



## 2020 SEBB Continuation Coverage Medical Plan Premiums and Deductibles Available by County



All continuation coverage enrollees will be offered a selection of plans based on their county of residence. Some SEBB Continuation Coverage (Unpaid Leave) enrollees, including those who live outside Washington State, may have more plan options if they are on unpaid leave from a district that crosses county lines or is in a county that borders Idaho or Oregon (see the *SEBB Medical Plans Available by School District* chart for more information). Be sure to call the medical plan(s) you are interested in to ask about provider availability.

### Adams, Asotin, Chelan, Clallam, Ferry, Garfield, Grant, Lincoln, Okanogan, Pend Oreille, Skamania, Stevens, Wahkiakum

Plan	Continuation coverage monthly premium				Annual deductible
	Subscriber	Subscriber & spouse <sup>1</sup>	Subscriber & children <sup>2</sup>	Subscriber, spouse <sup>1</sup> & children <sup>2</sup>	Subscriber/family
Premera High PPO	\$630.34	\$1,254.90	\$1,098.76	\$1,879.47	\$750/\$1,875
Premera Standard PPO	\$582.51	\$1,159.24	\$1,015.06	\$1,735.98	\$1,250/\$3,125
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

### Benton, Columbia, Franklin, Walla Walla, Whitman

Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
Kaiser Permanente WA Core 3	\$650.01	\$1,294.25	\$1,133.19	\$1,938.49	\$250/\$750
Premera High PPO	\$630.34	\$1,254.90	\$1,098.76	\$1,879.47	\$750/\$1,875
Premera Standard PPO	\$582.51	\$1,159.24	\$1,015.06	\$1,735.98	\$1,250/\$3,125
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

### Clark

Kaiser Permanente NW 1	\$588.52	\$1,171.27	\$1,025.58	\$1,754.02	\$1,250/\$2,500
Kaiser Permanente NW 2	\$601.31	\$1,196.85	\$1,047.97	\$1,792.39	\$750/\$1,500
Kaiser Permanente NW 3	\$666.54	\$1,327.31	\$1,162.12	\$1,988.08	\$125/\$250
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> You pay the monthly medical premium shown regardless of how many children you enroll.

<sup>3</sup> Administered by Regence BlueShield

## Cowlitz

Plan	Continuation coverage monthly premium				Annual deductible
	Subscriber (employee only)	Subscriber & spouse <sup>1</sup>	Subscriber & children <sup>2</sup>	Subscriber, spouse <sup>1</sup> & children <sup>2</sup>	Subscriber/family
Kaiser Permanente NW 1	\$588.52	\$1,171.27	\$1,025.58	\$1,754.02	\$1,250/\$2,500
Kaiser Permanente NW 2	\$601.31	\$1,196.85	\$1,047.97	\$1,792.39	\$750/\$1,500
Kaiser Permanente NW 3	\$666.54	\$1,327.31	\$1,162.12	\$1,988.08	\$125/\$250
Premera High PPO	\$630.34	\$1,254.90	\$1,098.76	\$1,879.47	\$750/\$1,875
Premera Standard PPO	\$582.51	\$1,159.24	\$1,015.06	\$1,735.98	\$1,250/\$3,125
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

## Douglass, Klickitat, San Juan

UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

## Grays Harbor, Jefferson, Pacific

Premera Standard PPO	\$582.51	\$1,159.24	\$1,015.06	\$1,735.98	\$1,250/\$3,125
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

## Island

Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
Kaiser Permanente WA Core 3	\$650.01	\$1,294.25	\$1,133.19	\$1,938.49	\$250/\$750
Kaiser Permanente WA Options Access PPO 1	\$599.71	\$1,193.65	\$1,045.17	\$1,787.59	\$1,250/\$3,750
Kaiser Permanente WA Options Access PPO 2	\$629.44	\$1,253.11	\$1,097.19	\$1,876.78	\$750/\$2,250
Kaiser Permanente WA Options Access PPO 3	\$676.78	\$1,347.79	\$1,180.04	\$2,018.80	\$250/\$750
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> You pay the monthly medical premium shown regardless of how many children you enroll.

<sup>3</sup> Administered by Regence BlueShield

## King, Kitsap

Plan	Continuation coverage monthly premium				Annual deductible
	Subscriber (employee only)	Subscriber & spouse <sup>1</sup>	Subscriber & children <sup>2</sup>	Subscriber, spouse <sup>1</sup> & children <sup>2</sup>	Subscriber/family
Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
Kaiser Permanente WA Sound Choice	\$609.28	\$1,212.79	\$1,061.91	\$1,816.30	\$125/\$375
Kaiser Permanente WA Options Access PPO 1	\$599.71	\$1,193.65	\$1,045.17	\$1,787.59	\$1,250/\$3,750
Kaiser Permanente WA Options Access PPO 2	\$629.44	\$1,253.11	\$1,097.19	\$1,876.78	\$750/\$2,250
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Premera Standard PPO	\$582.51	\$1,159.24	\$1,015.06	\$1,735.98	\$1,250/\$3,125
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800
UMP Plus–PSHVN <sup>3</sup>	\$628.88	\$1,252.00	\$1,096.22	\$1,875.11	\$125/\$375
UMP Plus–UW Medicine ACN <sup>3</sup>	\$628.88	\$1,252.00	\$1,096.22	\$1,875.11	\$125/\$375

## Kittitas

Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
Kaiser Permanente WA Core 3	\$650.01	\$1,294.25	\$1,133.19	\$1,938.49	\$250/\$750
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> You pay the monthly medical premium shown regardless of how many children you enroll.

<sup>3</sup> Administered by Regence BlueShield

**Lewis, Mason, Whatcom**

Plan	Continuation coverage monthly premium				Annual deductible
	Subscriber (employee only)	Subscriber & spouse <sup>1</sup>	Subscriber & children <sup>2</sup>	Subscriber, spouse <sup>1</sup> & children <sup>2</sup>	Subscriber/family
Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
Kaiser Permanente WA Core 3	\$650.01	\$1,294.25	\$1,133.19	\$1,938.49	\$250/\$750
Kaiser Permanente WA Options Access PPO 1	\$599.71	\$1,193.65	\$1,045.17	\$1,787.59	\$1,250/\$3,750
Kaiser Permanente WA Options Access PPO 2	\$629.44	\$1,253.11	\$1,097.19	\$1,876.78	\$750/\$2,250
Kaiser Permanente WA Options Access PPO 3	\$676.78	\$1,347.79	\$1,180.04	\$2,018.80	\$250/\$750
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UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800

**Pierce, Thurston**

Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
Kaiser Permanente WA Sound Choice	\$609.28	\$1,212.79	\$1,061.91	\$1,816.30	\$125/\$375
Kaiser Permanente WA Options Access PPO 1	\$599.71	\$1,193.65	\$1,045.17	\$1,787.59	\$1,250/\$3,750
Kaiser Permanente WA Options Access PPO 2	\$629.44	\$1,253.11	\$1,097.19	\$1,876.78	\$750/\$2,250
Kaiser Permanente WA Options Access PPO 3	\$676.78	\$1,347.79	\$1,180.04	\$2,018.80	\$250/\$750
Premera High PPO	\$630.34	\$1,254.90	\$1,098.76	\$1,879.47	\$750/\$1,875
Premera Peak Care EPO	\$591.39	\$1,177.01	\$1,030.60	\$1,762.63	\$750/\$1,875
Premera Standard PPO	\$582.51	\$1,159.24	\$1,015.06	\$1,735.98	\$1,250/\$3,125
UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
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UMP Plus–PSHVN <sup>3</sup>	\$628.88	\$1,252.00	\$1,096.22	\$1,875.11	\$125/\$375
UMP Plus–UW Medicine ACN <sup>3</sup>	\$628.88	\$1,252.00	\$1,096.22	\$1,875.11	\$125/\$375

<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> You pay the monthly medical premium shown regardless of how many children you enroll.

<sup>3</sup> Administered by Regence BlueShield

## Skagit

Plan	Continuation coverage monthly premium				Annual deductible
	Subscriber (employee only)	Subscriber & spouse <sup>1</sup>	Subscriber & children <sup>2</sup>	Subscriber, spouse <sup>1</sup> & children <sup>2</sup>	Subscriber/family
Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
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UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800
UMP Plus–UW Medicine ACN <sup>3</sup>	\$628.88	\$1,252.00	\$1,096.22	\$1,875.11	\$125/\$375

## Snohomish

Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
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<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> You pay the monthly medical premium shown regardless of how many children you enroll.

<sup>3</sup> Administered by Regence BlueShield

## Spokane

Plan	Continuation coverage monthly premium				Annual deductible
	Subscriber (employee only)	Subscriber & spouse <sup>1</sup>	Subscriber & children <sup>2</sup>	Subscriber, spouse <sup>1</sup> & children <sup>2</sup>	Subscriber/family
Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
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UMP Achieve 2 <sup>3</sup>	\$658.42	\$1,311.06	\$1,147.90	\$1,963.71	\$250/\$750
UMP High Deductible <sup>3</sup>	\$591.24	\$1,172.88	\$1,035.28	\$1,723.27	\$1,400/\$2,800
UMP Plus–UW Medicine ACN <sup>3</sup>	\$628.88	\$1,252.00	\$1,096.22	\$1,875.11	\$125/\$375


## Yakima

Kaiser Permanente WA Core 1	\$573.46	\$1,141.15	\$999.23	\$1,708.84	\$1,250/\$3,750
Kaiser Permanente WA Core 2	\$579.50	\$1,153.23	\$1,009.80	\$1,726.96	\$750/\$2,250
Kaiser Permanente WA Core 3	\$650.01	\$1,294.25	\$1,133.19	\$1,938.49	\$250/\$750
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UMP Achieve 1 <sup>3</sup>	\$593.56	\$1,181.35	\$1,034.40	\$1,769.13	\$750/\$2,250
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<sup>1</sup> Or state-registered domestic partner

<sup>2</sup> You pay the monthly medical premium shown regardless of how many children you enroll.

<sup>3</sup> Administered by Regence BlueShield

 If you move out of the medical plan's service area, you may need to change plans. You must report your new address and any request to change your health plan to the SEBB Program **no later than 60 days** after your move.