$0.066
40-44	\$0.064	\$0.073
45-49	\$0.092	\$0.111
50-54	\$0.143	\$0.170
55-59	\$0.268	\$0.317
60-64	\$0.411	\$0.482
65-69	\$0.758	\$0.929
70+	\$1.131	\$1.510

<b>Child Life</b> Monthly Cost for Each \$1,000 of Coverage (Available in \$5,000 increments)	
Age 2 weeks - 26 years	\$0.124

<b>Employee Optional AD&amp;D</b> Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments)	
Cost per \$1,000	\$0.019

<b>Spouse/Registered Domestic Partner AD&amp;D</b> Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments)	
Cost per \$1,000	\$0.019

<b>Child AD&amp;D</b> Monthly Cost for Each \$1,000 of Coverage (Available in \$5,000 increments)	
Cost per \$1,000	\$0.016

\* Represents premium paid to Plan

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

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

Coverage is not provided to Actives from Employer Groups, ESDs and K-12 School Districts Accepting Medical Only Package.

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Retiree Rates

Retiree Basic	
Monthly Cost for Each \$1,000 of Coverage (Available \$5,000 up to \$20,000 in \$5,000 increments)	
Age	Cost per \$1,000
45-49	\$0.174
50-54	\$0.267
55-59	\$0.500
60-64	\$0.767
65-69	\$1.476
70-74	\$2.394
75-79	\$3.881
80-84	\$6.286
85-89	\$10.179
90-94	\$16.489
95+	\$26.714

Legacy Retiree Plan**	Monthly Cost:	\$7.75
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\*\*All currently participating retirees in the 2016 retiree plan will have two options: 1) to be automatically enrolled in the MetLife Legacy Retiree Plan, which has the same benefit provisions as the 2016 retiree plan (i.e. age reduction schedule at three age bands), or 2) to enroll in the new Retiree Basic effective 1/1/2017.

Each currently participating retiree will have a one-time opportunity to move to the new Retiree Basic plan in November 2016. If a currently participating retiree does not affirmatively choose to move to the new Retiree Basic plan, they will be automatically enrolled in the Legacy Retiree Plan.

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

<b>Basic Plan for Actives</b>	Monthly Cost*:	\$2.10
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<b>Optional Plan</b>		
<b>Waiting Period</b>	<b>TIAA/CREF or Higher Education Academic Retirement Plan Employees</b>	<b>TRS, PERS, &amp; other Retirement Plan Employees</b>
30 days	2.60%	2.06%
60 days	1.32%	1.09%
90 days	0.72%	0.60%
120 days	0.42%	0.36%
180 days	0.32%	0.28%
240 days	0.30%	0.27%
300 days	0.28%	0.25%
360 days	0.27%	0.24%

\* Represents premium paid to plan only.

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