July 5, 2022

TO: All K-12 School Districts, Charter Schools, and Educational Service Districts

FROM: Amy Corrigan

ERB Outreach and Training

SUBJECT: SEBB Program Rates for the K-12 School Districts, Charter Schools, and represented

employees of Educational Service Districts

Beginning September 1, 2022 (school year 2022-23) the monthly employee base rate will be \$1,026 per employee per month. These rates were established in ESSB 5693 68th Legislature, 2022Regular Session and cover benefits administered by the Health Care Authority (HCA) through the School Employees Benefits Board (SEBB) Program.

Employee contributions and SEBB Continuation Coverage (COBRA and unpaid leave) rates will remain the same until January 2023, when the new plan year begins. You will receive notification of the 2023 rates in the fall, prior to the SEBB 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 spouse 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 or waive medical, dental and vision coverage to enroll in the PEBB Program.

The base rate does not represent the actual cost of providing benefits to employees during the calendar year. The amounts shown below break out the base rate, which may vary from actual costs.

September 2022 – December 2022							
Benefit	Base Rate Breakout						
Net Medical and Admin	\$926.12						
Dental	\$82.48						
Vision	\$11.34						
Life	\$3.96						
Long-Term Disability	2.10						
Total Base Rate	\$1,026.00						

If you have questions, please contact me at 360-725-0826 or amy.corrigan@hca.wa.gov.

cc: Kate LaBelle

Washington State Health Care Authority 2022 SEBB Rate Book

Invoicing Rates for K12 Active with Surcharges (for September through December 2022 only)

	th	/01/22 rough /30/23	E	mployee Contr	ibutions: CY 202	2	Total Base Rates With Employee Contributions: September - December 2022			
Plans	Bas	e Rate	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family	Subscriber	Subscriber and Spouse	Subscriber and Child(ren)	Full Family
Kaiser Permanente NW 1	\$	1,026	\$ 50	\$ 100	\$ 88	\$ 150	\$ 1,076	\$ 1,126	\$ 1,114	\$ 1,176
Kaiser Permanente NW 2	\$	1,026	\$ 69	\$ 138	\$ 121	\$ 207	\$ 1,095	\$ 1,164	\$ 1,147	\$ 1,233
Kaiser Permanente NW 3	\$	1,026	\$ 136	\$ 272	\$ 238	\$ 408	\$ 1,162	\$ 1,298	\$ 1,264	\$ 1,434
Kaiser Permanente WA Core 1	\$	1,026	\$ 39	\$ 78	\$ 68	\$ 117	\$ 1,065	\$ 1,104	\$ 1,094	\$ 1,143
Kaiser Permanente WA Core 2	\$	1,026	\$ 44	\$ 88	\$ 77	\$ 132	\$ 1,070	\$ 1,114	\$ 1,103	\$ 1,158
Kaiser Permanente WA Core 3	\$	1,026	\$ 119	\$ 238	\$ 208	\$ 357	\$ 1,145	\$ 1,264	\$ 1,234	\$ 1,383
Kaiser Permanente WA SoundChoice	\$	1,026	\$ 76	\$ 152	\$ 133	\$ 228	\$ 1,102	\$ 1,178	\$ 1,159	\$ 1,254
Kaiser Permanente WA Options Access PPO 1	\$	1,026	\$ 104	\$ 208	\$ 182	\$ 312	\$ 1,130	\$ 1,234	\$ 1,208	\$ 1,338
Kaiser Permanente WA Options Access PPO 2	\$	1,026	\$ 133	\$ 266	\$ 233	\$ 399	\$ 1,159	\$ 1,292	\$ 1,259	\$ 1,425
Kaiser Permanente WA Options Access PPO 3	\$	1,026	\$ 185	\$ 370	\$ 324	\$ 555	\$ 1,211	\$ 1,396	\$ 1,350	\$ 1,581
Premera Blue Cross High PPO	\$	1,026	\$ 87	\$ 174	\$ 152	\$ 261	\$ 1,113	\$ 1,200	\$ 1,178	\$ 1,287
Premera Blue Cross Peak Care EPO	\$	1,026	\$ 41	\$ 82	\$ 72	\$ 123	\$ 1,067	\$ 1,108	\$ 1,098	\$ 1,149
Premera Blue Cross Standard PPO	\$	1,026	\$ 37	\$ 74	\$ 65	\$ 111	\$ 1,063	\$ 1,100	\$ 1,091	\$ 1,137
Uniform Medical Plan Achieve 1	\$	1,026	\$ 37	\$ 74	\$ 65	\$ 111	\$ 1,063	\$ 1,100	\$ 1,091	\$ 1,137
Uniform Medical Plan Achieve 2	\$	1,026	\$ 101	\$ 202	\$ 177	\$ 303	\$ 1,127	\$ 1,228	\$ 1,203	\$ 1,329
Uniform Medical Plan High Deductible	\$	1,026	\$ 25	\$ 50	\$ 44	\$ 75	\$ 1,051	\$ 1,076	\$ 1,070	\$ 1,101
Uniform Medical Plan Plus - PSHVN	\$	1,026	\$ 77	\$ 154	\$ 135	\$ 231	\$ 1,103	\$ 1,180	\$ 1,161	\$ 1,257
Uniform Medical Plan Plus - UW	\$	1,026	\$ 77	\$ 154	\$ 135	\$ 231	\$ 1,103	\$ 1,180	\$ 1,161	\$ 1,257
Surcharges										
Tobacco Use Surcharge			\$ 25	\$ 25	\$ 25	\$ 25	\$ 25	\$ 25	\$ 25	\$ 25
Spouse Waiver (AV) Surcharge			\$ -	\$ 50	\$ -	\$ 50	\$ -	\$ 50	\$ -	\$ 50