July 14, 2023

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, 2023 (school year 2023-24) the monthly employee base rate will be \$1,100 per employee per month. These rates were established in ESSB 5187 68th Legislature, 2023 Regular 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 2024, when the new plan year begins. You will receive notification of the 2024 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 2023 – December 2023											
Benefit	Base Rate Breakout										
Net Medical and Admin	\$1,000.12										
Dental	\$82.48										
Vision	\$11.34										
Life	\$3.96										
Long-Term Disability	2.10										
Total Base Rate	\$1,100.00										

If you have questions, please contact me at amy.corrigan@hca.wa.gov.

cc: Kate LaBelle

Washington State Health Care Authority 2023 SEBB Rate Book

Invoicing Rates for K12 Active with Surcharges (for September through December 2023 only)

	th	/01/23 rough /30/24		Em	ploye	e Contri	buti	ions: CY 2	2023	3	Total Base Rates With Employee Contributions: September - December 2023								
Plans	Ва	se Rate	Subscriber		Subscriber and Spouse		Subscriber and Child(ren)		Full Family		S	Subscriber		Subscriber and Spouse		Subscriber and Child(ren)		ıll Family	
Kaiser Permanente NW 1	\$	1,100	\$	31	\$	62	\$	54	\$	93	\$	1,131	\$	1,162	\$	1,154	\$	1,193	
Kaiser Permanente NW 2	\$	1,100	\$	57	\$	114	\$	100	\$	171	\$	1,157	\$	1,214	\$	1,200	\$	1,271	
Kaiser Permanente NW 3	\$	1,100	\$	89	\$	178	\$	156	\$	267	\$	1,189	\$	1,278	_	1,256	\$	1,367	
Kaiser Permanente WA Core 1	\$	1,100	\$	38		76	\$	67	\$	114	\$	1,138	\$	1,176	\$	1,167	\$	1,214	
Kaiser Permanente WA Core 2	\$	1,100	\$	43	\$	86	\$	75	\$	129	\$	1,143	\$	1,186	\$	1,175	\$	1,229	
Kaiser Permanente WA Core 3	\$	1,100	\$	120	\$	240	\$	210	\$	360	\$	1,220	\$	1,340	\$	1,310	\$	1,460	
Kaiser Permanente WA SoundChoice	\$	1,100	\$	74	\$	148	\$	130	\$	222	\$	1,174	\$	1,248	\$	1,230	\$	1,322	
Kaiser Permanente WA Summit 1	\$	1,100	\$	77	\$	154	\$	135	\$	231	\$	1,177	\$	1,254	\$	1,235	\$	1,331	
Kaiser Permanente WA Summit 2	\$	1,100	\$	106	\$	212	\$	186	\$	318	\$	1,206	\$	1,312	\$	1,286	\$	1,418	
Kaiser Permanente WA Summit 3	\$	1,100	\$	142	\$	284	\$	249	\$	426	\$	1,242	\$	1,384	\$	1,349	\$	1,526	
Premera Blue Cross High PPO	\$	1,100	\$	97	\$	194	\$	170	\$	291	\$	1,197	\$	1,294	\$	1,270	\$	1,391	
Premera Blue Cross Standard PPO	\$	1,100	\$	49	\$	98	\$	86	\$	147	\$	1,149	\$	1,198	\$	1,186	\$	1,247	
Premera Blue Cross HMO	\$	1,100	\$	25	\$	50	\$	44	\$	75	\$	1,125	\$	1,150	\$	1,144	\$	1,175	
Uniform Medical Plan Achieve 1	\$	1,100	\$	42	\$	84	\$	74	\$	126	\$	1,142	\$	1,184	\$	1,174	\$	1,226	
Uniform Medical Plan Achieve 2	\$	1,100	\$	105	\$	210	\$	184	\$	315	\$	1,205	\$	1,310	\$	1,284	\$	1,415	
Uniform Medical Plan High Deductible	\$	1,100	\$	28	\$	56	\$	49	\$	84	\$	1,128	\$	1,156	\$	1,149	\$	1,184	
Uniform Medical Plan Plus - PSHVN	\$	1,100	\$	83	\$	166	\$	145	\$	249	\$	1,183	\$	1,266	\$	1,245	\$	1,349	
Uniform Medical Plan Plus - UW	\$	1,100	\$	83	\$	166	\$	145	\$	249	\$	1,183	\$	1,266	\$	1,245	\$	1,349	

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