



2025 COBRA BENEFITS ANNUAL ENROLLMENT



Focus on What Matters.

Get the Benefit Coverage You Need!

Annual Enrollment begins in November, 2024.

Ends - two weeks from receipt of packet.

Questions about Your Benefits?

Call: 727-588-6197 or Visit: www.pcsb.org/cobra

REVIEW

Read this newsletter and view the additional Cobra information online at www.pcsb.org/cobra.

DECIDE

What coverage you and your family will need. If you are currently enrolled in benefits and do not act by the end Annual Enrollment, your current coverage will continue at the new rates. No action is needed.

ENROLL

To access COBRA's Discovery Benefits Web Portal, visit <https://cobra.discoverybenefits.com/>.

Your enrollment decisions are effective January 1, 2025 through December 31, 2025.

Review your COBRA Open Enrollment Packet from Wex for more information.

CONTACT INFORMATION FOR COBRA DISCOVERY BENEFITS:

Address: P.O. Box 2079, Omaha, NE 68103-2079 | **Phone:** 866-451-3399 | **Fax:** 888-408-7224

Email: cobraadmin@discoverybenefits.com | **Website:** <https://cobra.discoverybenefits.com/>

2025 MEDICAL BENEFIT CHANGES

Below is an overview of the medical plan changes for 2025. Review the Comparison Medical Chart on pages (include pages).

To review the full plan details, please visit www.pcsb.org/cobra.

What Changes You Need to Know!



INCREASE IN MEDICAL PLAN PREMIUMS:

- Healthcare rates are increasing. Review page 5 for new rates.
- **Note:** Dental and Vision Rates are **not** changing in 2025.

NO VENDOR CHANGES:

- We are pleased to confirm that no vendor changes are required for 2025.
- Existing vendors will continue to provide good, quality, and affordable care to you.

Summary of Medical Plan Changes for 2025



Select Open Access Plan:

- Inpatient, Hospice, and Skilled Copay: \$600 a day for 6 days.
- Outpatient Surgery: \$600 for a hospital / \$500 for non-hospital surgery facility / \$250 in a provider's office.
- Ambulance Copay: \$100 copay
- Allergy Serum Injections: \$15 copay

Choice Share Plan:

- This is a **new** plan, and it replaces the current Choice POS II Plan.
- **Note:** If you are currently enrolled in the Choice POS II Plan, this will automatically roll over to the new plan, unless you go in and make changes. This plan is similar, but has the following changes:
- Network will be the National Select Open Access Network (same as our other plans).
- There will be **NO** out-of-network benefits. You **MUST** stay in-network.
- The Family Deductible is increasing from \$1,000 to \$1,500. Each individual on the plan will only need to meet \$500, or the family can collectively reach the \$1,500 deductible.
- Allergy Serum Injections: \$15 copay

Summary of Medical Plan Changes for 2025 (Continued)



All Four Medical Plans:

- Home Health visits will be limited to 90 visits per calendar year.

Teladoc:

- Effective January 1, 2025, Aetna will no longer offer Teladoc.
- Teladoc will be replaced by CVS Health Virtual Primary and Immediate Care.

New! CVS Health Virtual Primary and Immediate Care



Your Doctor Anytime and Anywhere!

Are you struggling to find a doctor or dealing with long wait times? Don't let your health suffer! Effective September 1, 2024, your Aetna Health Plan includes **24/7 access to CVS Health Virtual Primary and Immediate Care.**

Virtual Primary Care:

- Manage Chronic Conditions (i.e Diabetes Management, High Blood Pressure Thyroid Disease Management, etc.) Order prescriptions, and more.

Virtual Mental Health Services:

- Talk to a licensed therapist about stress, anxiety, or other mental health concerns.

On-Demand Virtual Sick Care:

- Find relief for common illnesses like coughs, colds, and the flu.

Meet Your CVS Health Virtual Care Team



Board-certified Physician:

- Leads your care and provides primary care services.

Nurse Practitioner:

- Offers additional primary care support.

Registered Nurse:

- Coordinates with specialists and assists with your health and care needs.

How Does CVS Health Virtual Primary Care Work?



1. **Choose Your Doctor** (They will help you select the right doctor for you!)
2. **Book a Visit Quickly** (Often within 5 days or sooner!)
3. **Get a Welcome Kit for Primary Care** (This includes a Vitals Monitor)
4. **Connect with Your Care Team Online**
5. **Need an In-Person Specialist?** (Your Care Team will connect you with the right in-person specialist and can also help schedule appointments for you.)

CVS Health Virtual Care Hours



Monday - Friday: 7:00 AM to 7:00 PM

What's Next?



Visit cvs.com/virtual-care to register and schedule an appointment today!

- [FAQs about CVS Health Virtual Primary Care](#)
- [FAQs about CVS Health Virtual Mental Health Care](#)

HIGHLIGHTS OF ADDITIONAL BENEFITS

Dental:

Choose from two dental plans: The Humana Advantage Plan and the MetLife® Preferred Dentist Program (PDP).

HUMANA DENTAL (#548085) 800-979-4760 www.myhumana.com		METLIFE ® PDP (#95682) 800-942-4760 www.metlife.com/dental
	State of Florida Service Area. In-network only. You must choose a primary dentist and use participating network providers.	In or out-of-network. Save the most when you choose a participating in-network provider.
Primary Care Dentist and Specialist Referrals	Not required	Not required
Deductible	None	\$50/individual; \$150/family (Applies to Type B and C Services)
Calendar Year Maximum	None	\$1,250 per person
Preventative Services	No charge	No charge, no deductible (Type A)
Basic Services	No Charge	20% coinsurance after deductible (Type B)
Major Services	Scheduled copays	50% coinsurance after deductible (Type C)
Orthodontia	Scheduled copays (Adult and Child)	50% (up to age 19)
Lifetime Orthodontia Limit	N/A	\$1,000 individual

Vision:

As a benefits-eligible Individual, you can enroll in free Individual-only vision coverage through EyeMed Vision. You may enroll your dependents in the vision plan for an additional cost.

Basic Benefits	Frequency	Basic Benefits	In-Network Provider
Vision Exam	Once per calendar year	Eyeglass Lenses Single vision, bifocal, or trifocal Standard Progressive	\$15 copay \$50 copay
Eyeglasses or Contact Lenses	Once per calendar year	Contact Lenses Conventional Disposable Medically Necessary	\$110 allowance (15% off balance over \$110) \$110 allowance (full amount over \$110) Paid in full
Frames	Every other calendar year	Frames	\$110 allowance (20% off balance over \$110)
		Exam with Dilation	\$50 copay

2025 COBRA RATE CHART

Annual Enrollment Begins November 2024

Aetna Medical Plans:

Coverage Level	Select Open Access	Choice Share Plan	CDHP + HRA	Basic Essential
Individual	\$960.16	\$978.86	\$922.76	\$854.76
Individual + Spouse	\$1,901.28	\$1,940.38	\$1,823.08	\$1,690.48
Individual + Child(ren)	\$1,691.16	\$1,728.56	\$1,614.66	\$1,504.16
Individual + Family	\$2,738.02	\$2,812.82	\$2,630.90	\$2,432.02

Humana and MetLife Dental Plans:

Coverage Level	Humana Advantage	MetLife
Individual	\$23.68	\$35.59
Individual + 1	\$40.06	\$61.81
Individual + Family	\$58.26	\$89.24

EyeMed Vision Plans:

Coverage Level	
Individual	\$3.72
Individual + 1	\$8.54
Individual + Family	\$13.78

No Midyear Changes without a Qualifying Event:

Certain life events, such as marriage, divorce, or loss of a dependent's eligibility, may require changes to your benefits. When you experience an event that qualifies, contact Discovery Benefits within **31 days** from the date of the event

Key Medical Plan Terms:

Deductible is the amount you pay out of your pocket before the plan begins to pay, unless there's a co-pay associated with the service. In that case, you pay the copay and no deductible. The CDHP Plan, Choice Share Plan and Basic Essential Plan have deductibles.

Annual Enrollment Notices & Disclosures

The Annual Enrollment Notices & Disclosures Booklet contains applicable Legal Notices and Disclosures regarding HIPAA, COBRA, FMLA, Workers Compensation and Health Care Reform applicable to PCSB.

The Federal and Legal Notices are available online as a separate document.

To review, please visit the [Annual Enrollment Notices & Disclosures](#) for more information.

For additional information and to view the online 2025 Benefits and Wellness Guide, visit www.pcsb.org/cobra.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at socialsecurity.gov, 800-772-1213 (TTY 800-325-0778).

*Date of Notice: **November, 2024***

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Email: cobraadmin@discoverybenefits.com | **Website:** <https://cobra.discoverybenefits.com/>

WHO TO CALL FOR BENEFITS HELP?

Plans and Providers	Telephone	Website
Risk Management and Insurance		
Main Number	727-588-6195 Fax: 727-588-618	www.pcsb.org/benefits
Onsite Representatives		
Aetna (Claims and Account Advisor)	727-588-6367	www.pcsb.org/healthinsurance
Aetna (Health and Wellness)	727-588-6137	www.pcsb.org/wellness
Insurance Carriers		
Aetna Concierge Customer Service	866-253-0599	www.aetnapcsb.com
Aetna Pharmacy Mail Order Prescriptions	888-792-3862	www.aetnapcsb.com
CVS Virtual Care	866-253-0599	www.cvs.com/virtual-care
Healthcare Bluebook	888-316-1824	www.pcsb.org/healthcarebluebook
EyeMed Vision	888-316-1824	www.eyemedvisioncare.com
Humana Advantage Dental (Group #548085)	800-979-4760	www.myhumana.com
MetLife Dental PDP (Group #548085)	800-942-0854	www.metlife.com/dental
Non-PCS Programs and Resources		
Federal Health Insurance Marketplace	800-318-2596	www.healthcare.gov
Florida KidCare	800-821-5437	www.floridakidcare.org

This guide describes Pinellas County Schools benefit programs that will be effective for the plan year beginning January 1, 2025. This is only a summary of the benefit programs. Additional restrictions and/or limitations not included in this guide may apply. In the event of a conflict between this guide and the plan documents, the plan documents will control.

