PEBTF OPEN ENROLLMENT

2024 PEBTF Open Enrollment October 14 to November 1, 2024 For Active and COBRA Members

It's Open Enrollment time - your annual opportunity to review your medical plan options and select a plan that works best for you and your family. Any change you make will be effective January 1, 2025.

Highlights Of Your 2025 Benefits

- Same plan options as you have now.
- No change in copays or the PPO deductible.
- No benefit changes except for the enhanced benefits for 2025. See page 5.
- Preventive services remain covered at 100% no copay and no deductible for these services.
- New ID card you will receive a new medical ID card even if you don't make a plan change.
- The additional biweekly buy-up cost for the Choice PPO (for employees hired on or after August 1, 2003) continues. **The biweekly PPO buy-up will be \$21.89 for single coverage and \$56.47 for family coverage.** Costs for part-time employees and COBRA members change each year. See page 4 for cost information.
- Prescription Drug Plan remains the same, though the formulary may change throughout the year.
- Dental and Vision Plans remain the same except for the enhanced benefits for 2025. See page 5.

How Do I Decide Which Medical Plan Is Right for Me?

Visit www.pebtf.org > 2024 Open Enrollment.

- Check the plan's network of providers. Links to the plans' provider directories are under the Health Plan Information tab which can be accessed through the 2024 Open Enrollment tab. The Custom HMO has a limited network of providers so it's important that you check that plan's network to ensure the providers you want are participating before enrolling.
- Review the copays and any deductibles. Summary information is on page 2. You may also use the Benefit Comparison Tool under the Open Enrollment section of the website.

Summary of Benefits & Coverage (SBC)

The PEBTF provides SBCs, which include standard information to help you understand and compare your medical plan options. The SBC is "free of charge." You can view it online at www.pebtf.org or order a copy to be mailed to your home. You may also call the PEBTF to request a copy.

Summary Plan Description (SPD)

The SPD includes detailed information about your benefits. You can also find it on www.pebtf.org.

- Determine if you want to be able to see out-of-network providers. If you do, then you would want to consider one of the PPO plans.
- Consider referrals which are needed under the Custom HMO option. You must get a referral from your primary care physician (PCP) before you can see any other network provider (except in an emergency). If you do not, you will have to pay out-of-pocket there will be no coverage under your plan.
- Consider any payroll deductions. See page 4.

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Open Enrollment Changes are Effective January 1, 2025

for Active Members

- If you want to make a change, you must do so by **Friday, November 1**.
- During Open Enrollment, you may remove any dependents without a qualifying life event, which is recommended only if your dependent has other coverage.
- If you are happy with your current health plan, you don't have to do anything. You will keep your current health plan for 2025.

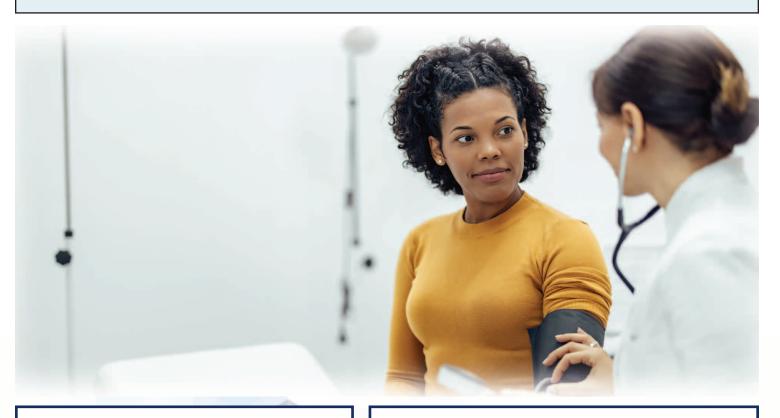
Your Plan Choices - at a Glance				
	Choice PPO (Aetna)	Basic PPO (Highmark)	PEBTF Custom HMO	
Biweekly buy-up • Single • Family * Does not apply to employees hired prior to 8/1/03	\$ 21.89* \$ 56.47*	\$0 \$0	\$0 \$0	
Annual Network Deductible Must be paid first for: Hospital expenses (inpatient and outpatient) and medical/surgical expenses including physician services (except office visits), imaging, skilled nursing facility care and home health care.	\$400 single \$800 family	\$1,500 single \$3,000 family	\$0	
Copays	\$20 PCP \$45 specialist \$50 urgent care \$200 ER (waived if admitted)	\$20 PCP \$45 specialist \$50 urgent care \$200 ER (waived if admitted)	\$5 PCP \$10 specialist \$50 urgent care \$150 ER (waived if admitted)	
Visit network providers only			✓	
Limited provider network (visit www.pebtf.org to check the network)			✓	
May visit out-of-network providers (at additional cost)	√	✓		
Referrals needed for specialist care			✓	
Diagnostic tests (lab) - PPO members may use QuestSelect to save money; visit the PEBTF website for more information	Covered 100% at Quest Diagnostics or LabCorp, \$30 lab copay elsewhere	Covered 100% at Quest Diagnostics or LabCorp, \$30 lab copay elsewhere	100% (Referral required)	

All benefits are limited to covered services that are determined by the plan to be medically necessary. For more detailed information visit www.pebtf.org.

For More Information				
PEBTF Website	Visit www.pebtf.org > 2024 Open Enrollment. View the webinar, plan benefits, and compare plans in your county of residence.			
Contact the PEBTF	By Phone: Call 1-800-522-7279 or email openenrollment@pebtf.org. In Person: If you prefer to speak to someone in person, you can visit the PEBTF office at 150 S. 43rd St., Harrisburg. Appointments are available the last Thursday of each month (except on holidays). Please call the PEBTF to schedule. Appointments must be scheduled in advance. Unscheduled walk-ins are not accepted.			
Contact PEBTF Health Advocate	Call 1-855-855-4238 to help locate network health care providers.			
Contact the HR Service Center (or your local HR office if your agency is not supported by the HR Service Center)	Visit Employee Self Service at www.myworkplace.pa.gov to complete your enrollment.			

Open Enrollment is more than just selecting a health plan. Here are some important things to consider this time of year:

- Are all your dependents/beneficiaries up-to-date?
 Consider your life insurance policy, pension, and other benefits where you have beneficiaries listed.
- Is your address up-to-date? If you've moved this year, make sure that your agency has your correct address. This can have an impact on benefits and taxes.
- **Voluntary Benefits:** Some voluntary benefits such as Healthcare Flexable Spending Account and the Dependent Care Account Program, require annual enrollments.
- Are your benefits up-to-date? It's your annual opportunity to consider additional benefits that offer discounts, cash payments, or even tax-saving opportunities for your existing coverages. If your agency is supported by the HR Service Center or you are in the Liquor Control Board, watch for information in your email or at www.employeeresourcecenter.oa.pa.gov. For agencies not supported by the HR Service Center watch for information from your agency throughout the year on benefits and programs that may be important to you.



ID Cards: You will receive a new medical ID card in mid-December even if you do not make a plan change. Provide the new ID card to your providers after January 1, 2025.

For More Information: The 2025 Summary Plan Description (SPD) will be available the end of December. You may view, download or order a copy by visiting www.pebtf.org.

Your Health Benefits: Watch for future newsletters or other benefit communications, which will include any updates to your benefits.

Get Healthy Know Your Numbers:

Have you scheduled or completed your annual wellness screening? Make sure you do so before December 31, 2024 – not only will you get important information about your health but you will save money on your employee contribution beginning July 1, 2025. That's a savings of \$1,828.75 a year on a \$66,500 annual salary! To get started, visit www.pebtf.org and click on the Get Healthy logo on the left side of the home page and follow the instructions to go to the Quest Diagnostics website. You will find FAQs, helpful tips and a comparison chart, too.

Cost of Benefits

Full-Time Employees

- You pay the health care contribution through payroll deductions plus the cost reflected in the table below. You can save money if you participate in the Get Healthy Program.
- The Basic PPO and PEBTF Custom HMO options in your county of residence are offered at no additional cost to you.
- You may purchase, through payroll deductions, the Choice PPO for an additional biweekly plan buy-up cost indicated below. (Buy-up applies to employees hired on or after August 1, 2003 only).

	Single Biweekly Cost	Family Biweekly Cost	If you add dependents during the first 30 days of employment, you pay the Buy-up Cost biweekly	
Choice PPO	\$ 21.89	\$ 56.47	\$495.85	
Basic PPO	\$ 0	\$ 0	\$439.38	
PEBTF Custom HMO	\$ 0	\$ 0	\$466.54	
Prescription Drug (first 30 days)	\$108.06	\$268.07	See Family Biweekly Cost	

All Part-Time Employees

• You pay the health care contribution through payroll deductions plus the cost reflected in the table below. You can save money if you participate in the Get Healthy Program.

Part-Time Employees - After 30 Days of Employment

Cost of Single Coverage Biweekly				
	Medical Only	Medical + Prescription Drug	Medical + Supplemental	Medical+ Prescription Drug+ Supplemental
Choice PPO	\$ 160.93	\$ 202.49	\$ 168.49	\$ 210.05
Basic PPO	\$ 139.04	\$ 180.60	\$ 146.60	\$ 188.16
PEBTF Custom HMO	\$ 147.64	\$ 189.20	\$ 155.20	\$ 196.76
Prescription Drug Only	\$ 41.56			
Supplemental Only	\$ 7.56			

Cost of Family Coverage Biweekly				
	Medical Only	Medical + Prescription Drug	Medical + Supplemental	Medical+ Prescription Drug+ Supplemental
Choice PPO	\$ 397.91	\$ 505.14	\$ 417.40	\$ 524.63
Basic PPO	\$ 358.73	\$ 465.96	\$ 378.22	\$ 485.45
PEBTF Custom HMO	\$ 380.91	\$ 488.14	\$ 400.40	\$ 507.63
Prescription Drug Only	\$ 107.23			
Supplemental Only	\$ 19.49			

Questions About Costs?

Call the HR Service Center at 1-866-377-2672. Call your local HR office if your agency is not supported by the HR Service Center.

Benefit News

Benefit Enhancements for January 1, 2025



These enhancements to the health benefits will be effective January 1, 2025:

Medical Benefits:

- **Medical nutritional counseling** will be covered according to your plan's medical policy (this benefit is effective December 1, 2024). Currently, only two visits are covered with a diagnosis of obesity or those with known risk factors for cardiovascular disease. Contact your medical plan for more details.
- Allergy serum will be covered under the medical plan instead of the prescription drug plan. PPO members: The allergy serum will be covered at 100% after your annual deductible. Custom HMO members: You will pay the appropriate copay (\$5 for PCP visit/\$10 for specialist visit).

Prescription Drug Benefits:

Under the Prescription Drug Plan, generic medications save you money because you pay a low copay. You may obtain a brand-name drug, but if an FDA-approved generic is available, you will pay a higher copay and the cost difference between the brand name drug and the generic drug. An exception process will be available for very limited circumstances. More information may be found on the Prescription Drug Plan section of www.pebtf.org in January 2025.

Dental Benefits:

- **Annual plan maximum** will be increased from \$1,500 to \$2,000 (preventive and diagnostic dental services will not count toward the annual plan maximum).
- Orthodontic lifetime maximum will be increased from \$1,750 to \$2,250.
- **Dental implants,** which had previously been excluded, will be covered at 60% plan allowance.

Vision Benefits:

- **Eveglass frames** allowance will increase from \$150 to \$175.
- **Transition lenses** will be covered at a reimbursement of \$65 for single vision and \$70 for bifocal/trifocal lenses. Coverage for transition lenses had previously been excluded.

The enhanced benefits are in addition to changes that were effective August 1, 2024, which include:

- Medical Benefits: Inpatient Hospice is covered under the medical benefit.
- Dental Benefits: The PEBTF's dental plan's network of dentists, provided by United Concordia, expanded to access an additional 1,022 dentists in Pennsylvania through their Elite Plus network.
- **New Hire Eligibility:** 90-day waiting period for supplemental benefits and dependent buy up was reduced to 30 days.



PEBTF Benefits: Supporting Your Health

Your PEBTF benefits are available to help you stay healthy and provide for you when facing an illness or surgery. Here are benefits that can help you stay healthy:

Preventive Care: Stay up to date with your annual physical and other preventive screenings. These PEBTF preventive benefits are at no cost to you. To see what is covered under your plan, visit https://www.pebtf.org/Active/AdditionalBenefits/Preventive.aspx. You'll also find a list of preventive medications that are covered at no cost under the Prescription Drug Plan.

Flu Shot: This is the time of year to schedule your flu shot at your doctor's office or a CVS Caremark Flu Shot network pharmacy. To schedule a flu shot at a CVS Pharmacy, make an appointment through the CVS pharmacy app. You may call CVS Caremark at 1-888-321-3261 with questions. The phone number also appears on your prescription drug ID card.

Other Preventive Immunizations: Just like the flu shot, you may get your COVID-19 vaccine and other covered vaccines at a CVS network pharmacy or your doctor.

Vision and Dental Benefits: Don't neglect your eyes and your teeth. Your benefits provide for an annual vision exam covered in full at a participating provider. The Dental Plan provides for a routine dental exam and cleaning covered in full every six months at a participating dentist. Visit www.pebtf.org for links to these plans' websites to search for network providers.

Don't miss out on these additional programs to support your health:

- **Discount Programs:** Your medical plan offers discounts to health clubs, healthy eating and nutrition plans, and other services.
- **Diabetes Prevention Programs (DPPs):** Your medical plan offers free DPPs to members who are identified as having prediabetes or score as high risk for developing Type 2 diabetes. A DPP is a year-long program consisting of 16 weekly sessions, followed by monthly sessions for the rest of the year. This lifestyle change program is designed to help you lose weight, adopt healthy habits, and reduce your risk for developing Type 2 diabetes.
- **Livongo For Diabetes:** The Livongo program helps people with diabetes to live happier, healthier lives. It not only helps people manage their diabetes but also helps with blood pressure, weight, stress, and more, all at no cost to you. Members with insulin-dependent diabetes who are taking hypoglycemic drugs may participate in the Livongo Program.
- Quit For Life®: This free program is for anyone who would like to quit using tobacco, regardless of the product cigarettes, cigars, vaping, or smokeless tobacco.

Visit the Get Healthy section of www.pebtf.org to find free resources to improve your health.

Muscle & Joint Home Physical Therapy

We introduced the virtual muscle and joint physical therapy program earlier this year. Since then, over 2,500 PEBTF members have participated in a program.

Aetna members have access to Hinge Health and Highmark members have access to Sword. Also new to the Sword program is Bloom, the Virtual Pelvic Health Program for women.

These programs will help you overcome back, knee, and other joint and muscle pain. You'll be able to work virtually with a physical therapist to design a home exercise program to fit into your busy schedule.

Your program will combine gentle exercise with one-on-one support to improve your condition, reduce your pain, and help you move with confidence. All at no cost to you!



Here is what two of our members have to say about the program:

"The further I go in this program the better I'm beginning to feel. Thank you for providing us with this wonderful free program. I can't be the only one who is beginning to feel better than I've felt in years."

"I think the program is one of the pillars that is helping me feel a little better about starting my day. The stretches and light achievable exercises help me both physically and mentally. I'm not sure what is ahead of me but I do know I want to continue this program."

Scan the QR code to learn more or to sign up.

Calm App Offered for Free

Give your wellbeing a boost with Calm. Calm is the #1 wellbeing app that can help you tackle stress, get a good night's sleep and feel more present in your life. It's now offered free under your Optum Mental Health and Substance Use benefit.

To get started, go to liveandworkwell.com. Enter your username and password or enter access code, Pennsylvania. Select View my benefits and scroll down to the Calm app section.

For existing Calm users, you can easily transition your personal Calm membership to the Calm benefit by logging into your existing Calm app and accessing your Profile, then Settings, and selecting 'Link Organization Subscription' and entering **Pennsylvania** in the group code field.



HIPAA Notice of Privacy Practices

In 2003, the PEBTF began mailing the Health Insurance Portability and Accountability Act (HIPAA) Notice of Privacy Practices to all members who were enrolled in PEBTF benefits. To this day, mailing continues to members newly enrolled for PEBTF benefits. The Notice of Privacy Practices lists **your rights** under HIPAA, and it applies to records maintained by the PEBTF regardless of the source of the information. The notice tells you about the ways in which the PEBTF may use and disclose your Protected Health Information (PHI). It also describes your rights and certain obligations the PEBTF has regarding the use and disclosure of your PHI.

To download a copy of the HIPAA Notice of Privacy Practices, go to www.pebtf.org. Find it under Publications & Forms > HIPAA.

Verification Procedures at the PEBTF

Most of you have heard about HIPAA. You have received information from the PEBTF in the past and may have been presented with information at your doctor's office.

The PEBTF takes the privacy of our members very seriously and works hard to protect that privacy. When you call the PEBTF, a representative will ask you for the last four digits of your social security number, date of birth and possibly, your address. This ensures that we are giving your protected information to only you. Please be ready with this information when you call.

PEBTF May Cancel Your Coverage for Fraud or Intentional Misrepresentation

Important: If you intentionally provide false or misleading information about eligibility for coverage under the PEBTF Plan (or about a claim) or you fail to make a required contribution on time, your coverage may be terminated retroactively. This may occur, for example, if you file a false claim, fail to notify us promptly of a divorce, or fail to submit timely proof of birth or adoption that verifies your relationship with a new child whom you have added as a dependent.





Postmaster, please deliver between October 4 and October 15, 2024.

Local: 717-561-4750 Toll Free: 800-522-7279

PEBTF telephone hours:

8 a.m. - 5 p.m.

This newsletter is available in an alternative format. Please contact the PEBTF to discuss your needs.

Find us on Facebook, PEBTF, for wellness and benefit information.



IMPORTANT OPEN ENROLLMENT INFORMATION

Visit www.pebtf.org, 2024 Open Enrollment for more information.

If you want to make a change, do so by Friday, November 1, 2024.

If you have questions about your medical plan options, coverage for services, etc. please contact the PEBTF at 1-800-522-7279.

When you are ready to select a medical plan, you can use Employee Self Service at www.myworkplace.pa.gov beginning October 14, 2024, or contact the Commonwealth's HR Service Center. You can call your local HR office if your agency is not supported by the HR Service Center.

All online transactions must be completed, and all forms must be postmarked by **Friday, November 1**.



The PEBTF complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-522-7279 (TTY: 711)

.注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-800-522-7279 (TTY: 711).