Frequently Asked Questions
Version 2 - Benefits 2026

Deductible and Copay Questions

1. Is the $500 deductible per year, per office visit, or per person?

The $500 deductible is per person, per calendar year. After meeting it, you pay 20% of the negotiated rate for outpatient services such as emergency room visits, laboratory services, outpatient surgery, radiology, durable medical equipment.

2. What does "negotiated rate" mean?

It's the lower discounted rate Aetna allows for a service under its agreement with the provider.

3. If my dermatologist performs a procedure, do I still owe a $250 copay?

In 2026, procedures done in-office are covered under the specialist office co-pay. However, if the physician sends specimens to an outside lab, those bills are subject to coinsurance, after the deductible is met.

4. If I visit my doctor on January 1st, does my deductible apply?

You'll pay your $25 primary care co-pay. The deductible does not apply to primary care visits.

Network and Coverage Information

1. Is the Select Choice network changing?

No, it remains the Aetna Select Open Access Network.

2. If I decline all coverage, will I receive the $75 Board contribution?

No. The $75 flex credit can only be used toward specific supplemental benefits.

3. Are diagnostic mammograms considered preventive?

Not at this time.

Flexible Spending Accounts (FSA)

1. Do I get a debit card for Dependent Care FSA?

Debit cards are not issued for Dependent Care. In addition, the funds must deposited in your account before you can request reimbursement on a claim form.

2. What's the difference between Dependent Care and Healthcare FSA?

- **Healthcare FSA:** Funds are advanced and accessible by debit card to pay for out-of-pocket health care expenses.
- **Dependent Care FSA:** The dependent care FSA pays for childcare expenses. Children must be under age thirteen (13). Funds must be available before reimbursement.
- For more information, view:

Inspira FSA Flyer

Eligible FSA Expenses

Additional Questions

1. How do I enroll or disenroll in MetLaw?

Contact MetLife at 800-438-6388 during the annual enrollment window.

2. Is annual bloodwork preventive?

It depends on your physician's billing code.

Helpful Links

- Risk Management & Insurance Webpage
- Annual Enrollment Landing Site