# PEBTF OPEN ENROLLMENT

**for Non-Medicare Members**

## What's Inside



## 2025 PEBTF Open Enrollment

### October 13 to October 31, 2025

### For Non-Medicare Retiree and COBRA Members

**For 2026, the Basic PPO, Choice PPO and Custom HMO will be provided by Aetna. More details included inside!**

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, 2026.

**Highlights Of Your 2026 Benefits**

- Aetna will provide the Basic PPO, Choice PPO and Custom HMO plans. Highmark and Geisinger will no longer be offered.
- No change in copays or the PPO deductibles.
- Preventive services remain covered at 100% – no copay and no deductible for these services.
- Visit the ***2026 Plan Changes and Open Enrollment Resources*** section of www.pebtf.org for links to the provider directories. Make sure your providers are in network before choosing a plan.
- Aetna Custom HMO:
  - Will be a statewide plan – that means you can visit an Aetna Custom HMO network provider anywhere in the state, if necessary.
  - Will no longer require referrals from your primary care physician to see a specialist. Visit any Aetna Custom HMO network specialist that you need to see.
- The Basic PPO continues without a PPO monthly buy-up.
- The monthly 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 6 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.
- Mental Health and Substance Use Plan remains the same.

**Coming Soon! New PEBTF Website**

We're excited to announce that a brand new PEBTF website is on the way! It will have a fresh new look that will make finding benefit information even easier. And it's mobile friendly.

We hope to roll it out in the coming months. Stay tuned for updates and sneak peeks on www.pebtf.org.

# Your Options for 2026
# Make the Right Choice for You!

Throughout our lives, our situations change. We may marry or divorce. Some may have children who are now in college. At any time, we could be diagnosed with a medical condition, and we will need our Retired Employees Health Program (REHP) health benefits even more.

Because our lives change, Open Enrollment is the time of year for you to evaluate your medical options to decide which plan works best for you and your family. Here's a look at the medical options and how three fictional members made their decision.

## Choice PPO – offered by Aetna

Meet Cindy. Cindy began her career with the Commonwealth in 1988 and retired in 2018. She and her husband have three children, with two of them attending state universities.

**Helpful Tip:** Preventive care is covered under all options at 100% at no cost to you. Visit www.pebtf.org for a list of covered preventive care services.

Cindy says. . .

*"I am thankful for my REHP health benefits. We were fortunate to have these benefits when my husband was diagnosed with cancer after a routine colonoscopy. With the Choice PPO option we were able to get a second opinion at Johns Hopkins in Baltimore. Johns Hopkins agreed with the course of treatment that our doctor in State College recommended. His surgery, follow-up treatments, and prescription drugs were covered by the REHP with very little out-of-pocket costs – we just paid the annual Choice PPO deductible, office visit copays and some prescription drug copays. It was one less thing to worry about when we were going through this stressful time. I'm happy to report my husband is back to 100% and there is no sign of cancer.*

*We chose the Choice PPO because of the low annual deductibles and the flexibility of being able to see both network and out-of-network providers. Also, two of my children are away from the area attending state universities. We need the flexibility so that they have coverage beyond emergency services wherever they are."*

For Cindy, the advantages of the Choice PPO are:

- Lower deductible amounts than the Basic PPO
- No PPO buy-up because she was hired prior to 8/1/2003
- Flexibility – may visit an in-network or an out-of-network provider

## Basic PPO – offered by Aetna

Meet Michael. Michael was hired in late 2003 and recently retired. In his spare time, he likes to visit Pennsylvania state parks and other nature trails. His weekends are spent hitting the road with his dog, Riley.

**Helpful Tip:** Retirees, who as active employees were hired on or after 8/1/03 pay a buy-up for the Choice PPO. The Basic PPO and Custom HMO are offered with no buy-up.

Michael says. . .

*"Because I was hired after August 2003, I knew I would have to pay the plan buy-up if I chose the Choice PPO. I prefer not to have additional money taken out of my pension and decided to take a look at the Basic PPO. This PPO offers the flexibility that I need because it has both an in-network and an out-of-network benefit. Even though the deductible is higher than the Choice PPO, chances are I will not have to pay the deductible because I typically just have a few office visit copays to pay each year. I know I can always visit a network urgent care center if I get hurt or sick while hiking out of town."*

For Michael, the advantages of the Basic PPO include:

- No plan buy-up
- Flexibility – may visit an in-network or out-of-network provider

## Custom HMO – offered by Aetna (Pennsylvania residents only)

Meet Janine. Janine retired in 2021. She lives in the Danville area and is planning on having knee replacement surgery in 2026.

Janine says . . .

*"I have to admit I was skeptical when I saw that the Geisinger Custom HMO wasn't going to be offered in 2026. I was afraid I would lose my doctors and the hospital in my area.*

*I was pleasantly surprised when I took a look at the Aetna Custom HMO network. All of my doctors and the area hospitals are in the Aetna Custom HMO network. And I found out I will no longer need a referral to see a specialist!*

*I also found out that the Aetna Custom HMO network for 2026 is statewide and not regional like it was with Geisinger. I will need to have knee replacement surgery and now I can decide if I want to get the surgery in Philadelphia where my daughter lives. It would be nice to be able to stay with her and her family for a few weeks while I'm recovering.*

*The Custom HMO still offers low copayments and no annual deductible – so I'm happy with my selection. I realize the Custom HMO offers a limited network and not all of the providers in my area are in the network but there are enough providers from which to choose. The limited network allows the copays to remain low and that was a big plus to me."*

For Janine, the advantages of the Custom HMO include:

- No plan buy-up
- No deductible and low copayments
- For 2026, no longer need a referral and can visit an Aetna Custom HMO network provider anywhere in the state, if necessary

**See page 6 for a comparison of the medical plan options or visit www.pebtf.org for a more detailed plan comparison tool.**

**Helpful Tip:** The Custom HMO option has the lowest copays but a limited network of providers and hospitals. Visit the ***2026 Plan Changes and Open Enrollment Resources*** section of www.pebtf.org to link to the Custom HMO provider directory. Review the network of providers before making a decision. **If you don't visit a network provider, you have no coverage under the plan.**

## How Do I Decide Which Medical Option Is Right for Me?

Visit www.pebtf.org > ***2026 Plan Changes and Open Enrollment Resources***.

1. Review the copays and any deductibles. Summary information is on page 6, or use the Plan Comparison Tool on www.pebtf.org.
2. Check the plan's network of providers. The Custom HMO has a limited network of providers. Check the network before you enroll. Select a network primary care physician (PCP) for you and each of your family members at the time of enrollment.
3. 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.
4. Consider the Choice PPO buy-up if, as an active employee, you were hired on or after August 1, 2003. See page 6.
5. If you are already enrolled in the Aetna Choice PPO or the Aetna Custom HMO and you are happy with your selection, you don't have to do a thing – you'll remain in your current plan for 2026.
   - **If you are a Highmark Basic PPO member and you do not elect another medical plan during Open Enrollment:** You (and any eligible non-Medicare dependents currently on your coverage) will automatically be enrolled in the Aetna Basic PPO effective January 1, 2026.
   - **If you are a Geisinger Custom HMO member and you do not elect another medical plan during Open Enrollment:** You (and any eligible non-Medicare dependents currently on your coverage) will automatically be enrolled in the Aetna Custom HMO, effective January 1, 2026. And, in most cases you will be assigned the same PCP you have today. If your PCP is not participating, you will be contacted to remind you to make a PCP selection during Open Enrollment
6. **To make a plan change:** Go to www.pebtf.org, ***2026 Plan Changes and Open Enrollment Resources***, select Retiree Member: Non-Medicare Eligible 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.

### Open Enrollment Changes are Effective January 1, 2026

- If you want to make a change, you must do so by Friday, October 31 (see below for details on automatic enrollment for current Highmark Basic PPO and Geisinger Custom HMO members).
- During Open Enrollment, you may remove any dependents without a qualifying life event, which is recommended only if your dependent has other coverage.
- 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, 2026.

### Attend an Aetna-hosted webinar or conference call where you can ask questions.

**Webinars:**

**Thurs., Oct. 9, 10 a.m.** **Wed., Oct. 22, 10 a.m.**

**Go to https://aet.na/pebtfbenefits or click on the QR code to attend.**

**Conference Call:**

**Tues., Oct. 14, 2 p.m.**

**Call 1-800-348-8581**

## Your Plan Choices – at a Glance

| | Choice PPO (Aetna) | Basic PPO (Aetna) | Custom HMO (Aetna) |
|---|---|---|---|
| **Monthly buy-up**<br>▪ **Single**<br>▪ **Family**<br>* For retirees, who as active employees, were hired on or after 8/1/03 | $ 8.59 *<br>$ 17.18 * | $0<br>$0 | $0<br>$0 |
| **Annual Network Deductible (no changes)**<br>Must be paid first for (other than preventive care and gene therapy): 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<br>$800 family | $1,500 single<br>$3,000 family | $0 |
| **Copays (no changes)** | $20 PCP<br>$45 specialist<br>$50 urgent care<br>$200 ER (waived if admitted) | $20 PCP<br>$45 specialist<br>$50 urgent care<br>$200 ER (waived if admitted) | $5 PCP<br>$10 specialist<br>$50 urgent care<br>$150 ER (waived if admitted) |
| **Visit network providers only** | | | ✓ |
| **Limited provider network** | | | ✓ |
| **May visit out-of-network providers (at additional cost)** | ✓ | ✓ | |

**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 > ***2026 Plan Changes and Open Enrollment Resources***, select Retiree Member: Non-Medicare Eligible. View the plan benefits, check out the plans' provider directories and compare plans in your county of residence.

Learn more about your benefits by viewing the PEBTF webinar. Feel free to view it anytime.

**Ask Aetna**

*Attend an Aetna-hosted webinar or conference call where you can ask questions. See page 5 for details!*

Non-Aetna members may reach out to Aetna at 1-833-770-1102 for any questions such as covered services, medical policies, network providers, transition of care, prior authorizations, etc.

***Transition of Care:*** Highmark and Geisinger members who are currently undergoing treatment for cancer or maternity care may reach out to Aetna at 1-833-770-1102.

***Prior Authorizations:*** Prior authorizations from Highmark and Geisinger that were approved and will still be active after 1/1/26, will be honored by Aetna.

Current Aetna members, call the phone number on the back of your Aetna ID card.

**Contact the PEBTF**

**By Phone:** Call 1-800-522-7279 or email openenrollment@pebtf.org.

**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.

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

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.

**To Learn More About. Your Benefits, Visit www.pebtf.org**

**REHP Benefits Handbook** includes detailed information about your benefits.

**Benefit News:** Watch for future newsletters or other benefit communications, which will include any benefit updates.

## 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.

**Exciting news!**

Retired state employees are now eligible to participate in the **State Employee Combined Appeal (SECA)**, a meaningful opportunity to support charitable organizations. For additional information, please visit SECA.pa.gov or call 717-787-9872.

PEBTF
Pennsylvania Employees
Benefit Trust Fund
150 S. 43rd Street
Harrisburg, PA 17111-5700

Presorted Standard
U.S. Postage
**PAID**
Kennedy
Printing Co.

**Postmaster, please deliver between October 1 and October 10, 2025.**

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

PEBTF telephone hours:
8 a.m. to 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, *2026 Plan Changes and Open Enrollment Resources*.**
**If you want to make a change, do so by Friday, October 31, 2025.**

This newsletter may contain a general description of the Plan. It is provided for informational purposes only and should not be viewed as a contract, offer of coverage, confirmation of eligibility or investment, tax, medical or other advice. In the event of a conflict between this newsletter and the official plan document, the official plan document will control however, to the extent expressly stated, an article may modify the provisions of the REHP Benefits Handbook. The Commonwealth reserves the right to amend, modify or terminate the terms of the Plan, including any options available under the Plan, at any time and for any reason, with or, without prior notice.

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）.