PEBTF OPEN ENROLLMENT

for Active Members

What's Inside

Choose the Right Medical Option. . .Page 2-3

At a Glance . . . . . .Page 4

To Make a Plan Change . . . . . .Page 5

Important Benefits Info . . . . . Page 6



2026 PEBTF Open Enrollment

October 12 to October 30, 2026
For Active and COBRA Members

Aetna continues to offer the Basic PPO, Choice PPO, and Custom HMO!

It's Open Enrollment time! Now is the time to explore your medical plan options and ensure you have the coverage that works best for you and your family. Even if you're not planning to make changes, reviewing the information can help you better understand your benefits. Any change you make during Open Enrollment will be effective **January 1, 2027**.

Visit the Open Enrollment section of www.pebtf.org for more information and for links to the plans' provider directories

Your 2027 Benefits

- There are no copay or deductible changes.
- Preventive services are covered at 100% – no copay and no deductible for these services.
- You will continue to pay the health care contribution which is currently 6% of your base pay or 3% if you completed a Get Healthy wellness screening during the last wellness screening period.*
- The Basic PPO continues without a PPO biweekly buy-up.
- **The Choice PPO biweekly buy-up cost will be $26.57 for single coverage and $68.55 for family coverage** (buy-up cost does not apply to employees hired prior to 8/1/2003). Costs for part-time employees and COBRA members change each year. See page 6 for cost information.
- The Custom HMO continues to have a limited network of providers so check the plan's network before you enroll (see page 5 for important information about the Custom HMO).
- The Prescription Drug Plan remains the same, though the formulary may change throughout the year.
- The Mental Health and Substance Use, Dental, Vision, and Hearing Aid plans remain the same.

* The health care contribution that begins July 2027 is not known at this time. For details, refer to your collective bargaining agreement/memorandum of understanding.

Choose the Medical Coverage That's Right for You

The PEBTF has contracted with Aetna to provide the Choice PPO, Basic PPO, and Custom HMO. Here is a brief guide to help you decide which option is right for you.

	Choice PPO	Basic PPO	Custom HMO
What is deducted from my paycheck every two weeks? (see page 4 for 2027 amounts)	Health care contribution plus PPO buy-up (buy-up cost does not apply to pre 8/1/2003 hires)	Health care contribution	Health care contribution

KEY TAKEAWAY

Everyone pays the health care contribution (see page 4); the Choice PPO has a buy-up (does not apply to employees hired prior to 8/1/2003).

	Choice PPO	Basic PPO	Custom HMO
I want flexibility in the providers that I can see.	✓	✓	

KEY TAKEAWAY

Both PPO options offer you the ability to go to an out-of-network provider but at higher out-of-pocket costs. Because the PPO networks are so large, most of our members never go out of network.

	Choice PPO	Basic PPO	Custom HMO
I want the PPO with the lower deductible.	✓		

KEY TAKEAWAY

The Choice PPO has the lower deductible but it also has the biweekly buy-up (buy-up cost does not apply to employees hired prior to 8/1/2003). The annual deductible does not apply to all medical services. See page 4 for more details on the annual deductible.

	Choice PPO	Basic PPO	Custom HMO
I want the least costly plan.			✓

KEY TAKEAWAY

You pay the health care contribution no matter which plan you choose. You will have lower out-of-pocket costs with the Custom HMO because it doesn't have a deductible and the copays are lower. However, the network is much smaller than the PPO options.

	Choice PPO	Basic PPO	Custom HMO
I was hired after 8/1/2003 but I don't want to pay the additional biweekly PPO buy-up.		✓	✓

KEY TAKEAWAY

Take a look at the Basic PPO or Custom HMO if you want to avoid paying the buy-up.

	Choice PPO	Basic PPO	Custom HMO
I want preventive care covered at $0 cost.	✓	✓	✓

KEY TAKEAWAY

Preventive care is important to staying healthy. Covered preventive care services are covered at $0 cost to you.

	Choice PPO	Basic PPO	Custom HMO
I want a plan without an annual deductible.			✓

KEY TAKEAWAY

You want to take a look at the Custom HMO.

	Choice PPO	Basic PPO	Custom HMO
I want to pay the lowest copays.			✓

KEY TAKEAWAY

You want to take a look at the Custom HMO.

	Choice PPO	Basic PPO	Custom HMO
Which plans can I choose if I or my dependents live out of state?	✓	✓	

KEY TAKEAWAY

The Custom HMO does not have a network of providers outside of Pennsylvania.

See page 4 for a comparison of the medical plan options or visit www.pebtf.org for a more detailed plan comparison tool and more Open Enrollment information.

Your Plan Choices – at a Glance

	Choice PPO (Aetna)	Basic PPO (Aetna)	Custom HMO (Aetna)
Cost of Benefits Full-time Employees	You pay the health care contribution through payroll deduction, which is 6% of your base pay or 3% of your base pay if you complete a Get Healthy wellness screening.** The health care contribution for July 2027 is not known at this time.		
Biweekly buy-up ▪ **Single** ▪ **Family** *Does not apply to employees hired prior to 8/1/2003	$ 26.57 * $ 68.55 *	$0 $0	$0 $0
Annual In-Network Deductible (no changes) 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. This does not apply to preventive care and gene therapy.	$400 single $800 family	$1,500 single $3,000 family	$0
Copays (no changes)	$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			✓
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 details, refer to your applicable collective bargaining agreement/memorandum of understanding.

For More Information

PEBTF Website	Visit www.pebtf.org > ***Open Enrollment***. View the plan benefits, check the providers for each plan, and compare plans.
View the Open Enrollment webinar	Learn more about your benefits by viewing the Open Enrollment webinar. Feel free to view it anytime. Find it under the Open Enrollment section of www.pebtf.org.
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 on 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 the HR Service Center (or your local HR office if your agency is not supported by the HR Service Center)	**By Phone:** Call 1-866-377-2672 Visit employeeresourcecenter.oa.pa.gov for benefit-related information and enrollment guidance. Visit Employee Self Service at www.myworkplace.pa.gov to complete your enrollment beginning October 12. All online transactions must be completed, and all forms must be postmarked by **Friday, October 30.**

To Make a Plan Change for 2027

1. **For more information:** Visit www.pebtf.org and click on the orange banner that says Open Enrollment.
2. **Check the plan's network of providers:** This is one of the most important things you can do. The Custom HMO has a limited network of providers and you must select a network primary care physician (PCP) for you and each of your family members at the time of enrollment.
3. **To make a plan change:** Visit Employee Self Service at www.myworkplace.pa.gov to complete your enrollment between October 12 and October 30, 2026. You can refer to the instructions on how to enroll on the Employee Resource Center article, Health Plan Enrollment. Contact your local HR office if your agency is not supported by the HR Service Center.

During Open Enrollment, you may remove any dependents without a qualifying life event, which is recommended only if your dependent has other coverage. The change will be effective January 1, 2027.

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 recently, make sure that your agency has your correct address. This can have an impact on benefits and taxes.
- **Are you enrolled in Voluntary Benefits?** Some voluntary benefits, such as the Health Care Flexible Spending Account and the Dependent Care Account Program, require you to re-enroll every year. For more information:
  - If your agency is supported by the HR Service Center or you are in the Liquor Control Board, visit employeeresourcecenter.oa.pa.gov
  - For agencies not supported by the HR Service Center, contact your HR office.
- **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 visit employeeresourcecenter.oa.pa.gov.
  - For agencies not supported by the HR Service Center, look for information from your agency throughout the year on benefits and programs that may be important to you.

Custom HMO Information

Attention Custom HMO Members in the Harrisburg Area

Partners in Women's Healthcare, an OB/GYN practice with offices in Lemoyne and Harrisburg, Pa, will no longer be in the Custom HMO network as of January 1, 2027.

This means if you continue to see providers in this practice, you will need to pay out-of-pocket because they will no longer be part of the Custom HMO network.

What Can You Do During Open Enrollment:

If you want to remain a patient of Partners in Women's Healthcare, you need to enroll in the Choice PPO or Basic PPO during Open Enrollment, which ends on October 30, 2026. Your enrollment in the new plan will be effective January 1, 2027.

If you want to remain in the Custom HMO, you will need to switch to another Custom HMO network provider to receive coverage under the plan. To check for network providers under the Custom HMO, visit www.pebtf.org, Active Members, Links tab.

Reminder About the Custom HMO and Out-of-State Dependents

The Custom HMO is available to members who live in Pennsylvania. If you have a dependent who resides out of state, even if they are a student at an out-of-state college, they will not have coverage under the plan except for emergency services. Therefore, you should enroll in one of the PPO plans during this Open Enrollment for an effective date of January 1, 2027.

Cost of Benefits - Part-Time Employees

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

Part-Time Employees
Cost of Single Coverage Biweekly

You pay the health care contribution which is 6% of your base pay or 3% of your base pay if you complete a Get Healthy wellness screening*, **plus the biweekly rates below**. The health care contribution for July 2027 is not known at this time.

	Medical Only	Medical + Prescription Drug	Medical + Supplemental	Medical + Prescription Drug + Supplemental
Choice PPO	$ 54.61	$ 68.64	$ 57.12	$ 71.15
Basic PPO	$ 50.63	$ 64.66	$ 53.14	$ 67.17
Custom HMO	$ 53.76	$ 67.79	$ 56.27	$ 70.30
Prescription Drug Only	$ 14.03			
Supplemental Only	$ 2.51			

Part-Time Employees
Cost of Family Coverage Biweekly

You pay the health care contribution which is 6% of your base pay or 3% of your base pay if you complete a Get Healthy wellness screening*, **plus the biweekly rates below**. The health care contribution for July 2027 is not known at this time.

	Medical Only	Medical + Prescription Drug	Medical + Supplemental	Medical + Prescription Drug + Supplemental
Choice PPO	$ 469.70	$ 590.39	$ 491.29	$ 611.98
Basic PPO	$ 435.42	$ 556.11	$ 457.01	$ 577.70
Custom HMO	$ 462.34	$ 583.03	$ 483.93	$ 604.62
Prescription Drug Only	$ 120.69			
Supplemental Only	$ 21.59			

* For details, refer to your applicable collective bargaining agreement/memorandum of understanding.

Important Benefit Information

Your Valuable SEAP Benefits

The State Employees Assistance Program (SEAP) is designed to assist employees and their family members to help with mental health issues, substance use, family issues, financial issues and legal issues. It is provided by Optum, as part of the Mental Health and Substance Use Program. Here are some of the benefits that SEAP offers:

- Six free mental health or substance use visits. Call 1-800-692-7459, 24/7.
- Free Calm Health app.
- Optum Self-learning by Uptime – micro-learning app that extracts life lessons from some of the most popular books, courses, documentaries and podcasts and packs them into 5-minute knowledge hacks you can consume on the go. Topics include Personal Growth, Mind & Philosophy, Health & Fitness, Money & Investing and many more. **Go to liveandworkwell.com, access code: Pennsylvania. Select View My Benefits, then select Life and Work to find the Uptime tile.**

Changes to the Calm Health App

Your SEAP benefit offered both the Calm app and the Calm Health app free to members. Exciting news: Your Calm app benefit is getting an upgrade to Calm Health.

Calm is the #1 mental health app to help you manage stress, sleep better, and live a healthier life.

Calm Health provides much of the same content as the Calm app plus evidence-based programs and personalized recommendations to help you feel your best.

Members who use this Calm app benefit will need to transition to Calm Health and have been receiving messages on this transition since July.

If you want to get the Calm Health app: To register and download the Calm Health app, go to liveandworkwell.com. To begin, enter your user ID or company access code "Pennsylvania." You can also follow the instructions on the Employee Resource Center article, State Employee Assistance Program (SEAP).

Improve Your Health with Programs Offered by Aetna

Aetna offers two online resources: Aetna Personal Health Solutions and Aetna Health Your Way™.

Aetna Personal Health Solutions includes programs for:

- Weight management
- High blood pressure
- Smoking/tobacco use
- Digestive health
- Women's health
- Fitness and physical therapy through Hinge Health

It's easy to get started. You'll find links to the programs on www.pebtf.org or aetna.com. You'll need your Aetna ID card if you haven't yet created a login and password on aetna.com. Then, choose your health goals and take a short quiz to see what program is right for you.

Aetna Health Your Way is a free health and well-being resource that brings health information, tools, and guidance together on one easy-to-use platform. Just log into aetna.com and select Health & Wellness or scan the QR code.

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

Summary of Benefits & Coverage (SBC): SBCs include standard information to help you understand and compare your medical plan options. View it online at www.pebtf.org or request a copy be mailed to your home. You may also call the PEBTF to request a copy.

Summary Plan Description (SPD): SPD includes detailed information about your benefits.

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

Maternity Services

Effective January 1, 2027, the insurance industry will move away from a global maternity package to a fee-for-service billing.

What does this mean? Instead of a single, all-inclusive payment for the entire pregnancy, labor and postpartum care, providers will bill Aetna separately for every individual service (each ultrasound, office visit, blood test, delivery and other services).

How does this affect you? There is no change to your benefit coverage. Maternity services, including pre- and post-natal care as well as delivery, are covered as they have been before. **PPO members:** Hospital and newborn care continue to be covered 100% after the annual PPO deductible. **HMO members:** Services are covered 100%, and maternity services must continue to be coordinated by an OB/GYN in network.

Where you will see a difference is with separate Explanations of Benefits (EOBs) for every doctor's visit and other services such as ultrasound, hospital stay, etc. Previously you did not receive an EOB for every service so we wanted you to understand why you would receive more EOB's.

Reminder

Complete a Get Healthy *Know Your Numbers* wellness screening by December 31, 2026 to save money beginning July 2027.

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, 2026.

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, *Open Enrollment*.
If you want to make a change, do so by Friday, October 30, 2026.

This newsletter may contain a general description of the Plan of Benefits (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 Summary Plan Description. The PEBTF 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.

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.

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）.