

## Preparing for Retirement

### PEBB Health Insurance Options Checklist

When leaving employment and your employer coverage is ending

As an employee of a state agency, higher education institution, participating political subdivision, or a public K-12 school district, educational service district (ESD) or charter school, you may be eligible for Public Employees Benefits Board (PEBB) *retiree insurance*. When the insurance you have with your employer (*including COBRA or continuation coverage*) ends, you will have decisions to make about ongoing health insurance coverage.

PEBB provides a quality, comprehensive retiree insurance package. Your employer contributes to a fund that supports the premiums for PEBB retiree insurance. PEBB coverage may be a smart choice for you.

If you plan to either **enroll** or **defer** in PEBB retiree insurance, you must notify PEBB **no later** than **60 days** after your employer insurance (including COBRA or continuation coverage) ends. Please review these materials to familiarize yourself with procedures to enroll now or defer (*protect*) this benefit for future enrollment.

**Call PEBB at 1-800-200-1004 or go online at: [www.hca.wa.gov/pebb](http://www.hca.wa.gov/pebb)**

- Request/View/Print a **Retiree Enrollment Guide**
- View and print applicable retiree enrollment forms
- Get answers to your questions about PEBB retiree insurance

Certain eligibility requirements and procedures must be met to **enroll** in or **defer** PEBB retiree insurance:

1. **Retirement eligibility requirements:** When your employer-paid coverage, COBRA coverage or continuation coverage ends, you must meet the following criteria:
  - a. Department of Retirement Systems (DRS) **Plan 1 and 2** members:
    - Must meet the eligibility criteria of your retirement plan
    - **Must immediately** begin to receive a monthly retirement plan payment,
      - Unless DRS offers and you accept a lump sum actuarially equivalent payment, as allowed by the plan.
  - b. DRS **Plan 3** members:
    - Must meet the eligibility criteria of your retirement plan
    - You are **not** required to receive a retirement plan or lump sum payment
      - Must be at least age 55 and with at least 10 years of service in Plan 3, or
      - Be at least age 65 and with at least 5 years of service
  - c. Members retiring under a Washington State Higher Education Retirement Plan (**HERP**):
    - Are **not** required to receive a retirement plan or lump sum payment if:
      - You meet your HERP plan's retirement eligibility criteria, OR
      - Are at least age 55 with 10 years of state service.
  - d. If your employer **does not** participate in a Washington State-sponsored retirement system:
    - You must meet the same age and years of service requirement as if you had been a member of the DRS Public Employee's Retirement System (PERS) Plan 1 or Plan 2.
      - You are **not** required to receive a monthly retirement plan payment.

**Procedural requirements:** PEBB must **receive** the *Retiree Coverage Election Form (form A)*, indicating you are **enrolling** in or **deferring** coverage:

- **No later than 60 days** after your employer-paid coverage, COBRA or continuation coverage ends
  - If enrolling in a Medicare Advantage or Medicare Advantage Prescription Drug (MAPD) plan, PEBB must receive Form A no later than the last day of the month before the month your employer-paid coverage, COBRA coverage, or continuation coverage ends. Otherwise, you may not select these plans unless you have a special open enrollment.
- If retiring due to a DRS approved **disability** retirement, you must meet PEBB eligibility and procedural requirements per [WAC 182-12-171](#) or [182-12-211](#). PEBB must receive **Form A**, and any other applicable forms, **no later than 60 days** after employer-paid coverage ends or the date of the DRS determination/approval letter.

If the PEBB Program **does not receive** the *Retiree Coverage Election Form A* within your 60-day window you lose all rights to enroll in or defer PEBB retiree insurance unless you regain eligibility in the future. To regain eligibility, you would have to return to work in a PEBB benefits-eligible position.

#### A. Enrolling in PEBB retiree insurance

1. If you are **enrolling** in PEBB retiree insurance when your employer-paid coverage, COBRA or continuation coverage ends:
  - a. **6 months** prior to retirement verify your retirement eligibility:
    - DRS Plan 1, 2 or 3 members, contact DRS (1-800-547-6657) or visit [www.drs.wa.gov](http://www.drs.wa.gov)
      - Plan 1 and 2 members **must immediately** begin receiving their retirement plan payment when their employer coverage ends.
    - Contact your employer if you are a member of a HERP or non-Washington State- sponsored retirement system.
  - b. **3-6 months** prior to enrolling in PEBB retiree insurance:
    - Request a *Retiree Enrollment Guide* from PEBB.
    - Contact Social Security Administration (SSA) to:
      - Enroll\* in Medicare Parts A and B if eligible (unless already enrolled)  
\*Eligibility for Medicare typically begins at age 65
      - Ensure that any family members you wish to cover (who are eligible for Medicare) are enrolled in Medicare Parts A and B
      - Make certain you understand the Initial Enrollment Period (IEP) and Special Enrollment Period (SEP) for Medicare and how these timelines effect the start date of Medicare.
  - c. **30-90 days** prior to your employer paid coverage, COBRA or continuation coverage ending:
    - Submit the following to PEBB:
      - Your Retiree Coverage Election **Form A** and any other applicable forms/documents
      - Payment for your first month's health coverage premium (and any applicable surcharges)
        - Unless using pension deduction
    - If entitled to Medicare Parts A and B:
      - Submit a copy of your Medicare ID card (or Social Security entitlement letter) showing enrollment in Parts A and B
      - If enrolling family members who are eligible for Medicare, also submit a copy of their Medicare ID card(s) showing enrollment in Medicare A and B

*30-90 days prior to employer paid coverage ending continued....*

- If enrolling in the Medicare Supplement Plan G you must also submit Form B
- If enrolling in one of the Kaiser Medicare Advantage plans or the UnitedHealthcare PEBB Balance or Complete plans, you must also submit Form C

## **B. Deferring enrollment in PEBB retiree insurance**

1. If you are eligible for PEBB retiree insurance and wish to **defer** enrollment:

a. You must be continuously enrolled in:

- A Washington State educational service district-sponsored, PEBB-sponsored, or SEBB-sponsored medical plan as a dependent, including COBRA or continuation coverage, or
- Other employer-based group medical insurance as an employee or the dependent of an employee; or
- Medicare Parts A and B and a Medicaid program that provides credible coverage (*your dependents may continue their PEBB health plan enrollment if they meet PEBB eligibility criteria and are not eligible for creditable coverage under a Medicaid program*); or
- Medical insurance as a retiree or the dependent of a retiree enrolled in a federal retiree plan\* (e.g., Tricare, CHAMPVA); or
- A qualified health plan through the Health Benefit Exchange if not eligible for Medicare Parts A and/or B\*

\*Those who defer for Federal retiree or exchange coverage have a one-time opportunity to enroll in PEBB coverage.

b. **30-60 days** prior to separating employment

- Request a *Retiree Enrollment Guide* from PEBB.
- Make 2 copies of your completed *Retiree Coverage Election Form (A)*,
- Submit one copy to PEBB and keep a copy for your files.
- The form must be **received** by PEBB **no later than 60 days** after your employer-paid coverage, COBRA coverage or continuation coverage ends.

## **C. Enrolling in PEBB retiree insurance after having deferred coverage**

1. If you are **enrolling** in PEBB retiree insurance after having had continuous insurance enrollment in qualifying coverage as required (see section B):

a. **3-6 months** prior to enrolling in PEBB retiree insurance:

- Request a *Retiree Enrollment Guide* from PEBB.
- Contact Social Security Administration (SSA) to:
  - Enroll\* in Medicare Parts A and B if eligible (unless already enrolled)  
\*Eligibility for Medicare typically begins at age 65
  - Ensure that any family members you wish to cover (who are eligible for Medicare) are enrolled in Medicare Parts A and B
  - Make certain you understand the Initial Enrollment Period (IEP) and Special Enrollment Period (SEP) for Medicare and how these timelines effect the start date of Medicare.

b. **30-90 days** prior to your qualifying coverage ending:

- Submit the following to PEBB:
  - Your Retiree Coverage Election **Form A** and any other applicable forms/documents
    - PEBB must receive the form no later than 60 days after your coverage ended
  - Proof of continuous enrollment in qualifying medical coverage(s), listing when the coverage began and ended

*3-6 months prior to enrolling in PEBB retiree insurance continued....*

- Payment for your first month's health coverage premium (and any applicable surcharges)
  - Unless using pension deduction
- If eligible for Medicare Parts A and B:
  - Submit a copy of your Medicare ID card (or Social Security entitlement letter) showing enrollment in Parts A and B
  - If enrolling family members who are eligible for Medicare, also submit a copy of their Medicare ID card(s) showing enrollment in Medicare A and B
- If enrolling in the Medicare Supplement Plan G you must also submit Forms E and B
- If enrolling in one of the Kaiser Medicare Advantage plans or the UnitedHealthcare PEBB Balance or Complete plans, you must also submit Forms E and C

## Resources

PEBB Customer Service: 1-800-200-1004 | 360-725-0440

DRS Customer Service: 1-800-547-6657 | 360-664-7000

[PEBB retiree website](#)

[Retiree Enrollment Guide](#)

[PEBB retiree insurance forms webpage](#)

[PEBB Continuation Coverage Election Notice](#)

[Department of Retirement Systems website](#)

## For more information on Medicare

[How PEBB retiree plans work with Medicare](#)

[Social Security Administration](#): 1-800-772-1213 (TTY 1-800-325-0778)

[Medicare](#): 1-800-MEDICARE (1-800-633-4227)

Statewide Health Insurance Benefits Advisors ([SHIBA](#)): 1-800-562-6900