



Washington State Health Care Authority
Public Employees Benefits Board

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August 18, 2022

TO: Personnel and Payroll Offices of Educational Service Districts –
Nonrepresented employees

FROM: Amy Corrigan, Management Analyst 5
PEBB Program Outreach & Training Team

SUBJECT: Fiscal Year 2022-23 PEBB Program Rates – Composite

Overview

The monthly base rate of \$1,130 per eligible employee for health care contributions for fiscal year 2022-23 will remain unchanged until July 1, 2023.

Medical/Dental Insurance

Based on new contracts with the health plans, the revised rates for medical and dental coverage effective January 1, 2023, are attached. As the employer, you determine the portion 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 the email subscription. This is the only notice the PEBB Program will send employees about open enrollment. Information will be available on the [PEBB Program website](#) in October.

Employees who make an online plan change using *My Account* will not see premium rates. Instead, a pop-up box will prompt them to contact their personnel or payroll 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 will be expected to pay in 2023.

Premium Surcharges

The tobacco use premium surcharge will remain at \$25 per month per account 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 2023 medical coverage may be required to attest to the spouse or state-registered domestic partner coverage premium surcharge during the PEBB Program annual open enrollment. In October, the PEBB Program will mail a letter to employees who need to attest. Employees can also find whether they need to re-attest in PEBB My Account during annual open enrollment.

Life, Accidental Death and Dismemberment (AD&D), and Long-Term Disability (LTD) Insurance

Employee's supplemental life and AD&D insurance premiums will remain the same for the 2023 plan year (unless an employee changes age brackets or increases their coverage).

The rate schedule for life insurance and Accidental Death and Dismemberment (AD&D) is attached.

Employee's supplemental LTD premiums will remain the same for the 2023 plan year.

The rate schedule for LTD is attached.

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.

Attachments
c: Kate LaBelle

Washington State Health Care Authority

2023 PEBB Rate Book

Composite Active Rates for ESD's Non-represented employees (for September 2022 through June 2023 only)

| Plans | Total Premium: January through June 2023 | | | |
|-----------------------------------|--|-----------------------|---------------------------|-------------|
| | Subscriber | Subscriber and Spouse | Subscriber and Child(ren) | Full Family |
| Kaiser Permanente NW Classic | \$ 1,302 | \$ 1,484 | \$ 1,431 | \$ 1,613 |
| Kaiser Permanente NW CDHP | \$ 1,155 | \$ 1,190 | \$ 1,174 | \$ 1,209 |
| Kaiser Permanente WA Classic | \$ 1,297 | \$ 1,474 | \$ 1,422 | \$ 1,599 |
| Kaiser Permanente WA Value | \$ 1,224 | \$ 1,328 | \$ 1,295 | \$ 1,399 |
| Kaiser Permanente WA SoundChoice | \$ 1,176 | \$ 1,232 | \$ 1,211 | \$ 1,267 |
| Kaiser Permanente WA CDHP | \$ 1,155 | \$ 1,190 | \$ 1,174 | \$ 1,209 |
| Uniform Medical Plan Classic | \$ 1,265 | \$ 1,410 | \$ 1,366 | \$ 1,511 |
| Uniform Medical Plan Plus - PSHVN | \$ 1,227 | \$ 1,334 | \$ 1,300 | \$ 1,407 |
| Uniform Medical Plan Plus - UW | \$ 1,227 | \$ 1,334 | \$ 1,300 | \$ 1,407 |
| Uniform Medical Plan CDHP | \$ 1,159 | \$ 1,198 | \$ 1,181 | \$ 1,220 |
| Uniform Medical Plan Select | \$ 1,189 | \$ 1,258 | \$ 1,233 | \$ 1,302 |

| Surcharges | | | | |
|------------------------------|------|------|------|------|
| Tobacco Use Surcharge | \$25 | \$25 | \$25 | \$25 |
| Spouse Waiver (AV) Surcharge | \$0 | \$50 | \$0 | \$50 |

| Plans | 09/01/22 through 06/30/23 | For Reference State Employee Contributions CY 2023 | | | |
|-----------------------------------|---------------------------|--|------------|-----------------------|---------------------------|
| | | Base Rate | Subscriber | Subscriber and Spouse | Subscriber and Child(ren) |
| Kaiser Permanente NW Classic | \$ 1,130 | \$ 172 | \$ 354 | \$ 301 | \$ 483 |
| Kaiser Permanente NW CDHP | \$ 1,130 | \$ 25 | \$ 60 | \$ 44 | \$ 79 |
| Kaiser Permanente WA Classic | \$ 1,130 | \$ 167 | \$ 344 | \$ 292 | \$ 469 |
| Kaiser Permanente WA Value | \$ 1,130 | \$ 94 | \$ 198 | \$ 165 | \$ 269 |
| Kaiser Permanente WA SoundChoice | \$ 1,130 | \$ 46 | \$ 102 | \$ 81 | \$ 137 |
| Kaiser Permanente WA CDHP | \$ 1,130 | \$ 25 | \$ 60 | \$ 44 | \$ 79 |
| Uniform Medical Plan Classic | \$ 1,130 | \$ 135 | \$ 280 | \$ 236 | \$ 381 |
| Uniform Medical Plan Plus - PSHVN | \$ 1,130 | \$ 97 | \$ 204 | \$ 170 | \$ 277 |
| Uniform Medical Plan Plus - UW | \$ 1,130 | \$ 97 | \$ 204 | \$ 170 | \$ 277 |
| Uniform Medical Plan CDHP | \$ 1,130 | \$ 29 | \$ 68 | \$ 51 | \$ 90 |
| Uniform Medical Plan Select | \$ 1,130 | \$ 59 | \$ 128 | \$ 103 | \$ 172 |

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

Washington State Health Care Authority

2023 PEBB Rate Book

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

| | | |
|------------------------|---------------|---------|
| Employee Basic* | Monthly Cost: | \$3.955 |
|------------------------|---------------|---------|

| Employee Supplemental | | |
|---|------------|----------|
| Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments) | | |
| Age | Non-Smoker | Smoker |
| <25 | \$ 0.030 | \$ 0.039 |
| 25-29 | \$ 0.033 | \$ 0.046 |
| 30-34 | \$ 0.036 | \$ 0.060 |
| 35-39 | \$ 0.045 | \$ 0.069 |
| 40-44 | \$ 0.067 | \$ 0.077 |
| 45-49 | \$ 0.097 | \$ 0.117 |
| 50-54 | \$ 0.151 | \$ 0.179 |
| 55-59 | \$ 0.282 | \$ 0.334 |
| 60-64 | \$ 0.432 | \$ 0.508 |
| 65-69 | \$ 0.798 | \$ 0.978 |
| 70+ | \$ 1.190 | \$ 1.589 |

| Spouse/Registered Domestic Partner Life | | |
|---|------------|----------|
| Monthly Cost for Each \$1,000 of Coverage (Up to 50% of Employee Supplemental in \$5,000 increments) | | |
| Age | Non-Smoker | Smoker |
| <25 | \$ 0.030 | \$ 0.039 |
| 25-29 | \$ 0.033 | \$ 0.046 |
| 30-34 | \$ 0.036 | \$ 0.060 |
| 35-39 | \$ 0.045 | \$ 0.069 |
| 40-44 | \$ 0.067 | \$ 0.077 |
| 45-49 | \$ 0.097 | \$ 0.117 |
| 50-54 | \$ 0.151 | \$ 0.179 |
| 55-59 | \$ 0.282 | \$ 0.334 |
| 60-64 | \$ 0.432 | \$ 0.508 |
| 65-69 | \$ 0.798 | \$ 0.978 |
| 70+ | \$ 1.190 | \$ 1.589 |

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

| Employee Supplemental AD&D | |
|---|----------|
| Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments) | |
| Cost per \$1,000 | \$ 0.019 |

| Spouse/Registered Domestic Partner AD&D | |
|---|----------|
| Monthly Cost for Each \$1,000 of Coverage (Available in \$10,000 increments) | |
| Cost per \$1,000 | \$ 0.019 |

| Child AD&D | |
|--|----------|
| 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, 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 Employer Groups Accepting Medical Only Package.

Washington State Health Care Authority

2023 PEBB Rate Book

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

| | | |
|-------------------------------|----------------|--------|
| Basic Plan for Actives | Monthly Cost*: | \$2.10 |
|-------------------------------|----------------|--------|

| Optional Plan | TIAA/CREF or Higher Education Academic Retirement Plan Employees | | TRS, PERS, & other Retirement Plan Employees | |
|----------------|--|------------------------|--|------------------------|
| | 60% Benefit (default) | 50% Benefit (buy-down) | 60% Benefit (default) | 50% Benefit (buy-down) |
| Waiting Period | | | | |
| 90 days | 0.0059 | 0.0035 | 0.0047 | 0.0028 |

* Represents premium paid to plan only.

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

CWU and EWU included in higher-ed

Washington State Health Care Authority
2023 PEBB Rate Book
 Additional Taxable Income for Non-Tax Qualified Dependents

Table 1: Employer Share Medical and Dental

2023 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 | \$ 704.00 | \$ 548.00 | \$ 1,252.00 |

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 | \$ 49.00 | \$ 49.00 | \$ 98.00 |

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 | \$ 172 | \$ 354 | \$ 301 | \$ 483 |
| Kaiser Permanente NW CDHP | \$ 25 | \$ 60 | \$ 44 | \$ 79 |
| Kaiser Permanente WA Classic | \$ 167 | \$ 344 | \$ 292 | \$ 469 |
| Kaiser Permanente WA Value | \$ 94 | \$ 198 | \$ 165 | \$ 269 |
| Kaiser Permanente WA SoundChoice | \$ 46 | \$ 102 | \$ 81 | \$ 137 |
| Kaiser Permanente WA CDHP | \$ 25 | \$ 60 | \$ 44 | \$ 79 |
| Uniform Medical Plan Classic | \$ 135 | \$ 280 | \$ 236 | \$ 381 |
| Uniform Medical Plan Plus - PSHVN | \$ 97 | \$ 204 | \$ 170 | \$ 277 |
| Uniform Medical Plan Plus - UW | \$ 97 | \$ 204 | \$ 170 | \$ 277 |
| Uniform Medical Plan CDHP | \$ 29 | \$ 68 | \$ 51 | \$ 90 |
| Uniform Medical Plan Select | \$ 59 | \$ 128 | \$ 103 | \$ 172 |

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

| Plan Name | Subscriber and Spouse | Subscriber | Partner |
|-----------------------------------|-----------------------|------------|---------|
| Kaiser Permanente NW Classic | \$ 354 | \$ 172 | \$ 182 |
| Kaiser Permanente NW CDHP | \$ 60 | \$ 25 | \$ 35 |
| Kaiser Permanente WA Classic | \$ 344 | \$ 167 | \$ 177 |
| Kaiser Permanente WA Value | \$ 198 | \$ 94 | \$ 104 |
| Kaiser Permanente WA SoundChoice | \$ 102 | \$ 46 | \$ 56 |
| Kaiser Permanente WA CDHP | \$ 60 | \$ 25 | \$ 35 |
| Uniform Medical Plan Classic | \$ 280 | \$ 135 | \$ 145 |
| Uniform Medical Plan Plus - PSHVN | \$ 204 | \$ 97 | \$ 107 |
| Uniform Medical Plan Plus - UW | \$ 204 | \$ 97 | \$ 107 |
| Uniform Medical Plan CDHP | \$ 68 | \$ 29 | \$ 39 |
| Uniform Medical Plan Select | \$ 128 | \$ 59 | \$ 69 |

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

| Plan Name | Full Family | Subscriber and Child(ren) | Partner |
|-----------------------------------|-------------|---------------------------|---------|
| Kaiser Permanente NW Classic | \$ 483 | \$ 301 | \$ 182 |
| Kaiser Permanente NW CDHP | \$ 79 | \$ 44 | \$ 35 |
| Kaiser Permanente WA Classic | \$ 469 | \$ 292 | \$ 177 |
| Kaiser Permanente WA Value | \$ 269 | \$ 165 | \$ 104 |
| Kaiser Permanente WA SoundChoice | \$ 137 | \$ 81 | \$ 56 |
| Kaiser Permanente WA CDHP | \$ 79 | \$ 44 | \$ 35 |
| Uniform Medical Plan Classic | \$ 381 | \$ 236 | \$ 145 |
| Uniform Medical Plan Plus - PSHVN | \$ 277 | \$ 170 | \$ 107 |
| Uniform Medical Plan Plus - UW | \$ 277 | \$ 170 | \$ 107 |
| Uniform Medical Plan CDHP | \$ 90 | \$ 51 | \$ 39 |
| Uniform Medical Plan Select | \$ 172 | \$ 103 | \$ 69 |

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 | \$ 483 | \$ 172 | \$ 311 |
| Kaiser Permanente NW CDHP | \$ 79 | \$ 25 | \$ 54 |
| Kaiser Permanente WA Classic | \$ 469 | \$ 167 | \$ 302 |
| Kaiser Permanente WA Value | \$ 269 | \$ 94 | \$ 175 |
| Kaiser Permanente WA SoundChoice | \$ 137 | \$ 46 | \$ 91 |
| Kaiser Permanente WA CDHP | \$ 79 | \$ 25 | \$ 54 |
| Uniform Medical Plan Classic | \$ 381 | \$ 135 | \$ 246 |
| Uniform Medical Plan Plus - PSHVN | \$ 277 | \$ 97 | \$ 180 |
| Uniform Medical Plan Plus - UW | \$ 277 | \$ 97 | \$ 180 |
| Uniform Medical Plan CDHP | \$ 90 | \$ 29 | \$ 61 |
| Uniform Medical Plan Select | \$ 172 | \$ 59 | \$ 113 |

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 | \$ 301 | \$ 172 | \$ 129 |
| Kaiser Permanente NW CDHP | \$ 44 | \$ 25 | \$ 19 |
| Kaiser Permanente WA Classic | \$ 292 | \$ 167 | \$ 125 |
| Kaiser Permanente WA Value | \$ 165 | \$ 94 | \$ 71 |
| Kaiser Permanente WA SoundChoice | \$ 81 | \$ 46 | \$ 35 |
| Kaiser Permanente WA CDHP | \$ 44 | \$ 25 | \$ 19 |
| Uniform Medical Plan Classic | \$ 236 | \$ 135 | \$ 101 |
| Uniform Medical Plan Plus - PSHVN | \$ 170 | \$ 97 | \$ 73 |
| Uniform Medical Plan Plus - UW | \$ 170 | \$ 97 | \$ 73 |
| Uniform Medical Plan CDHP | \$ 51 | \$ 29 | \$ 22 |
| Uniform Medical Plan Select | \$ 103 | \$ 59 | \$ 44 |