



# OPEN ENROLLMENT FOR YOUR 2024 BENEFITS OCTOBER 9 – 25, 2023

What You Need to Know About Your 2024 PGCPs Retiree Benefits

Open Enrollment is your once-a-year opportunity to review your coverage and ensure you have the medical benefits that work best for you and your family.

During Open Enrollment, you can:

- Switch medical plans from CareFirst to Kaiser Permanente or from Kaiser Permanente to CareFirst;
- Drop your current coverage—if you drop coverage, you will not be able to re-enroll at a later date; or
- Drop dependents (spouse or child)—if you drop a dependent, that dependent will not be able to enroll at a later date.

You cannot enroll for new coverage (medical, prescription, dental or vision) that you did not elect at retirement. And, you cannot add a dependent.

**If you do not make changes, your current benefit elections will remain the same in 2024.**

While there may be minimal changes to your 2024 benefits, it is always a good idea to familiarize yourself with the upcoming benefit changes.

## WHAT YOU NEED TO DO

- 1 **Review your options** – Read this overview for a summary of what's new for 2024. The Retiree Benefits Enrollment Decision Guide provides a detailed overview and will only be available online.
- 2 **Visit [www.pgcps.org/open](http://www.pgcps.org/open)** for updates on Open Enrollment. Contact the PGCPs Benefits Services Office to get answers to your questions:
  - **Call: 301-952-6600**
  - **Email: [pgcps.benefits@pgcps.org](mailto:pgcps.benefits@pgcps.org)**
- 3 **Complete your Retiree Enrollment Form by October 25, 2023** – If you need to make any changes to your benefits for 2024, complete the enclosed Retiree Enrollment Form. If you do not complete the Retiree Enrollment Form, you will have the same coverage in 2024. All changes are effective January 1, 2024.

# WHAT'S NEW FOR 2024

For 2024, you'll have access to the same benefit options with minimal changes.

## COST FOR COVERAGE

Healthcare costs continue to rise due to inflation as well as higher prices for drugs and medical services. For 2024, the cost for CareFirst medical, CVS Caremark prescription drug and Kaiser Medicare coverage will increase. All other rates will remain the same.

## NEW HEARING BENEFITS

PGCPS is pleased to add hearing benefits as part of both medical plan options.

Covered Service	CAREFIRST TRIPLE OPTION PLAN			KAISER
	BlueChoice HMO	BluePreferred PPO	Indemnity Option	
<b>Hearing care</b>	Once every 36 months, up to \$5,000			Once every three years
Hearing aid evaluation test	Plan pays 100%	Plan pays 80%	Plan pays 70%	\$0 copay
Hearing aids	Plan pays 100%	Plan pays 80%	Plan pays 70%	\$0 copay
Hearing exam/ Audiometric tests	Plan pays 100% after per visit copay	Plan pays 80%	Plan pays 70%	\$0 copay
Hearing aid repair Minor children Adults	Plan pays 100% after per visit copay	Plan pays 100% Plan pays 80%	Plan pays 100% Plan pays 70%	\$0 copay \$0 copay

## KAISER LIMITED OUT-OF-NETWORK VISITS ENDING

For the last two years, Kaiser participants had the option of seeing out-of-network providers for up to 10 visits for certain outpatient medical services. This feature will no longer be an option in 2024.

# YOUR OPTIONS

Your PGCPs Benefits provide you with reliable, competitive and comprehensive coverage.

## MEDICAL

Choose from two comprehensive medical plan options that include 100% coverage for preventive care:

### 1. Kaiser Permanente (Kaiser) with coverage based on Medicare eligibility:

- Kaiser Permanente Health Maintenance Organization (Kaiser HMO) for participants not eligible for Medicare
- Kaiser Permanente Medicare Advantage for participants eligible for Medicare

All care is provided at Kaiser facilities by Kaiser providers.

**Prescription coverage is included.** Visit [kp.org](http://kp.org) to find a location near you.

### 2. CareFirst Blue Choice Triple Option (CareFirst) with three ways to access care:

- BlueChoice HMO network (Tier 1)
- BluePreferred PPO network (Tier 2)
- Indemnity (out-of-area) network (Tier 3)

## PRESCRIPTION

If you elect Kaiser, prescription coverage is included. If you switch coverage from Kaiser to CareFirst, you must elect prescription coverage.

## DENTAL

Dental coverage is provided through Aetna with benefits available for both in- and out-of-network dental services.

## VISION

Basic vision coverage is included with your medical plan. Additional coverage is available through BlueVision Plus.

## A FEW REMINDERS ABOUT ELIGIBILITY

### Medicare

You are required to enroll in Medicare Parts A & B when you first become eligible to enroll. Failure to sign up for Medicare Parts A & B may result in a loss of your PGCPs-sponsored coverage. If you or your dependents are approved for disability under Medicare, you must notify the Benefits Services Office immediately.

### Dependents—Must be currently enrolled

Dependents who are eligible for health insurance coverage are the retiree's spouse and the retiree's biological child(ren), adopted child(ren), stepchild(ren) and/or grandchildren for whom you have legal custody age 26 or younger. Dependent children up to age 26, regardless of their student and/or employment status, are eligible for coverage. Eligibility ends at the end of the month in which the dependent child reaches age 26, unless certified as disabled.

### Continuation of Coverage for Surviving Spouses and/or Dependents

Coverage as a "surviving spouse or surviving dependent" may continue as long as you do not re-marry or become eligible for health insurance through your own employment. If you do marry or become eligible for health insurance through your own employment, you must immediately notify the Benefits Services Office in writing.

# 2024 RATES

The cost for CareFirst medical, CVS Caremark prescription drug and Kaiser Medicare coverage will increase in 2024. All other rates will remain the same.

## MEDICAL AND PRESCRIPTION DRUG

	KAISER MEDICAL AND PRESCRIPTION DRUG	CAREFIRST MEDICAL	CAREMARK PRESCRIPTION DRUG
<b>Non-Medicare (20% contribution)</b>	<b>Monthly</b>	<b>Monthly</b>	<b>Monthly</b>
Retiree Only	\$133.62	\$118.13	\$ 49.68
2 Individuals (Non-Medicare)	\$303.33	\$286.86	\$ 95.02
Family	\$319.36	\$311.02	\$103.02
<b>Medicare (20% contribution)</b>	<b>Monthly</b>	<b>Monthly</b>	<b>Monthly</b>
Medicare – Individual	\$ 63.37	\$ 51.72	\$ 49.68
Medicare – 1 Over/1 Under	\$197.00	\$169.85	\$ 95.02
Medicare – 2 Individuals	\$126.75	\$103.45	\$ 95.02
Medicare – 3 Individuals	\$190.12	\$159.82	\$103.02

## DENTAL AND VISION

	AETNA DENTAL PPO	CAREFIRST VISION
<b>20% contribution</b>	<b>Monthly</b>	<b>Monthly</b>
Retiree Only	\$10.10	\$1.60
2 Individuals	\$31.70	\$2.40
Family	\$33.38	\$3.20

## PAYING FOR COVERAGE

As a retiree, your monthly premiums are deducted from your Maryland State Retirement and Pension System (MSRPS) pension check. However, if your pension check does not cover the cost of your monthly premiums, you will receive an invoice from Health Equity | WageWorks, the direct bill administrator for PGCPs. Failure to pay your premiums will result in cancellation of your coverage, and you will not be allowed to re-enroll at a future date.

A surviving spouse and/or dependent receiving a pension check from the MSRPS may elect to have health insurance premiums deducted from his/her monthly pension check.

It is your responsibility to ensure your benefit deductions match the coverage you requested. If there is an error or omission in your deductions, you have until February 2, 2024, to contact the Benefits Services Office at 301-952-6600. Any missed deductions for your health benefits will automatically be taken in addition to the regular deduction on the next available pension check.

Premium refunds will only be considered when an administrative error has occurred. The retiree must submit a written request within one calendar year of the administrative error, and a refund will only be approved for up to one benefit plan year. A refund request for any other reason (including retiree error) cannot be approved.