

Your new benefits: What do they cost?

Like anything new, a change in how you receive health insurance benefits is bound to raise some questions. You need to know how it affects you and what will it cost.

Starting in 2020, K-12 employees will get their health coverage and other insurance benefits from the School Employees Benefits Board (SEBB) Program. This program is so new that it's still being built. Details of the health plan benefits and monthly premiums won't be known until after the Legislature passes the 2019-21 budget. The Legislature is scheduled to finish its business at the end of April. As soon as the budget is complete and the Governor has signed it, the SEB Board will be able to approve the final benefits and premiums. Once approved, the SEBB Program will send you information in the *School Employee Initial Enrollment Guide* which is expected to mail in September.

All this is building up to the SEBB Program's first annual open enrollment, October 1 through November 15, when [eligible employees](#) will choose [health insurance plans](#) and [other benefits](#). Employees will enroll themselves and their eligible dependents for coverage that begins January 1, 2020.

Here is what we know so far.

Affordability is key

The SEBB Program is designed to be affordable for all school employees. It meets the requirements of the Affordable Care Act and the longtime goals of the Legislature in providing school employees with family medical insurance at an affordable cost.

We understand that some employees who only cover themselves may see an increase in their monthly premiums. However, employees covering dependents will likely see more affordable premiums.

With the SEBB Program, what won't change is your access to affordable insurance options — even if you change districts, return to SEBB after waiving medical coverage, add or remove a dependent, or switch from full-time to part-time status.

All eligible employees are treated the same

Whether you're a bus driver or a superintendent, a teacher or an office worker, a mechanic or a librarian — if you are anticipated to work 630 hours or more during the school year (September through August), you are fully eligible* for SEBB Program benefits. Within this eligibility standard, there is no difference between part-time and full-time, or between classified and certificated employees. The amount you and your employer pay for your benefits does not change based on the number of hours you work.

Coverage is affordable

One of the basic principles of the SEBB Program is that insuring your dependents costs no more than three times what it costs to insure yourself alone. Previously, some school employees had to pay much higher premiums to insure their families.

The table below shows example premiums you might pay for different employee-only medical plans, and the corresponding premiums if you add your spouse or state-registered domestic partner and your eligible children. It's the same premium whether you cover one child or many.

*Employees who are anticipated to work between 180 and 630 hours during the school year may be eligible for SEBB Program benefits through local funding. Check with your benefits_administrator to see if your organization offers this option and to learn more.

Full-time employee medical premium			Part-time employee medical premium		
Medical plans	Monthly premium for you	Monthly premium for you, your spouse*, and children	Medical plans	Monthly premium for you	Monthly premium for you, your spouse*, and children
Plan A	\$25	\$75	Plan A	\$25	\$75
Plan B	\$35	\$105	Plan B	\$35	\$105
Plan C	\$70	\$210	Plan C	\$70	\$210
Plan D	\$100	\$300	Plan D	\$100	\$300

*or state-registered domestic partner

Note: The above figures are only intended to be rounded estimates based on preliminary Uniform Medical Plan rates presented at the March 7, 2019 SEB Board meeting and are subject to change. Monthly employee premium amounts for 2020 SEBB plans will not be final until the SEB Board endorses them later in 2019.

What you pay vs. what your employer pays

You will pay a small portion of the medical premium for yourself and any eligible dependents you enroll. Your dependents could include your spouse or state-registered domestic partner, and your children. Having one child on your coverage costs the same as two or more. You will know what the premiums are before you enroll, and your premiums will not change during the plan year unless you change your coverage.

- Your employer pays the bulk of the medical premium, as well as 100 percent of the premiums for dental and vision insurance for you and your dependents.
- You will pay the deductibles and copays for medical, dental, and vision coverage.
- Your employer pays the premiums for basic life and accidental death and dismemberment (AD&D) insurance, and basic long-term disability (LTD) insurance, so there's no cost to you.

If you want more coverage, you can buy supplemental life and AD&D insurance for yourself and your eligible dependents, and supplemental LTD insurance for yourself.

Pooling is changing

All "pooling" of funds within the SEBB Program from employees that waive coverage will occur at the state level. This helps keep the premiums lower for all employees. There will no longer be bargaining unit pooling at the local level.

Waiving medical is allowed

You can waive medical coverage if you have coverage from another employer-based group medical insurance, a TRICARE plan, or Medicare. You cannot waive if you have Medicaid because Medicaid is not employer-based medical insurance. Since dental and vision are 100 percent employer paid, you cannot waive coverage. However, you may choose not to use the dental and vision coverage because you would have copays and deductibles if you do.

You may be charged premium surcharges

There are two premium surcharges that may be added to your monthly medical premium:

- [Spouse or state-registered domestic partner coverage premium surcharge](#): If your spouse or state-registered domestic partner is enrolled on your SEBB Program medical coverage instead of their employer's group health plan, you will pay an additional \$50 per month. When you enroll a spouse or state-registered domestic partner, you must confirm if their health plan is comparable to the PEBB Program's UMP Classic health plan, which determines whether the surcharge applies to you.
- [Tobacco use premium surcharge](#): If you or any enrolled dependents in your household who are age 13 or older use tobacco products, you will pay an additional \$25 per month.

Read more about the [premium surcharges](#) on the Health Care Authority's website. Instructions and help sheets to determine whether the premium surcharges apply to you will be available before the first annual open enrollment this fall.

More ways to save

You can enroll in a **Medical Flexible Spending Arrangement (FSA)** that lets you set aside pretax money from your paycheck to pay for qualified out-of-pocket health care costs. You can use your Medical FSA to pay health care expenses for you, your spouse, or your qualified tax dependents, even if they are not enrolled on your SEBB medical, dental, or vision plans.

The **Dependent Care Assistance Program (DCAP)** lets you set aside pretax money from your paycheck to pay qualifying child care or elder care expenses.

Where can I learn more?

More information, including monthly premiums, plan choices, how to tell if the premium surcharges apply to you, and other important details will be in the *School Employee Initial Enrollment Guide*. The guide will be mailed to employees in September, in plenty of time before the first annual open enrollment, October 1 through November 15.

Go online

You can learn more about the SEBB Program on our [webpages for School Employees](#). You can find fact sheets with more information on different parts of the SEBB Program on the [SEBB Fact Sheets webpage](#).