



School Employees Benefits Board (SEBB) Program October 2026

Open enrollment is October 26 to November 23

Open enrollment is your opportunity to make changes to your SEBB health coverage for 2027. Now is the time to review your options, including costs, to make sure you are enrolled in coverage that meets your health care needs and goals. If you're happy with your current coverage, you do not have to make any changes.

Forms and other helpful tools are available on the *Open enrollment* webpage at hca.wa.gov/sebb-oe.

What changes can I make during open enrollment?

You can make the changes listed below from October 26 to November 23. Changes are effective January 1, 2027.

- **Change** your medical, dental, and vision plans
- **Add or remove** dependents
- **Waive** medical coverage if you have other employer-based group medical, a TRICARE plan, or Medicare Part A and Part B
- **Enroll** in medical coverage if you previously waived coverage
- **Attest** to the spousal coverage premium surcharge (if required)
- **Enroll (or re-enroll)** in the flexible spending arrangement (FSA) or Dependent Care Assistance Program (DCAP)

See page 9 for information on how to make changes to your coverage using Benefits 24/7 at benefits247.hca.wa.gov.

Tips for a smooth open enrollment

Follow these recommendations to make the most of open enrollment:

- **Review what's changing.** Look over any changes to your current plans, including premiums, deductibles, copays/coinsurance, and provider networks.
- **Assess your health care needs.** Consider your and any dependents' health status, any upcoming treatments, or anticipated life events (pregnancy, surgery, relocation, etc.) that may affect your coverage needs.
- **Make changes in Benefits 24/7.** This includes adding or removing dependents and changing plans.
- **Stay connected.** Sign up for emails and follow HCA on social media.
- **Need help?** Reach out to your payroll or benefits office.

Important dates

October 19 to November 19

Visit one of the in-person benefits fairs around the state to learn about your health plans and benefits options. See page 5 to find one near you.

October 26

SEBB annual open enrollment begins. Use Benefits 24/7 to make changes. Paper forms are also available.

November 23

Benefits 24/7 changes must be received by 11:59 p.m. If you are submitting paper forms, your payroll or benefits office must receive them as of this day.

November 30

Last day for most subscribers to qualify (if eligible) for the SmartHealth \$125 wellness incentive for 2027 at smarthealth.hca.wa.gov.

January 1, 2027

The new plan year begins. Open enrollment changes become effective, and benefits, deductibles, and out-of-pocket maximums reset.

Important changes to your 2027 SEBB benefits

All changes are effective January 1, 2027, unless otherwise noted.

Learn more about the changes listed below and other changes on the *Open enrollment* webpage at hca.wa.gov/sebb-oe. Any updates after this newsletter mails will be listed on the *Open enrollment* webpage, so we recommend you check there for the latest information.



Note: Premiums are included on [page 4](#).

Changes to all SEBB medical plans

HIV prevention and treatment: Senate Bill 6183 requires coverage of all FDA-approved antiviral drugs for the prevention or treatment of HIV without prior authorization or step therapy. If there is a therapeutically equivalent, generic antiviral drug available, plans do not need to cover the brand-name version.



Medical plan changes

Kaiser Permanente Northwest (KPNW)

- **Non-emergency medical transportation** by wheelchair and gurney vans will be available at \$0 copay (with prior authorization) to specific locations such as a hospital, hospital skilled nursing facility, or hospital home.
- **Birth doula benefit:** KPNW-contracted doulas will be covered for up to four visits total during pregnancy and for up to 12 months after birth. Members also have doula coverage for delivery.

Kaiser Permanente Washington (KPWA) and KPWA Options

- **Provider network name change** from Core to SoundChoice for the Core 1, 2, and 3 plans. There will be no changes to the providers due to the name change. Members will receive a new ID card after the first of the year.
- **Non-emergency medical transportation** by wheelchair and gurney vans will be available at \$0 copay (with prior authorization) to specific locations such as a hospital, hospital skilled nursing facility, or hospital home.
- **Birth doula benefit:** Doulas from an established, licensed provider will be covered during pregnancy, delivery, and for up to 12 months after birth. There is a \$1,000 coverage limit per pregnancy.
- **Post-mastectomy bras** will no longer be limited to two every six months.
- **Urine drug screening** is subject to member cost-sharing.

Medical plan changes (continued)

Premera Blue Cross

- **Provider network name changes:** Heritage Prime to Glacier for Standard and High PPO plans, and Sherwood to Clearwater for Premera HMO. Members will get a new ID card after the first of the year.
- **Premera HMO plan** is expanding to Snohomish County.
- **Birth doula benefit:** Doulas will be covered for up to four visits total during pregnancy, delivery, and after birth. Member pays upfront and submits a claim for up to \$1,000 to Premera for reimbursement. Members must first meet the deductible and applicable coinsurance.
- **Copay for emergency room visits will increase to \$175.** This copay is waived if admitted to a hospital.
- **Urgent care will have a specialist copay.** The deductible does not apply.
- **Members can receive a 10 percent coinsurance discount** for using in-network, free-standing ambulatory surgical centers or birthing centers instead of hospitals.

Uniform Medical Plan (UMP)

- **Deductible for UMP High Deductible plan** will increase to \$1,750 for single subscribers and \$3,500 for families per IRS requirements.
- **Birth doula services:** Members may file claims for reimbursement of up to \$1,000 per calendar year. Services must be provided in Washington state by a Washington Department of Health (DOH)-certified birth doula. HDHP members must first meet the deductible.
- **Health savings account (HSA)** annual maximum contribution will increase to \$4,500 for single subscribers and \$9,000 for families per IRS requirements.
- **The Centers of Excellence (COE) program** for total joint replacement and spine surgery will end December 31, 2026. Surgeries must be completed by December 31, 2026 to qualify for this program.

Long-term disability (LTD) insurance

The employee-paid LTD premiums may decrease.

Flexible spending arrangements (FSAs)

- **The annual maximum contribution** for the FSA and Limited Purpose FSA will increase to \$3,400. If the IRS announces an additional increase to the maximum contribution before the end of open enrollment, the SEBB Program will adopt it for 2027.
- **The maximum carryover limit** is increasing to \$680 for balances that are eligible to carry over from 2026 to 2027.

SmartHealth

SmartHealth will no longer be available after 2027. You can continue to access SmartHealth through December 31, 2027. If you earn the incentive by the cutoff date in 2027 and you are enrolled in an eligible plan in 2028, the \$125 incentive will still be applied for 2028.

Rule changes

Effective May 14, 2026, a school board member may enroll in SEBB medical, SEBB dental, and SEBB vision upon being elected or appointed as a school board member, during the annual open enrollment, or following the loss of other coverage under a group health plan or through health insurance coverage, as defined by the Health Insurance Portability and Accountability Act (HIPAA).



All changes to SEBB rules will be available on the HCA website at hca.wa.gov/sebb-rules.

2027 School employee monthly medical premiums

These premiums are effective January 1, 2027. You do not pay premiums for dental, vision, basic life, basic accidental death and dismemberment, or employer-paid long-term disability insurance benefits. The term “spouse” is interchangeable with “state-registered domestic partner.”

Managed-care plans								
What you pay 	Kaiser Permanente NW			Kaiser Permanente WA				Premera Blue Cross
	NW 1	NW 2	NW 3	Core 1	Core 2	Core 3	SoundChoice	HMO
Subscriber only	\$44	\$80	\$252	\$44	\$80	\$252	\$137	\$38
Subscriber & spouse	\$88	\$160	\$504	\$88	\$160	\$504	\$274	\$76
Subscriber & children	\$77	\$140	\$441	\$77	\$140	\$441	\$240	\$67
Subscriber, spouse, & children	\$132	\$240	\$756	\$132	\$240	\$756	\$411	\$114

Preferred provider organization (PPO) plans								
What you pay 	Kaiser Permanente WA Options			Premera Blue Cross		Uniform Medical Plan		
	Summit PPO 1	Summit PPO 2	Summit PPO 3	High PPO	Standard PPO	Achieve 1	Achieve 2	High Deductible
Subscriber only	\$63	\$150	\$306	\$188	\$130	\$48	\$141	\$35
Subscriber & spouse	\$126	\$300	\$612	\$376	\$260	\$96	\$282	\$70
Subscriber & children	\$110	\$263	\$536	\$329	\$228	\$84	\$247	\$61
Subscriber, spouse, & children	\$189	\$450	\$918	\$564	\$390	\$144	\$423	\$105

Monthly premium surcharges

In addition to your monthly medical premium, two premium surcharges may apply:

- \$25-per-account tobacco use
- \$50 spouse or state-registered domestic partner coverage

Benefits fairs schedule

Get personalized help, pick up printed materials, and speak with health plan and other insurance representatives at an in-person benefits fair.

Time: All fairs will run from 10 a.m. to 4 p.m., except the fairs held at the University of Washington, which will run from 10 a.m. to 5 p.m.

More information: Get presentation schedules and parking information at hca.wa.gov/oe-fairs.

Before you go: Check HCA's website for any late changes.

Seattle/University of Washington

Note: The SEBB health plans and other insurance representatives will attend benefits fairs held at and sponsored by the University of Washington.

October 19

📍 Harborview Medical Center
Research and Training Building
Floor 1 – Conference rooms
300 9th Ave.

October 20

📍 UW Medical Center – Montlake
Health Sciences Building
Floor 3 – Lobby
1559 NE Pacific St.

October 21

📍 UW Medical Center – Northwest
E. Wing Auditorium
1550 N. 115th St.

October 22

📍 Husky Union Building
Floor 2 – South Ballroom
4001 E. Stevens Way NE

Tacoma/Lakewood

October 27

📍 Clover Park Technical College
McGavick Conference Center
4500 Steilacoom Blvd. SW
Lakewood

Spokane

October 27

📍 Spokane Community College
Lair Student Center (Building 6)
1810 N. Greene St.

Cheney

October 28

📍 Eastern Washington University
Hargreaves Hall
616 Study Ln.

Vancouver

October 28

📍 Clark College
Gaiser Hall
1933 Fort Vancouver Way

Pullman

October 29

📍 City of Pullman Parks and
Recreation Center
Building B
190 SE Crestview St.

Federal Way/Des Moines

November 2

📍 Highline College
Student Union Building (Building 8)
2400 S 240th St.
Des Moines

Lynnwood

November 4

📍 Edmonds College
Woodway Hall (Building 26)
20000 68th Ave. W

Bellingham

November 5

📍 Bellingham Public Schools
District office (Rooms 102/103)
1985 Barkley Blvd.

Olympia/Tumwater

November 16

📍 Department of Labor and
Industries
7273 Linderson Way SW
Tumwater

Bremerton

November 17

📍 Olympic College
William D. Harvey Theatre
(Building 7)
1600 Chester Ave.

Wenatchee

November 17

📍 Wenatchee Convention Center
Orchard Exhibit Hall South,
Main building
121 N. Wenatchee Ave.

Port Angeles

November 18

📍 Red Lion Hotel Port Angeles
Harbor, Main building
221 N. Lincoln St.

Yakima

November 18

📍 Yakima Valley College
Kaminski Conference Center
1704 W. Nob Hill Blvd.

Pasco

November 19

📍 Columbia Basin College
Hawk Union Building (H Building)
2600 N. 20th Ave.



Reminders for open enrollment

Remember your SmartHealth incentive

You can still qualify to receive a \$125 SmartHealth wellness incentive in 2027. Visit hca.wa.gov/sebb-smarthealth to learn how to qualify.

Reattest to the spouse or state-registered domestic partner coverage premium surcharge

The SEBB Program will mail you a letter if you need to reattest for 2027. You can also check if you need to reattest in your Benefits 24/7 dashboard at benefits247.hca.wa.gov starting October 26. You can reattest in Benefits 24/7 or submit the *SEBB Premium Surcharge Attestation Change Form*.

You cannot enroll in both SEBB and PEBB coverage, or on more than one SEBB account

If you are eligible for enrollment in both the SEBB and PEBB Programs, you are limited to a single enrollment in SEBB or PEBB medical, dental, and vision. You must choose which program you want to be enrolled in for these benefits. If you do not take action to resolve the dual enrollment, the SEBB or the PEBB Program will automatically enroll or disenroll you as described in both WAC 182-12-123(6) and 182-31-070(6). You also cannot be enrolled in more than one SEBB account.

Is your mailing address up to date?

If not, let your payroll or benefits office know your new address.

You've got email!

Prefer to receive emails? You can sign up to receive newsletters in your inbox in Benefits 24/7. Select the *Profile* tile and then *Contact information*. Check the *Opt-in to receive email notifications* box and then click *Submit*.

Enrolling in an FSA or DCAP?

You can contribute up to \$3,400 to a flexible spending arrangement (FSA) for eligible medical, dental, or vision expenses, or to a Limited Purpose FSA for eligible dental or vision expenses (this is intended for individuals enrolled in UMP High Deductible with a health savings account [HSA]). Members who have at least \$120 remaining or enroll for the next year can also carry over up to \$680. (**Note:** The maximum contribution limit and carryover limit may increase; please check HCA's website for the most up-to-date information.)

The Dependent Care Assistance Program (DCAP) can help you save money on qualifying child and elder care expenses. You can contribute up to \$7,500 (or \$3,750 if you are married and file a separate income tax return) to a DCAP account. DCAP funds will not carry over to the next year.

You must enroll each year you want to participate in one of these benefits. To learn more, visit sebb.naviabenefits.com.

Remember to submit claims by March 31

Qualifying expenses for 2026 must be incurred between January 1 and December 31, 2026 and submitted by March 31, 2027.

You may qualify for a \$200 CBA FSA employer contribution!

School employees whose annual earnable compensation, as defined in Chapter 41.32 (TRS) or 41.35 (SERS) RCW, did not exceed \$40,000 as of June 30, 2026, may be eligible to receive a \$200 CBA FSA employer contribution in January 2027. This is employer-paid and does not count towards your maximum contribution limit.

Note: If you or your spouse is enrolled in UMP High Deductible with an HSA, or you are not enrolled in SEBB medical coverage, you are not eligible to receive this contribution.

Who to contact for help

Contact your plan if you have questions about the topics below. For phone numbers and web addresses, visit hca.wa.gov/sebb-employee and select *Contact the plans* under *Get help*.

- Benefits
- ID cards
- Claims
- Checking if your provider is in network
- Choosing a provider
- Making sure your prescriptions are covered

Contact your employer's payroll or benefits office for questions about:

- Eligibility and enrollment
- Premium surcharges
- Help with Benefits 24/7
- Changing your name, address, or phone number
- Adding or removing dependents
- Premium payments
- Finding forms
- Payroll deductions
- Eligibility and enrollment for life, accidental death and dismemberment (AD&D), and long-term disability (LTD) insurance





Know what you owe for prescriptions

Prescription drug costs vary by:

- The drug type.
- Whether the drug is on a medical plan's list of covered drugs (called a formulary or preferred drug list).
- How a plan groups those covered drugs, usually by cost (called a tier).
- Where you buy your drugs.

If you are considering changing medical plans, think about what that might mean for the cost of your prescriptions.

Formularies and drug tiers

Each medical plan has its own formulary and tier system. The tier that your drug falls into determines the price you will pay at pharmacies in your plan's network. Generally, lower tier numbers (like tier 1 or tier 2) have a lower cost and higher tier numbers have a higher cost.

Copays and coinsurance

If your drug is in a tier that has a copay (a flat amount), you will pay the same amount at any pharmacy in your plan's network. If your drug is in a tier that has a coinsurance (a percentage of the plan's approved amount), your cost could vary based on what the network pharmacy charges for that drug. (Always use your ID card when purchasing prescriptions.)

See these resources for information about prescription drug coverage and costs:

- Kaiser Permanente's formulary and drug tiers: [kp.org/formulary](https://www.kp.org/formulary)
- Premera's formulary and drug tiers: [premera.com/visitor/covered-drugs](https://www.premera.com/visitor/covered-drugs)
- Uniform Medical Plan's Preferred Drug List: hca.wa.gov/ump-pdl

You can also contact the plan's customer service. Contact information can be found on HCA's website at hca.wa.gov/erb.



Making changes is easy with Benefits 24/7

Benefits 24/7 is the SEBB Program's online benefits enrollment system. You can use it to make changes to your coverage during open enrollment, October 26 to November 23. Changes made in Benefits 24/7 must be completed by 11:59 p.m. on November 23. Paper forms are also available from your payroll or benefits office and they must receive your forms by November 23.

How to make changes

- 1 Log in to your account at **benefits247.hca.wa.gov**.
- 2 Choose the *Open enrollment* option.
- 3 Follow the guide to make changes.
- 4 Save a copy of your confirmation page.

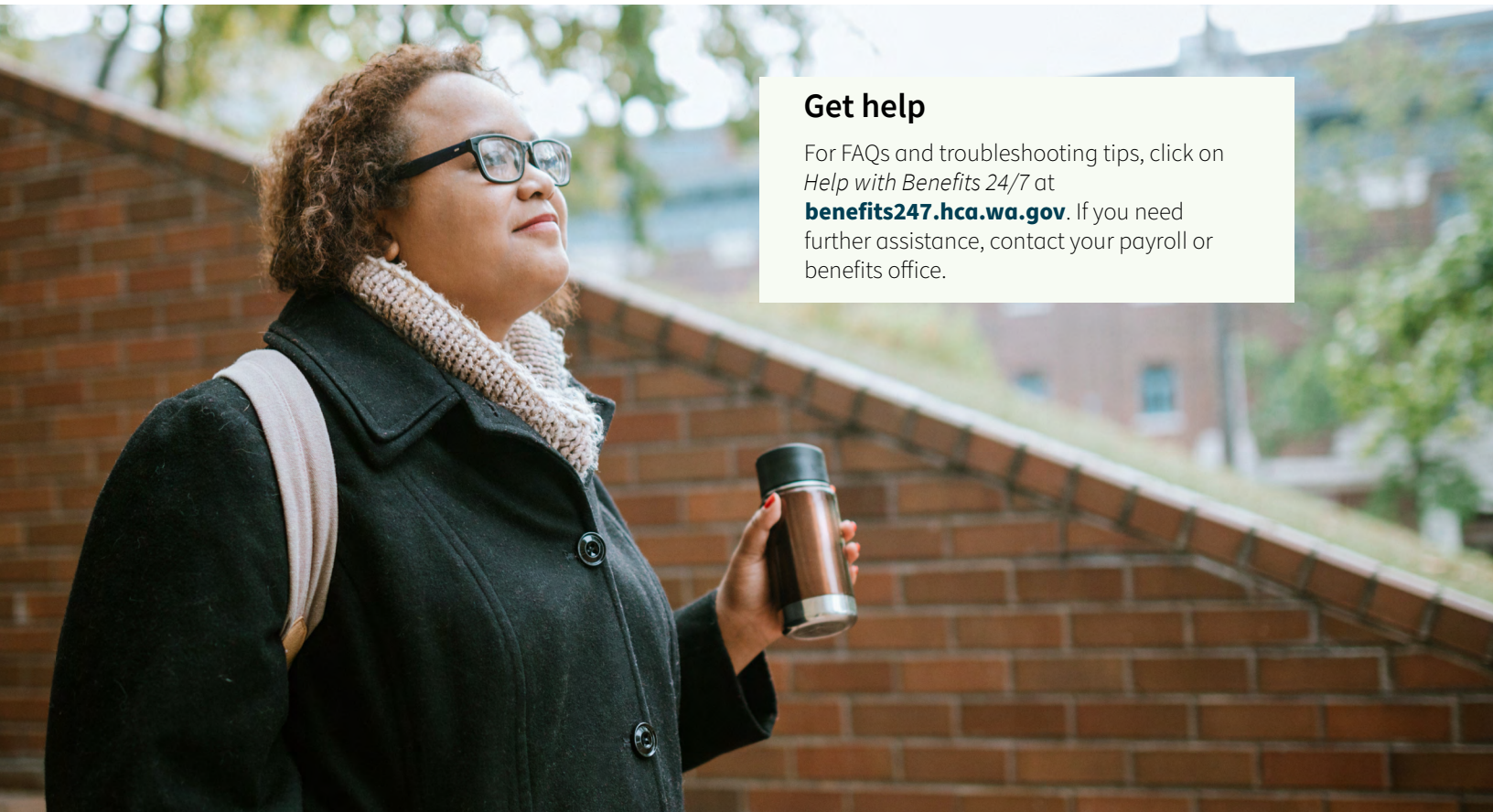
Note: Any changes you make during open enrollment won't show in your account until January 1, 2027.

Accessing your account for the first time

- 1 Visit **benefits247.hca.wa.gov** and click on the green *Log in to Benefits 24/7* button. You'll be directed to SecureAccess Washington (SAW).
- 2 Click *Sign up* to create a SAW account. (If you already have a SAW account, enter your username and password, and skip to step 5.) Enter your name, email address, a username, and password.
- 3 Check the box to prove you're not a robot, click *Submit*, and follow the link to activate your account.
- 4 Check your email for a message from SAW. Click on the confirmation link, close the *Account Activated!* browser window that opens, and return to your original window. Follow the instructions on the screen to finish creating your account. You will be directed to Benefits 24/7.
- 5 Enter your last name, date of birth, and the last four digits of your Social Security number. Click *Verify my information*.
- 6 Select your security questions and answers. You'll be directed to the Benefits 24/7 dashboard.

Get help

For FAQs and troubleshooting tips, click on *Help with Benefits 24/7* at **benefits247.hca.wa.gov**. If you need further assistance, contact your payroll or benefits office.





Open enrollment quick links

Use these online tools and guides to help you throughout open enrollment.



Open enrollment webpage

Find forms, benefits comparisons, what's changing, premiums, and what you need to do at hca.wa.gov/sebb-oe.



Virtual benefits fair

Learn about your benefits options online at hca.wa.gov/vbf-sebb.



Compare medical plans

Compare up to three medical plans at hca.wa.gov/compare-medical-sebb.



Benefits 24/7

Sign in to Benefits 24/7 to make changes and attest to the spousal coverage premium surcharge at benefits247.hca.wa.gov.



Benefits fairs

Attend a fair to learn about your benefits at hca.wa.gov/oe-fairs.

HCA complies with all applicable federal and Washington state civil rights laws and is committed to providing equal access to our services. If you need an accommodation or require documents in another format, please call 1-800-200-1004 (TRS: 711) or visit hca.wa.gov/about-hca/nondiscrimination-statement.

La HCA cumple con todas las leyes vigentes federales y del Estado de Washington sobre derechos civiles y tiene el compromiso de ofrecer un acceso equitativo a nuestros servicios. Si necesita alguna facilidad, o si requiere documentos en otro formato o idioma, llame al 1-800-200-1004 (TRS: 711) o visite hca.wa.gov/about-hca/nondiscrimination-statement.

Управление здравоохранения (HCA) соблюдает все применимые федеральные законы и законы штата Вашингтон в отношении гражданских прав и обязуется обеспечивать равный доступ к своим услугам. Если вам потребуются специальные услуги или документы в другом формате или на другом языке, позвоните по телефону 1-800-200-1004 (TRS: 711) или посетите сайт hca.wa.gov/about-hca/nondiscrimination-statement.

Required federal notice

Summary of benefits and coverage available to you

The Affordable Care Act requires the SEBB Program and its medical plans to provide a Summary of Benefits and Coverage (SBC). These documents help you compare medical plan benefits, terms, and your costs for care from network and out-of-network providers.

To get an SBC for your current SEBB medical plan, go to the *Medical plans and benefits* webpage at hca.wa.gov/sebb-employee (or the plan's website) to view or print it. You can also call your plan to ask for a paper copy at no charge. Your plan can also provide copies translated into other languages.

For questions, call the SEBB Program at 1-800-200-1004 (TRS: 711).

Required federal notice

Annual notice of creditable prescription drug coverage

You will receive this notice each year in this newsletter, and you will also receive this notice if your SEBB coverage changes. You may request a copy of this notice at any time by calling the SEBB Program at 1-800-200-1004 (TRS: 711).

If you or a family member is (or will soon be) enrolled in Medicare, you may hear about your opportunity to enroll in Medicare Part D for prescription drug coverage.

All SEBB medical plans provide creditable prescription drug coverage, so you do not have to enroll in a separate Medicare Part D plan. The prescription drug coverage offered by these SEBB medical plans is expected to pay out, on average, as much as Medicare Part D coverage pays.

When you enroll in Medicare, you can keep your SEBB medical plan with creditable drug coverage and not pay a penalty if you enroll in a Medicare Part D plan later.

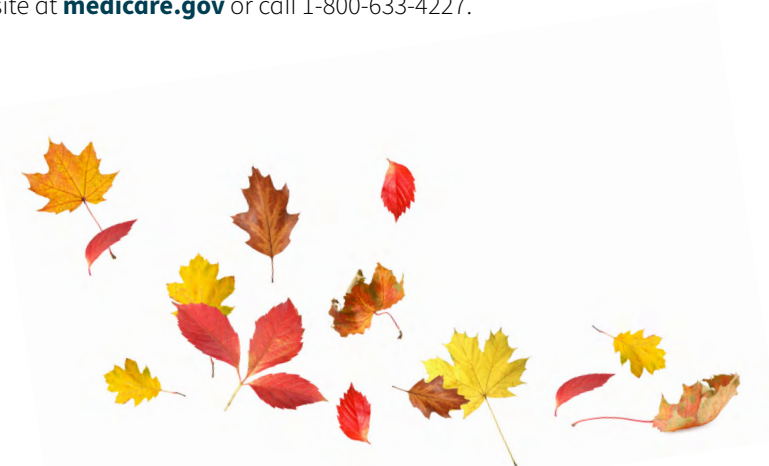
If you enroll in a Medicare Part D plan, you must present your SEBB insurance card and your Medicare Part D card to the pharmacy. Contact your SEBB medical plan to ask if they will coordinate prescription drug benefits with your Medicare Part D plan on your behalf.

If you lose or terminate your current SEBB medical plan

To avoid paying a Medicare Part D late enrollment penalty, you should enroll in a Medicare Part D plan within 63 days after your SEBB medical plan ends. If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For questions about Medicare Part D

Visit Medicare's website at medicare.gov or call 1-800-633-4227.



Open enrollment is October 26 through November 23.

This is your only open enrollment notice.

There may be updates or corrections to this document. For the most current version, visit HCA's website at hca.wa.gov/erb under *Forms & publications*.



iINTERCOM

Your SEBB health benefits newsletter