

PEB Board approves changes for 2011

At their July 21 meeting, the Public Employees Benefits Board (PEB Board) approved several changes to monthly premiums and eligibility. In addition, the Health Care Authority (HCA) recommended not offering several medical plans for 2011. **These changes take effect January 1, 2011.**

Changes for employees

Medical plan changes

Aetna Public Employees Plan and Kaiser Permanente Value will no longer be available in 2011. Members enrolled in these plans must choose a new medical plan during the annual open enrollment (November 1 – 30, 2010) for coverage effective January 1, 2011.

<i>If members enrolled in these plans don't select a new medical plan during open enrollment...</i>	<i>...they will be automatically enrolled in these plans starting January 1, 2011:</i>
Aetna Public Employees Plan	Uniform Medical Plan
Kaiser Permanente Value	Kaiser Permanente Classic

Employees enrolled in these plans will receive a letter about their plan ending in 2011, in addition to the open enrollment newsletter mailed to all employees (scheduled to mail in mid-October).

Monthly premiums

All medical plans' premiums will increase for 2011 except for Group Health Classic, which will stay the same. These increases reflect increases in overall health care costs.

The average employee contribution will stay at 12%. The state will continue to pay 88%, on average, of employees' premium costs based on enrollment across all PEBB medical plans.

These premiums apply to employees in state agencies, higher-education institutions, and community and technical colleges. School-district employees and employees who work for a city, county, port, water district, hospital, etc., need to contact their personnel, payroll, or benefits office to find their monthly premiums.

Plan Name	EMPLOYEE CONTRIBUTION BY FAMILY TIER							
	Employee		Employee & Spouse*		Employee & Child(ren)		Full Family	
	2010	2011	2010	2011	2010	2011	2010	2011
Group Health Classic	71	71	152	152	124	124	205	205
Group Health Value	22	30	54	70	39	53	71	93
Kaiser Permanente Classic	72	105	154	220	126	184	208	299
Uniform Medical Plan	41	60	92	130	72	105	123	175

*or qualified/Washington State-registered domestic partner

Changes for retirees

Medical plan changes

The following plans will no longer be available in 2011:

- Aetna Public Employees Plan
- Kaiser Permanente Senior Advantage Value (Medicare Advantage plan)
- Kaiser Permanente Value
- Medicare Supplement Plan E (for both disabled and retired)
- Medicare Supplement Plan J without Rx (for both disabled and retired)
- Medicare Supplement Plan J with Rx (for both disabled and retired)
- SecureHorizons Value (Medicare Advantage plan)

Members enrolled in these plans must choose a new medical plan during the annual open enrollment (November 1 – 30, 2010) for coverage effective January 1, 2011. Retirees will receive a personalized letter in late October explaining their plan options for 2011.

<i>If members enrolled in these plans don't select a new medical plan during open enrollment...</i>	<i>...they will be automatically enrolled in these plans starting January 1, 2011:</i>
Aetna Public Employees Plan	Uniform Medical Plan
Kaiser Permanente Value	Kaiser Permanente Classic
Kaiser Permanente Senior Advantage Value (Medicare Advantage)	Kaiser Permanente Senior Advantage Classic (Medicare Advantage)
Medicare Supplement Plan E (disabled)	Medicare Supplement Plan F (disabled)
Medicare Supplement Plan E (retired)	Medicare Supplement Plan F (retired)
Medicare Supplement Plan J without Rx (disabled)	Medicare Supplement Plan F (disabled)
Medicare Supplement Plan J without Rx (retired)	Medicare Supplement Plan F (retired)
Medicare Supplement Plan J with Rx (disabled)	Medicare Supplement Plan F (disabled)
Medicare Supplement Plan J with Rx (retired)	Medicare Supplement Plan F (retired)
SecureHorizons Value (Medicare Advantage)	SecureHorizons Classic (Medicare Advantage)

Monthly premiums for non-Medicare retirees *(estimated)*

Final premiums will be in PEBB's retiree open enrollment newsletter (scheduled to mail in mid-October). Retirees will also receive a personalized letter in late October explaining their plan options and premiums for 2011.

Plan Name	NON-MEDICARE RETIREE CONTRIBUTION BY FAMILY TIER							
	Retiree		Retiree & Spouse*		Retiree & Child(ren)		Full Family	
	2010	2011	2010	2011	2010	2011	2010	2011
Group Health Classic	\$471	\$520	\$935	\$1,033	\$819	\$905	\$1,283	\$1,419
Group Health Value	421	479	836	952	733	834	1,148	1,307
Kaiser Permanente Classic	472	554	937	1,102	820	965	1,285	1,513
Uniform Medical Plan	440	510	874	1,013	766	887	1,199	1,391

*or qualified/Washington State-registered domestic partner

Monthly premiums for Medicare retirees *(estimated)*

The PEBB Board approved the state contribution of \$182.89 maximum per month toward Medicare retiree members' medical premiums for 2011. This is the same contribution as in 2010.

Final premiums will be in PEBB's retiree open enrollment newsletter (scheduled to mail in mid-October). Retirees will also receive a personalized letter in late October explaining their plan options and premiums for 2011.

Plan Name	MEDICARE RETIREE CONTRIBUTION (SUBSCRIBER ONLY) after \$182.89 state contribution*	
	2010	2011
Group Health Classic	\$ 132	\$ 138
Group Health Value	124	131
Kaiser Permanente Senior Advantage Classic	166	183
Medicare Supplement Plan F (disabled)	146	154
Medicare Supplement Plan F (retired)	89	93
SecureHorizons Classic	211	247
Uniform Medical Plan	163	194

*State contribution limited to \$182.89 or 50% of plan premium, whichever is less.

Eligibility changes

Beginning January 1, 2011, national health care reform requires PEBB medical plans to cover married and unmarried children up to age 26 in the same way PEBB currently covers dependent children. PEBB will also allow subscribers to cover children up to age 26 under dental and life insurance coverage. These children will not need to be students or IRS dependents to qualify for PEBB coverage.

For dependent children with disabilities who are incapable of self-support, the PEBB Program will require proof that the disability occurred before age 26. This change aligns with new age limits for children. (Currently, PEBB requires proof that the disability occurred before age 20 or while the child qualified as a student under PEBB rules.)

Administrative change

For Uniform Medical Plan (UMP) employees and non-Medicare retirees and their dependents who have other health coverage, UMP will pay for covered services up to its normal amount, but will not pay all charges not paid by the other plan. This change does not apply to Medicare retiree members.

Questions and answers

- [Why is my medical plan going away in 2011?](#)
- [If my medical plan is going away in 2011 and I don't choose a new plan during the annual open enrollment, what will happen?](#)
- [I'm enrolled in Medicare Supplement Plan J with prescription-drug benefits. If I enroll in Medicare Supplement Plan F in 2011, will I have prescription-drug benefits? Or will I need to enroll in a Medicare Part D plan?](#)
- [Will there be any changes to what my PEBB plan covers in 2011?](#)
- [Why is Uniform Medical Plan \(UMP\) changing how it coordinates coverage payments with my other health plan in 2011?](#)
- [When will I receive more information about the changes to 2011 PEBB coverage?](#)
- [Why are premiums increasing for most plans?](#)