

2024 PEBB Continuation Coverage (Employer Groups Ended Participation) Monthly Premiums



Effective January 1, 2024

- Kaiser Foundation Health Plan of the Northwest (Kaiser Permanente NW) offers plans in Clark and Cowlitz counties in Washington and select counties in Oregon. Kaiser Permanente NW Medicare plans have a larger service area.
- UMP is administered by Regence BlueShield and Washington State Rx Services.
- The term spouse is interchangeable with State Registered Domestic Partner (SRDP).

Non-Medicare medical plan premiums (for members not enrolled in Medicare)

	Managed Care Plans						Preferred Provider Organization (PPO) Plans			
	Kaiser Foundation Health Plan of the Northwest		Kaiser Foundation Health Plan of Washington				Uniform Medical Plan			
	Classic	CDHP	Classic	CDHP	SoundChoice	Value	Classic	CDHP	Select	UMP Plus

Monthly premiums

Subscriber only	\$1,039.18	\$907.72	\$933.56	\$738.98	\$777.41	\$919.37	\$831.68	\$747.74	\$766.61	\$816.50
Subscriber & spouse	\$2,072.40	\$1,808.12	\$1,861.16	\$1,470.63	\$1,548.87	\$1,832.77	\$1,657.40	\$1,488.26	\$1,527.27	\$1,627.04
Subscriber & children	\$1,814.10	\$1,597.60	\$1,629.26	\$1,302.30	\$1,356.00	\$1,604.42	\$1,450.97	\$1,317.73	\$1,337.10	\$1,424.41
Subscriber, spouse, & children	\$2,847.32	\$2,439.67	\$2,556.86	\$1,975.63	\$2,127.45	\$2,517.83	\$2,276.69	\$1,999.87	\$2,097.76	\$2,234.95

Medical premium surcharges (for non-Medicare subscribers only)

Two premium surcharges may apply in addition to your monthly medical premium (if you, the subscriber, are not enrolled in Medicare Part A and Part B). You will be charged for them if the conditions described below apply, or if you do not attest to the surcharges when required. Visit Surcharges on HCA's website at hca.wa.gov/pebb-continuation for more information.

- A monthly \$25-per-account medical premium surcharge will apply if you or any dependent (age 13 and older) enrolled in PEBB medical coverage uses tobacco products.
- A monthly \$50 medical premium surcharge will apply if you enroll a spouse or state-registered domestic partner in PEBB medical coverage, and they have chosen not to enroll in another employer-based group medical plan that is comparable to PEBB's UMP Classic.

Dental plan premiums

With medical coverage

	Managed Care Plans		Preferred Provider Organization (PPO) Plans
	DeltaCare	Willamette Dental Group	Uniform Dental Plan
Monthly premiums			
Subscriber only	\$41.50	\$48.87	\$48.92
Subscriber & spouse	\$83.00	\$97.74	\$97.84
Subscriber & children	\$83.00	\$97.74	\$97.84
Subscriber, spouse, & children	\$124.50	\$146.61	\$146.76

Dental plan premiums

Dental coverage only

	Managed Care Plans		Preferred Provider Organization (PPO) Plans
	DeltaCare	Willamette Dental Group	Uniform Dental Plan
Monthly premiums			
Subscriber only	\$47.46	\$54.83	\$54.88
Subscriber & spouse	\$88.96	\$103.70	\$103.80
Subscriber & children	\$88.96	\$103.70	\$103.80
Subscriber, spouse, & children	\$130.46	\$152.57	\$152.72

Medicare medical plan premiums

Special requirements for Medicare premiums

- At least one member on your account must be enrolled in Medicare Part A and Part B.
- UnitedHealthcare plans are Medicare Advantage Part D (MAPD) plans. If a UnitedHealthcare Medicare plan is selected, non-Medicare eligible members are enrolled in UMP Classic. The rates reflect the total due, including premiums for both plans.

For more information on this requirement, contact your medical plan's customer service department. **Note:** These Medicare premiums do not include your Medicare Part B premium.

* If a Kaiser Permanente Washington member is enrolled in Medicare Part A and Part B, and other enrolled members are not eligible for Medicare, the non-Medicare members must enroll in Kaiser Permanente Washington Classic, SoundChoice, or Value plan. The subscriber will pay a combined Medicare and non-Medicare premium.

If a Kaiser Permanente Washington member is enrolled in Medicare Part A and Part B, and other enrolled members are not eligible for Medicare, the non-Medicare members must enroll in Kaiser Permanente Washington Classic, SoundChoice, or Value plan. The subscriber will pay a combined Medicare and non-Medicare premium

	Plans							
	Kaiser Foundation Health Plan of the Northwest Senior Advantage	Kaiser Foundation Health Plan of Washington				Uniform Medical Plan Classic	UnitedHealthcare	
		Classic	Medicare Advantage	SoundChoice	Value		PEBB Balance	PEBB Complete

Subscriber only

1 eligible	\$376.95	N/A*	\$371.29	N/A*	N/A*	\$715.94	\$265.34	\$315.21
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Subscriber and spouse

1 eligible	\$1,410.17#	\$1,298.89	N/A*	\$1,142.74	\$1,284.70	\$1,541.66	\$1,091.06	\$1,140.93
2 eligible	\$747.94	N/A*	\$736.62	N/A*	N/A*	\$1,425.92	\$524.72	\$624.46

Subscriber and children

1 eligible	\$1,151.87#	\$1,066.99	N/A*	\$949.88	\$1,056.34	\$1,335.23	\$884.63	\$934.50
2 eligible	\$747.94	N/A*	\$736.62	N/A*	N/A*	\$1,425.92	\$524.72	\$624.46

Subscriber, spouse,⁵ and children

1 eligible	\$2,185.09*	\$1,994.59	N/A*	\$1,721.33	\$1,969.75	\$2,160.95	\$1,710.35	\$1,760.22
2 eligible	\$1,522.86*	\$1,432.32	N/A*	\$1,315.21	\$1,421.67	\$2,045.21	\$1,144.01	\$1,243.75
3 eligible	\$1,118.93	N/A*	\$1,101.95	N/A*	N/A*	\$2,135.90	\$784.10	\$933.71

Medicare supplement plan premiums

If a Medicare supplement plan is selected, non-Medicare members are enrolled in UMP Classic. The rates shown reflect the total due, including premiums for both plans. **Note:** These Medicare premiums do not include your Medicare Part B premium.

	Premera Blue Cross			
	Plan F (closed to new members)		Plan G	
	Age 65 or older, eligible by age	Under age 65, eligible by disability	Age 65 or older, eligible by age	Under age 65, eligible by disability
Subscriber only				
1 Medicare eligible	\$232.14	\$390.45	\$198.02	\$332.45
Subscriber and spouse				
1 Medicare eligible	\$1,057.86	\$1,216.17	\$1,023.74	\$1,158.17
2 Medicare eligible: 1 retired, 1 disabled	\$616.63	\$616.63	\$524.51	\$524.51
2 Medicare eligible	\$458.32	\$774.94	\$390.08	\$658.94
Subscriber and children				
1 Medicare eligible	\$851.43	\$1,009.74	\$817.31	\$951.74
Subscriber, spouse, and children				
1 Medicare eligible	\$1,677.15	\$1,835.46	\$1,643.03	\$1,777.46
2 Medicare eligible: 1 retired, 1 disabled	\$1,235.92	\$1,235.92	\$1,143.80	\$1,143.80
2 Medicare eligible	\$1,077.61	\$1,394.23	\$1,009.37	\$1,278.23

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