



Washington State Health Care Authority  
*Public Employees Benefits Board*

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August 31, 2020

TO: Personnel and Payroll Offices of Other PEBB Employer Groups

FROM: Amy Corrigan, Management Analyst 5  
PEB Outreach and Training Team

SUBJECT: Calendar Year 2021 Rates – Tiered – Medical Only

**Medical/Vision Insurance**

Based on new contracts with the health plans, the revised rates for medical and vision coverage effective January 1, 2021 are attached. As the employer, you determine how much of the total premium your employees are required to pay.

**PEBB Program Open Enrollment**

The Public Employees Benefits Board (PEBB) Program annual open enrollment is November 1-30. In October, the PEBB Program will mail the *For Your Benefit* newsletter to employees at the address on record or will send it electronically to those who subscribe to email subscription. This is the only notice the PEBB Program will send to employees about open enrollment. Information will be available on the [PEBB Program website](#) on October 1, 2020.

Employees who make online plan changes using *My Account* will not see premium rates. Instead, a pop-up box will prompt them to contact their personnel, payroll, or benefits office. To support their decisions and address the questions they may have, you may want to distribute information to your employees before the PEBB Program open enrollment starts regarding premiums they are expected to pay in 2021.

**Premium Surcharges**

The tobacco use premium surcharge will remain at \$25 per-account per month in addition to the monthly premium, regardless of the number of tobacco users in the family.

The spouse or state-registered domestic partner coverage 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 state-registered domestic partner has chosen not to enroll in their own employer-based group health insurance that is comparable to the Uniform Medical Plan (UMP) Classic.

Employees who cover a spouse or state-registered domestic partner on their 2021 coverage may be required to attest to the spouse or state-registered domestic partner coverage premium surcharge during the PEBB Program open enrollment. The PEBB Program will notify the employees of the need to attest.

**Additional Taxable Income for Non-Tax Qualified Dependents**

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.

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: Kate LaBelle

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**2021 PEBB Rate Book**

Other Employer Groups Active Tiered Rates for Medical Only Package with Surcharge Tables

Plan	Non-Medicare			
	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Kaiser Permanente NW Classic	\$ 809.03	\$ 1,549.12	\$ 1,364.10	\$ 2,104.19
Kaiser Permanente NW CDHP	\$ 682.13	\$ 1,289.67	\$ 1,152.37	\$ 1,701.58
Kaiser Permanente WA Classic	\$ 838.76	\$ 1,608.59	\$ 1,416.13	\$ 2,185.95
Kaiser Permanente WA Value	\$ 762.33	\$ 1,455.71	\$ 1,282.37	\$ 1,975.75
Kaiser Permanente WA SoundChoice	\$ 704.80	\$ 1,340.65	\$ 1,181.69	\$ 1,817.54
Kaiser Permanente WA CDHP	\$ 682.66	\$ 1,291.23	\$ 1,153.67	\$ 1,703.91
Uniform Medical Plan Classic	\$ 755.09	\$ 1,441.23	\$ 1,269.69	\$ 1,955.84
Uniform Medical Plan Plus - PSHVN	\$ 722.16	\$ 1,375.39	\$ 1,212.08	\$ 1,865.30
Uniform Medical Plan Plus - UW	\$ 722.16	\$ 1,375.39	\$ 1,212.08	\$ 1,865.30
Uniform Medical Plan CDHP	\$ 681.89	\$ 1,289.68	\$ 1,152.32	\$ 1,701.78
Uniform Medical Plan Select	\$ 686.87	\$ 1,304.80	\$ 1,150.32	\$ 1,768.25

Surcharges				
Tobacco Use Surcharge	\$ 25	\$ 25	\$ 25	\$ 25
Spouse Waiver (AV) Surcharge	\$ -	\$ 50	\$ -	\$ 50

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Additional Taxable Income for Non-Tax Qualified Dependents

**Table 1: Employer Share Medical and Dental**

2021 Monthly State Premium Contribution for Medical and Dental for Active Employees

Additional Taxable Income for Non-Tax Qualified Dependent Coverage

MEDICAL AND DENTAL PLAN	Partner*	Subscriber's or Partner's Child(ren)*	Partner and Child(ren)*
All Medical Plans	\$ 619	\$ 484	\$ 1,103

**Table 2: Employer Share Dental Only**

Sample chart for dental only enrollment-taxable amount for dependents

DENTAL PLAN	Partner*	Subscriber's or Partner's Child(ren)*	Partner and Child(ren)*
All Dental Plans	\$ 48	\$ 48	\$ 96

**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
Kaiser Permanente NW Classic	\$ 159	\$ 328	\$ 278	\$ 447
Kaiser Permanente NW CDHP	\$ 25	\$ 60	\$ 44	\$ 79
Kaiser Permanente WA Classic	\$ 189	\$ 388	\$ 331	\$ 530
Kaiser Permanente WA Value	\$ 112	\$ 234	\$ 196	\$ 318
Kaiser Permanente WA SoundChoice	\$ 55	\$ 120	\$ 96	\$ 161
Kaiser Permanente WA CDHP	\$ 26	\$ 62	\$ 46	\$ 82
Uniform Medical Plan Classic	\$ 105	\$ 220	\$ 184	\$ 299
Uniform Medical Plan Plus - PSHVN	\$ 72	\$ 154	\$ 126	\$ 208
Uniform Medical Plan Plus - UW	\$ 72	\$ 154	\$ 126	\$ 208
Uniform Medical Plan CDHP	\$ 25	\$ 60	\$ 44	\$ 79
Uniform Medical Plan Select	\$ 37	\$ 84	\$ 65	\$ 112

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

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

Plan Name	Subscriber and Spouse	Subscriber	Partner
Kaiser Permanente NW Classic	\$ 328	\$ 159	\$ 169
Kaiser Permanente NW CDHP	\$ 60	\$ 25	\$ 35
Kaiser Permanente WA Classic	\$ 388	\$ 189	\$ 199
Kaiser Permanente WA Value	\$ 234	\$ 112	\$ 122
Kaiser Permanente WA SoundChoice	\$ 120	\$ 55	\$ 65
Kaiser Permanente WA CDHP	\$ 62	\$ 26	\$ 36
Uniform Medical Plan Classic	\$ 220	\$ 105	\$ 115
Uniform Medical Plan Plus - PSHVN	\$ 154	\$ 72	\$ 82
Uniform Medical Plan Plus - UW	\$ 154	\$ 72	\$ 82
Uniform Medical Plan CDHP	\$ 60	\$ 25	\$ 35
Uniform Medical Plan Select	\$ 84	\$ 37	\$ 47

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

Plan Name	Full Family	Subscriber	Partner and Child(ren)
Kaiser Permanente NW Classic	\$ 447	\$ 159	\$ 288
Kaiser Permanente NW CDHP	\$ 79	\$ 25	\$ 54
Kaiser Permanente WA Classic	\$ 530	\$ 189	\$ 341
Kaiser Permanente WA Value	\$ 318	\$ 112	\$ 206
Kaiser Permanente WA SoundChoice	\$ 161	\$ 55	\$ 106
Kaiser Permanente WA CDHP	\$ 82	\$ 26	\$ 56
Uniform Medical Plan Classic	\$ 299	\$ 105	\$ 194
Uniform Medical Plan Plus - PSHVN	\$ 208	\$ 72	\$ 136
Uniform Medical Plan Plus - UW	\$ 208	\$ 72	\$ 136
Uniform Medical Plan CDHP	\$ 79	\$ 25	\$ 54
Uniform Medical Plan Select	\$ 112	\$ 37	\$ 75

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

Plan Name	Full Family	Subscriber and Child(ren)	Partner
Kaiser Permanente NW Classic	\$ 447	\$ 278	\$ 169
Kaiser Permanente NW CDHP	\$ 79	\$ 44	\$ 35
Kaiser Permanente WA Classic	\$ 530	\$ 331	\$ 199
Kaiser Permanente WA Value	\$ 318	\$ 196	\$ 122
Kaiser Permanente WA SoundChoice	\$ 161	\$ 96	\$ 65
Kaiser Permanente WA CDHP	\$ 82	\$ 46	\$ 36
Uniform Medical Plan Classic	\$ 299	\$ 184	\$ 115
Uniform Medical Plan Plus - PSHVN	\$ 208	\$ 126	\$ 82
Uniform Medical Plan Plus - UW	\$ 208	\$ 126	\$ 82
Uniform Medical Plan CDHP	\$ 79	\$ 44	\$ 35
Uniform Medical Plan Select	\$ 112	\$ 65	\$ 47

**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
Kaiser Permanente NW Classic	\$ 278	\$ 159	\$ 119
Kaiser Permanente NW CDHP	\$ 44	\$ 25	\$ 19
Kaiser Permanente WA Classic	\$ 331	\$ 189	\$ 142
Kaiser Permanente WA Value	\$ 196	\$ 112	\$ 84
Kaiser Permanente WA SoundChoice	\$ 96	\$ 55	\$ 41
Kaiser Permanente WA CDHP	\$ 46	\$ 26	\$ 20
Uniform Medical Plan Classic	\$ 184	\$ 105	\$ 79
Uniform Medical Plan Plus - PSHVN	\$ 126	\$ 72	\$ 54
Uniform Medical Plan Plus - UW	\$ 126	\$ 72	\$ 54
Uniform Medical Plan CDHP	\$ 44	\$ 25	\$ 19
Uniform Medical Plan Select	\$ 65	\$ 37	\$ 28