

PEBTF OPEN ENROLLMENT

for Non-Medicare

2024 PEBTF Open Enrollment October 14 to November 1, 2024 For Non-Medicare Retiree and COBRA Members

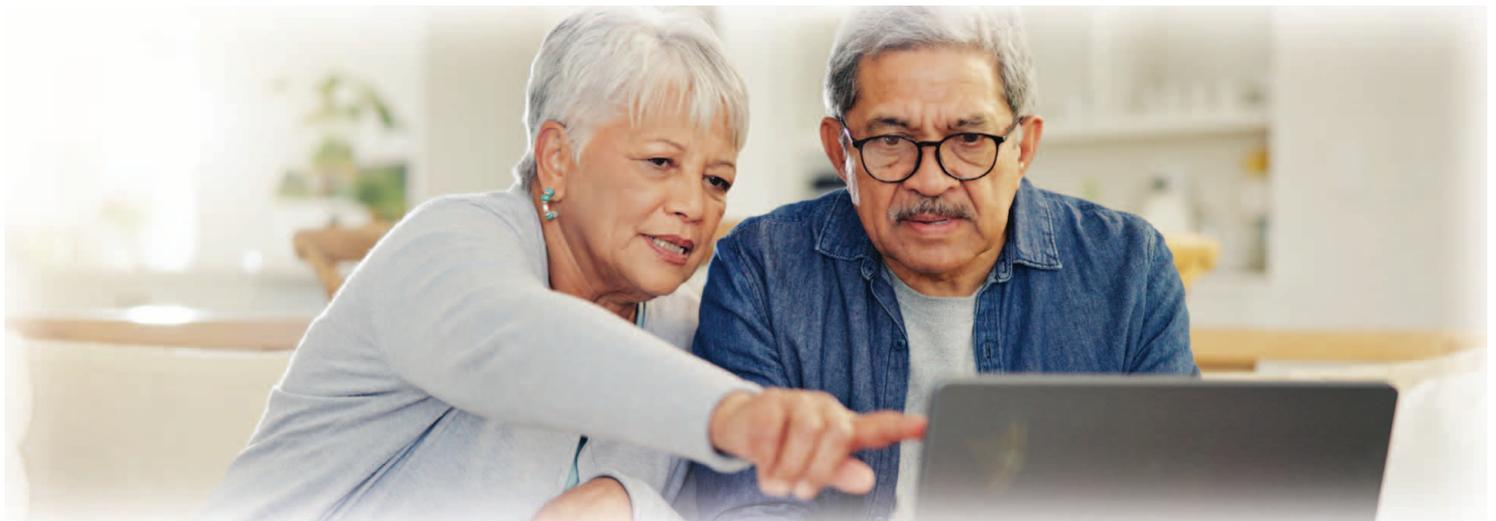
It's Open Enrollment time - your annual opportunity to review your medical plan options and select a plan that works best for you and your family. Any change you make will be effective January 1, 2025

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 4.
- 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 biweekly buy-up cost for the Choice PPO changes each year (for retirees, who as active employees were hired on or after August 1, 2003). See page 3 for cost information. Also, costs for survivor spouses and COBRA members change each year. Survivor spouses, refer to the rates you receive in a separate mailing. COBRA members, refer to the rates you receive with this newsletter.
- Prescription drug plan remains the same, though the formulary may change throughout the year.

Open Enrollment Changes are Effective January 1, 2025

- 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 plan, you don't have to do anything during Open Enrollment. You will keep your current medical plan for 2025.



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 Plans 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 3. You may also use the Benefit Comparison Tool under the Open Enrollment section of the website.
- 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 monthly costs. See page 3. Survivor spouses and COBRA members, refer to the monthly rates you received.

If you want to make a change, go to www.pebtf.org > 2024 Open Enrollment and click on Enrollment Instructions to learn how you can make a plan change - you can do so online or via a paper enrollment form.



Your Plan Choices – at a Glance

	Choice PPO (Aetna)	Basic PPO (Highmark)	PEBTF Custom HMO
Monthly Buy-Up Cost (for retirees, who as active employees were hired on or after 8/1/03)	\$ 82.68 * \$ 165.36 *	\$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.

Medicare Eligible Retirees Open Enrollment

Medicare Open Enrollment is being held **October 21 to November 8, 2024**. If you have a family member enrolled in your benefits who is eligible for Medicare, you will also receive a Medicare Open Enrollment Newsletter at your home in mid-October. The Aetna Medicare Open Access PPO is offered to Medicare-eligible members. If you do not receive a Medicare Open Enrollment Newsletter, please visit www.pebtf.org or contact the PEBTF at 1-800-522-7279.



Benefit News

Retired Employees Health Program (REHP) Benefit Enhancements

- **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). This benefit is effective January 1, 2025.

- **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 January 1, 2025. More information may be found on the Prescription Drug Plan section of www.pebtf.org in January 2025.

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 REHP Benefits Handbook 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.

The enhanced benefits are in addition to this change that was effective August 1, 2024: Inpatient Hospice is covered under the medical benefit.

REHP Benefits: Supporting Your Health

Your REHP 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 REHP preventive benefits are at no cost to you. To see what is covered under your plan, visit www.pebtf.org > PEBTF - Non-Medicare Eligible Retiree Members Information: Preventive Benefits. 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.

We have additional programs to help you stay healthy:

- **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.

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.

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.

Muscle & Joint Home Physical Therapy

We introduced the virtual muscle and joint physical therapy program earlier this year. Since then, over 2,500 PEBTF and REHP 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!

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



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

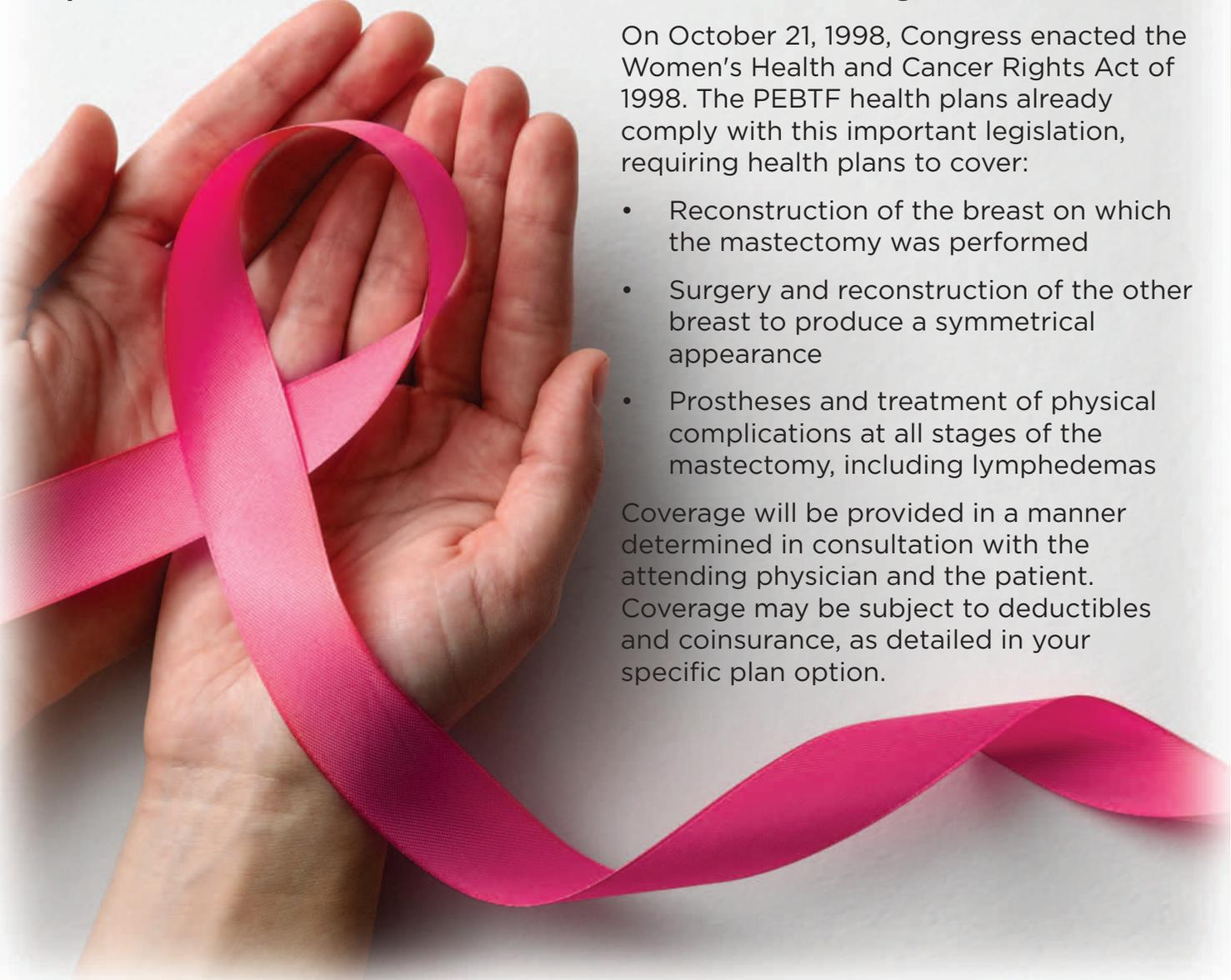
“The further I go in this program the better I’m beginning to feel. Thank you for providing us with this wonderful free program. I can’t be the only one who is beginning to feel better than I’ve felt in years.”

“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.”



Annual Notification

Important Information about the Women's Health and Cancer Rights Act of 1998

A pair of hands is shown from the left, cupping a bright pink awareness ribbon. The ribbon is looped and draped across the hands, extending towards the right side of the page. The background is a plain, light color.

On October 21, 1998, Congress enacted the Women's Health and Cancer Rights Act of 1998. The PEBTF health plans already comply with this important legislation, requiring health plans to cover:

- Reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prostheses and treatment of physical complications at all stages of the mastectomy, including lymphedemas

Coverage will be provided in a manner determined in consultation with the attending physician and the patient. Coverage may be subject to deductibles and coinsurance, as detailed in your specific plan option.

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 REHP 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.

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)。



Presorted Standard
U.S. Postage
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**Postmaster, please deliver
between October 3 and
October 12, 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

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