



Washington State Health Care Authority
Public Employees Benefits Board
P.O. Box 42684 • Olympia, Washington 98504-2684
www.hca.wa.gov/public-employee-benefits

May 14, 2018

TO: Personnel, Payroll, and Insurance Offices of Counties, Municipalities, Other Political Subdivisions, and Tribal Governments

FROM: Amy Corrigan
PEBB Outreach & Training Team

SUBJECT: Fiscal Year (FY) 2018-19 PEBB Program Rates – Composite

Beginning July 1, 2018 through June 30, 2019, your employer base rate will be \$916 per employee per month. These rates were established in the ESSB 6032 65th Legislature, 2018 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 employers on “tiered rates,” the employer group rate surcharge, employee contributions, COBRA/Continuation coverage (LWOP) rates, which remain the same until January 1, 2019, when the new plan year begins. You will receive 2019 rates in the fall, prior to the PEBB Program open enrollment.

In addition to the employee medical plan premium, employees may be subject to a monthly \$25-per-account tobacco use and/or \$50 spousal or state-registered domestic partner coverage premium surcharge.

As a reminder, you must pay the full employer base-funding rate for every eligible employee as outlined in Title 182 WAC, including for those who waive 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: Karin Freeman, PEBB Fiscal Information and Data Analyst

Washington State Health Care Authority

**Rates for Counties, Municipalities, Other Political Subdivisions and Tribal Governments
July 1, 2018 through December 31, 2018**

Excluding Tobacco and Spouse Waiver (AV) Surcharges	Total Premium with Employer Group Rate Surcharge			
	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Kaiser Permanente NW Classic	\$1,073	\$1,240	\$1,191	\$1,358
Kaiser Permanente NW CDHP	\$963	\$1,020	\$998	\$1,055
Kaiser Permanente WA Classic	\$1,098	\$1,290	\$1,235	\$1,427
Kaiser Permanente WA Value	\$1,014	\$1,122	\$1,088	\$1,196
Kaiser Permanente WA SoundChoice	\$987	\$1,068	\$1,040	\$1,121
Kaiser Permanente WA CDHP	\$961	\$1,016	\$995	\$1,050
Uniform Medical Plan Classic	\$1,038	\$1,170	\$1,130	\$1,262
Uniform Medical Plan ACP	\$981	\$1,056	\$1,030	\$1,105
Uniform Medical Plan CDHP	\$961	\$1,016	\$995	\$1,050
Medical Waived	\$916	\$916	\$916	\$916
Surcharges				
Tobacco Use Surcharge	\$25	\$25	\$25	\$25
Spouse Waiver (AV) Surcharge	\$0	\$50	\$0	\$50

*Kaiser Foundation Health Plan of the Northwest, with plans offered in Clark and Cowlitz counties in WA and the Portland OR area

**or state-registered domestic partner