

# SEBB My Account – Attestations for surcharges

<https://myaccount.hca.wa.gov>

- 1) Click 3 – Make Attestations or
  - a. Click Here to make attestations

Reattestation Required

You are required to complete your spousal attestation again for open enrollment. If re-attestation is not completed, you will default into spousal attestation surcharge of \$50 that will take effect on January 01, 2025.

[Click Here to make attestations.](#) a

- 2) Verify or update Tobacco Use

Premium surcharge attestations

Attest to whether the surcharges below apply to you by checking the appropriate boxes, then click **Submit** at the bottom to submit.  
[Additional information on surcharges.](#)

Tobacco use premium surcharge

[Learn about this surcharge](#) before you change your attestation.

**Events that require a change:** You must change your attestation when you or your enrolled dependents' (age 13 or older) tobacco use status changes. If you check YES or leave the checkboxes blank for yourself or any dependents listed below, you will be charged the monthly \$25 premium surcharge.

**Note:** Enrolled dependents ages 12 and younger are automatically defaulted to NO. You do not need to attest when the dependent turns age 13 unless they use, or begin using, tobacco products.

Have the people listed below used tobacco products in the last two months? Select Yes or No below. If they are enrolled in their SEBB medical plan's tobacco cessation program (if age 18 or older) or have accessed information or resources in [Smokefree Teen](#) (if ages 13-17), select NO. If a provider finds that ending tobacco use or participating in your medical plan's tobacco cessation program will negatively affect your or your dependent's health, see more information in the [SEBB Program Administrative Policy 91-1](#).

Member name	Response	Date started tobacco use
MC DUGLE	<input checked="" type="checkbox"/> All YES? <input type="checkbox"/> All NO? No	
Open Enrollment	Yes	mm/dd/yyyy
Mc Dugle	No	

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### 3) Verify or update Spousal Surcharge questions (required for spouses on medical)

#### Spouse or state-registered domestic partner coverage premium surcharge

[Learn about this surcharge](#) before you change your attestation.

1. Are you covered by your spouse or state-registered domestic partner (SRDP) in a School Employees Benefits Board (SEBB) medical plan under a dependent account in 2021?  
 No  Yes
  2. Will they be eligible for medical coverage through their employer in 2021? (If they will not be employed in 2021, answer NO.)  
 No  Yes
  3. Will their employer offer at least one medical plan that serves their county of residence in 2021?  
 No  Yes
  4. Has your spouse or SRDP elected not to enroll in their employer's medical (including PEBB coverage) in 2021?  
 No  Yes
  5. Will the coverage offered by your spouse's or SRDP's employer in 2021 NOT be through the SEBB Program or a TRICARE plan? Answer YES if their employer does not offer SEBB coverage or a TRICARE plan. Answer NO if their employer offers SEBB Coverage or a TRICARE plan.  
 No  Yes
  6. Will your spouse's or SRDP's share of the medical premium through their employer be less than \$109.26 per month in 2021?  
 No  Yes
- Yes, I am subject to the \$50 spouse or state-registered domestic partner coverage premium surcharge in 2021.  
 No, I am not subject to the spouse or state-registered domestic partner coverage premium surcharge in 2021.

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### 4) Click Continue

#### LEGAL NOTICE

By selecting the **Submit** button below:

- I declare that the information I have provided is true, complete, and correct. If it isn't, or if I do not provide timely, updated information, I will be charged premium surcharge(s).
- I declare that one (or more) of the circumstances described above occurred that requires me to change my attestation to the tobacco use and/or spouse or state-registered domestic partner coverage premium surcharge, and that I'm reporting it within the SEBB Program's deadlines.
- I am replacing all Premium Surcharge Attestation Change forms, and electronic surcharge attestations previously submitted.
- A change that results in a premium surcharge will begin the first day of the month following the status change (the date you or your dependents started using tobacco products). If that day is the first of the month, the change to the surcharge begins on that day.
- A change that results in removing the premium surcharge (you or your dependents stopped using tobacco products, enrolled in your SEBB medical plan's tobacco cessation program if age 18 or older, or have accessed information and resources at Smokefree Teen if age 13 to 17) will begin the first day of the month following receipt of the attestation. If that day is the first day of the month, the change to the surcharge begins on that day.

HCA's privacy notice: We will keep your information private as allowed by law. See Our [privacy notice](#).

Continue

Clear changes

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### 5) Click Ok and Ok

#### Your premium surcharge attestation changes

##### Attestation change alert

Based on your current attestations, you will NOT pay the \$25 tobacco use surcharge.

Ok

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##### Attestation change alert

Based on your current attestations, you will NOT pay the \$50 spousal surcharge.

Ok

## 6) Click Confirm

### Your premium surcharge attestation changes

Thank you!

If correct, select *Confirm*. To adjust your answer, select *Cancel*.

Generally, changes which result in adding a premium surcharge will take effect the month following the status change. If that day is the first day of the month, the change begins that day. Changes that result in removing a premium surcharge will take effect the month following receipt of the attestation. If that day is the first day of the month, the change will be effective that day. Changes made during the annual open enrollment will be effective January 1 of the following plan year.

- Based on your tobacco attestation, you will NOT pay the \$25 tobacco premium surcharge.
- Based on your spousal attestation you will NOT pay the \$50 spousal surcharge.

▶ Confirm

✕ Cancel

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