

2026

RETIREE BENEFITS ENROLLMENT DECISION GUIDE







AT PRINCE GEORGE'S COUNTY PUBLIC SCHOOLS

Our Focus is You

inside

- 3 Eligibility & Enrollment
- 4 Medical
- 9 Prescription Drug
- 11 Vision
- 12 Dental
- 13 Life
- 14 2026 Rates
- 15 Who to Call

KNOW YOUR RIGHTS AND RESPONSIBILITIES

Visit www.pgcps.org/benefits to access required federal notices which outline your rights and responsibilities.
Or, request a printed copy by contacting the PGCPS Benefits Services by phone at 301-952-

6600 or send an email to: **pgcps.benefits@pgcps.org**.

You dedicated your career to delivering support, services and a high-quality learning environment to ensure our students are ready for college and careers in a global society.

While you focused on the success of our students, we continue to focus on offering comprehensive and competitive benefits to support you and your family. **Our Focus is You.**

PGCPS makes a significant investment in your benefits. In fact, the School Board's share of the cost for retirees remains at 80% for medical, prescription drug, vision and dental coverage.

Open Enrollment is your once-a-year opportunity to review your options and select 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 drug, dental or vision) that you did not elect at retirement. You cannot add new dependents (spouse or child).

If you are satisfied with your current benefit elections, no action is required.

ELIGIBILITY AND ENROLLMENT



The annual Open Enrollment period for 2026 benefits is October 28 – November 10, 2025. Any changes you make will be effective January 1, 2026.

WHO IS ELIGIBLE

Eligible Prince George's County Public Schools (PGCPS) retirees may continue their enrollment for benefits described in this guide based on their coverage at their date of retirement. You cannot enroll for new coverage if you did not have that coverage at the time of your retirement.

Dependent Children

Dependent children who are currently enrolled are eligible up to age 26, regardless of their student and/or employment status. 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" 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 PGCPS Benefits Services in writing. Coverage as a "surviving dependent" may continue up to age 26, regardless of their student and/or employment status.

HOW TO MAKE CHANGES

During the annual Open Enrollment period (October 28 – November 10, 2025), if you want to delete dependents, drop coverages or switch between plans (Kaiser to CareFirst or vice versa) complete and return the Retiree Enrollment Form to:

PGCPS Benefits Services

Sasscer Administration Building, Room 132 14201 School Lane Upper Marlboro, MD 20772

301-952-6600

pgcps.benefits@pgcps.org

The form was enclosed with the What You Need to Know (WYNTK) summary mailed to your home, and is available **online**, or by contacting PGCPS Benefits Services.

WHAT YOU NEED TO KNOW

Review the summary of What You Need to Know (WYNTK) for 2026 on www.pgcps.org/open.

Current Elections Will Continue

If you are satisfied with your current benefit elections, no action is required. If you want to delete dependents, drop coverages or switch between plans (Kaiser to CareFirst or vice versa) complete and return the **Retiree Enrollment Form** by November 10, 2025.

New Coverage Levels

In 2026, coverage levels will change. Previously, coverage levels were based on **how many** dependents were covered. This year, coverage levels will be based on **who is** covered. See WYNTK for more information. Your current elections will automatically update based on your covered dependents.

Premium Cost Changes

Health plan costs will increase in 2026. However, some retiree + dependent combinations may see lower premiums with the new coverage levels.

PAYING YOUR PREMIUMS

As a retiree, your monthly premiums for health care benefits are deducted from your Maryland State Retirement and Pension System (MSRPS) pension check. If your pension check does not cover the full cost of your monthly premiums, you will receive invoices from WageWorks | Health Equity, the PGCPS direct bill administrator. If you are a surviving spouse or dependent receiving a pension check from the MSRPS, you may elect to have your health insurance premiums deducted from your pension check.

It is your responsibility to make sure your benefit deductions match the coverage you requested. If there is an error or omission in your deductions, you should immediately contact PGCPS Benefits Services. You must pay all missed premiums or your coverage will be canceled and you will not be able to re-enroll in the plan at a later date.

MEDICAL

You can choose from two medical options: Kaiser Permanente (Kaiser) or the CareFirst BlueChoice Triple Option (CareFirst).

KAISER

With Kaiser, you can do more in less time. Your care is provided at conveniently located medical centers, so you can see your doctor, get lab tests, and pick up prescriptions, all in one location. Kaiser has 34 medical centers in the Mid-Atlantic region. Visit my.kp.org/pgcps to choose a provider near you. There is no deductible to meet and most eligible services are covered at 100% after you make any required copayment. Prescription drug coverage is included.

The coverage you receive is based on your Medicare eligibility:

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

Kaiser HMO - Non-Medicare

When you enroll in Kaiser HMO – Non-Medicare, you have access to:

- Special rates for members: Enjoy reduced rates on products and services that can help you stay healthy —like gym memberships, massage therapy and more. Explore your options at: kp.org/choosehealthy.
- Self-care apps: Navigate mental and emotional challenges and improve your sleep, mood, relationships, and more with self-care apps such as Calm and myStrength, available at no extra cost to adult members. Visit kp.org/selfcareapps for more information.
- Healthy lifestyle programs: Connect to better health with online programs to help you lose weight, quit smoking, reduce stress, and more—all at no extra cost. Learn more at kp.org/healthylifestyles.

- Personal wellness coaching: Get help reaching your health goals. Work one-on-one with a wellness coach by phone at no cost. Find out more at: kp.org/wellnesscoach.
- Online wellness tools: Visit <u>kp.org/healthyliving</u> for wellness information, health calculators, fitness videos, podcasts and recipes from world-class chefs.
- Health classes: Sign up for health classes and support groups at local facilities, or get fit with the ClassPass exercise program, where you can take classes online or livestream a session right at home. See what's available near you at kp.org/classes—some may require a fee.
- Telemedicine: With kp.org, you can see your doctor face-to-face without visiting the office. You can have a video visit with your doctor from home, work, or on the go. You just need to be a Kaiser member at least 18 years of age with a camera-equipped computer or mobile device. In case of urgent care, video visits are available with an emergency medicine physician who is connected to your medical record. Video visits for urgent and non-urgent health concerns do not have a copay.
- Silver&Fit Healthy Aging and Exercise Program:
 Receive a fitness center membership with a local participating Silver&Fit fitness center at no additional cost plus digital fitness choices with home fitness tools.
- Vision Essentials: The Kaiser plan includes coverage for eye exams, glasses and contacts. As a Kaiser member, your eye health information becomes part of your complete medical record, which helps you and your medical team get a total picture of your health. Regular eye exams can detect not only vision problems but also certain health conditions.

Learn more at my.kp.org/pgcps.

Kaiser Medicare Advantage

When you enroll in Kaiser Medicare Advantage, you have access to:

- Transportation to appointments: Kaiser Medicare participants can receive up to 24, one-way rides per plan year for non-urgent medical appointments at Kaiser medical centers and contracted facilities.
- Special rates for members: Enjoy reduced rates on products and services that can help you stay healthy —like gym memberships, massage therapy and more. Explore your options at: kp.org/choosehealthy.
- Telemedicine: With kp.org, you can see your doctor face-to-face without visiting the office. You can have a video visit with your doctor from home, work, or on the go. You just need to be a Kaiser member at least 18 years of age with a camera-equipped computer or mobile device. In case of urgent care, video visits are available with an emergency medicine physician who is connected to your medical record. Video visits for urgent and non-urgent health concerns do not have a copay.
- BrainHQ: Your brain is the center of everything you think, do and feel. That's why Kaiser is offering BrainHQ: online exercises to help you improve cognitive function (including memory, attention and processing speed) as well as daily life. BrainHQ features weekly challenges to inspire you to improve, a personalized trainer, progress reports, monthly tips and more.
- Silver&Fit Healthy Aging and Exercise Program:

 Receive a fitness center membership with a local participating Silver&Fit fitness center at no additional cost plus digital fitness choices with home fitness tools.
- Thriving After 60: Make new friends at Kaiser's engaging virtual and in-person events and workshops focused on supporting the changing health and wellness needs of those over 60. Visit kp.org/ta60mas for more information.
- Vision Essentials: The Kaiser plan includes coverage for eye exams, glasses and contacts. As a Kaiser member, your eye health information becomes part of your complete medical record, which helps you and your medical team get a total picture of your health. Regular eye exams can detect not only vision problems but also certain health conditions.



If you are a Medicare-eligible retiree, you must complete the Kaiser Permanente Medicare Advantage application. Access the form by contacting Kaiser at 1-888-777-5536 or PGCPS Benefits Services at 301-952-6600.



CAREFIRST

With CareFirst, you have access to a wide range of providers. If you select a provider in the BlueChoice HMO network, you receive the highest level of benefits. If you select a BluePreferred PPO provider, the plan pays benefits at the PPO level. If you select a non-participating provider, you still have coverage through the plan's indemnity option but your out-of-pocket costs will be higher.

You have access to care in a variety of settings, including:

- A primary care provider (PCP). Establishing a relationship with a primary care provider is the best way to receive consistent, quality care.
- FirstHelp, a free 24-hour nurse advice line. Call 1-800-535-9700 anytime to speak with a registered nurse. Nurses can provide you with medical advice and recommend the most appropriate care.
- A CareFirst Video Visit. You can consult with a board-certified doctor on your smartphone, tablet or computer. To get started, visit: www.closeknithealth.com.
- Convenience care centers are located inside a pharmacy or retail store, such as a CVS MinuteClinic or Walgreens Healthcare Clinic.
- Urgent care centers have a doctor on staff and are an option when you need care on weekends or after hours.
- An emergency room, providing treatment for acute illnesses and trauma.

To learn more, visit www.carefirst.com/pgcps.

Vision

The CareFirst medical plan includes coverage for professional vision services including routine eye exams, eyeglasses and contact lenses through the Davis Vision network of providers.

Take Charge of Your Health

Whether you're trying to lose weight, improve your well-being or simply live a healthier lifestyle, CareFirst offers tools and resources to help you reach your goals.

As part of your health coverage, you have access to the CareFirst Health & Wellness program that can help you:

- Become aware of unhealthy habits.
- Improve your health with programs that target your specific health or lifestyle concerns.
- Get and stay healthy with a wealth of online tools and resources.

To learn more, log in to <u>www.carefirst.com</u> or call **1-800-783-4582**.

CareFirst Wellbeing

CareFirst WellBeing delivers a wealth of resources customized to your interests and needs. It all starts with RealAge®, a unique online health assessment that helps you determine the physical age of your body compared to your calendar age. You also have access to:

- A personalized health timeline Receive recommendations, content and programs tailored to you.
- Trackers Connect your wearable devices or enter your own data to monitor daily habits like sleep, steps, nutrition and more.
- Challenges Stay motivated by joining a challenge to make achieving your health goals more entertaining.
- A health profile Access your important health data like biometric information, vaccine history, lab results and medications all in one place.
- Blue Rewards Earn financial incentives for completing wellness activities.

To get started, visit carefirstwellbeing.sharecare.com.

A NOTE ABOUT MEDICARE

If you and/or your dependents are eligible for Medicare, you must enroll in both Medicare Parts A and B.

Medicare will be your primary insurer and your PGCPS coverage through CareFirst will supplement.

Non-Medicare Medical Coverage At-a-Glance

	KAISER HMO	CAREFIRST		
	KAISER HMO	BlueChoice HMO	BluePreferred PPO	Indemnity Option
Features				
Annual Deductible Employee Only Employee + Dependents (Family)	None None	None None	\$200 \$600	\$500 \$1,000
Annual Out-of-Pocket Max (includes Annual Deductible) Employee Only (Individual) Employee + Dependents (Family)	\$3,500 \$9,400	\$1,000 \$2,000	\$1,000 \$2,000	\$2,000 \$4,000
Coinsurance	Plan pays 100%	Plan pays 100%	Plan pays 80%; you pay 20% after deductible	Plan pays 70%; you pay 30% after deductible
Office Visits				
Preventive Care	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%
Primary Care Physician	Plan pays 100% after \$10 copay	Plan pays 100% after \$10 copay	Plan pays 100% after \$20 copay	Plan pays 70% after deductible; you pay 30%
Specialist	Plan pays 100% after \$20 copay	Plan pays 100% after \$25 copay	Plan pays 100% after \$35 copay	Plan pays 70% after deductible; you pay 30%
Hospital Services				
Inpatient	Plan pays 100%	Plan pays 100% after \$150 copay	Plan pays 80% after deductible; you pay 20%	Plan pays 70% after deductible; you pay 30%
Outpatient	Plan pays 100% after \$20 copay	Plan pays 100%	Plan pays 80% after deductible; you pay 20%	Plan pays 70% after deductible; you pay 30%
Emergency Room Services	Plan pays 100% after \$150 copay	Plan pays 100% after \$150 copay	Plan pays 100% after \$150 copay	Plan pays 100% after \$150 copay
Mental Health and Substance				
Abuse Treatment				
Inpatient	Plan pays 100%	Plan pays 100%	Plan pays 100% after deductible	Plan pays 70% after deductible; you pay 30%
Outpatient	Plan pays 100% after \$5 copay (group) \$10 copay (individual)	Plan pays 100% after \$10 copay	Plan pays 100% after deductible and \$20 copay	Plan pays 70% after deductible; you pay 30%
Vision Care				
Routine Eye Exam (once every 12 months)	Plan pays 100% after \$10 copay	Plan pays 100% after \$10 copay	Plan pays 100% after \$10 copay	N/A
Frames	Plan pays 100% from approved collection	Discounts available	Discounts available	N/A
Eyeglass Lenses/Contact Lenses	Plan pays 100%	Discounts available	Discounts available	N/A
Hearing Care	Once every 36 months	C	nce every 36 months, up to \$5	5,000
Hearing Aid Evaluation Test	\$0 copay	Plan pays 100%	Plan pays 80%	Plan pays 70%
Hearing Aids	\$0 copay	Plan pays 100%	Plan pays 80%	Plan pays 70%

Medicare Medical Coverage At-a-Glance

	KAISER MEDICARE ADVANTAGE	CAREFIRST
Features		
Annual Deductible Employee Only Employee + Dependents (Family)	None None	None None
Annual Out-of-Pocket Max (includes Annual Deductible) Employee Only (Individual) Employee + Dependents (Family)	\$3,400 N/A	None None
Coinsurance	Plan pays 100%	Medicare pays 80% CareFirst Plan pays 20% of Medicare's approved amount and Part B deductible (if accepting assignment)
Office Visits		
Preventive Care	Plan pays 100%	Plan pays 100%
Primary Care Physician	Plan pays 100% after \$10 copay	Medicare pays 80% CareFirst Plan pays 20% of Medicare's approved amount
Specialist	Plan pays 100% after \$10 copay	Medicare pays 80% CareFirst Plan pays 20% of Medicare's approved amount
Hospital Services		
Inpatient	Plan pays 100%	Medicare pays 80%
Outpatient	Plan pays 100%	CareFirst Plan pays Part A deductible,
Emergency Room Services	Plan pays 100% after \$50 copay	then covered at 100%
Mental Health and Substance Abuse Treatment		
Inpatient	Plan pays 100% after \$10 copay	Medicare pays 80% CareFirst Plan pays 20% of Medicare's approved amount
Outpatient	Plan pays 100% after \$10 copay	Medicare pays 80% CareFirst Plan pays 20% of Medicare's approved amount
Vision Care		
Routine Eye Exam (once every 12 months)	Plan pays 100% after \$10 copay	Plan pays 100% after \$10 copay
Frames	\$200 allowance every 24 months at Kaiser locations	Discounts available
Eyeglass Lenses/Contact Lenses	Plan pays 80% up to Medicare limit	Discounts available
Hearing Care	Once every 36 months	Once every 36 months
Hearing Aid Evaluation Test	Plan pays 100%	\$0 copay
Hearing Aids	Plan pays 100% up to \$5,000	\$0 copay

CareFirst's allowed benefit for services is covered by Medicare and CareFirst will not exceed the Medicare-approved amount/Medicare limiting charge.

PRESCRIPTION DRUG

Prescription drugs can be a significant expense. PGCPS gives you access to prescription drug benefits at retirement to help meet your needs.

If you participate in the Kaiser medical plan option, prescription drug benefits are included with your coverage. You will receive all prescription medications through a Kaiser facility or pharmacy, either at an onsite facility or a participating pharmacy.

For the CareFirst medical options, coverage is available through CVS Caremark for non-Medicare retirees and SilverScript, a CVS Caremark subsidiary, for Medicare retirees. With CVS Caremark/SilverScript, you can have prescriptions filled at thousands of retail pharmacies nationwide or by mail order.

NON-MEDICARE PRESCRIPTION DRUG

	KAISEI	CAREFIRST	
Prescriptions	Onsite Facility	Participating Pharmacy	CVS Caremark
Retail	(up to a 30-day supply)	(up to a 30-day supply)	(up to a 34-day supply)
Generic	\$7 copay	\$20 copay	\$10 copay
Preferred Brand (Formulary)	\$15 copay	\$35 copay	\$40 copay
Non-Preferred Brand	\$30 copay	\$50 copay	\$70 copay
Mail Order	(90-day supply)	(90-day supply)	(up to a 90-day supply)
Generic Preventive Care	100% covered, no deductible	100% covered, no deductible	100% covered, no deductible
Other Generic	\$14 copay	\$40 copay	\$20 copay
Preferred Brand (Formulary)	\$30 copay	\$70 copay	\$80 copay
Non-Preferred Brand	\$60 copay	\$100 copay	\$140 copay

CVS Caremark makes changes to its list of covered prescription drugs or formulary to better manage costs and ensure access to safe treatment options. These changes are made several times during the year. If you are taking a medication that is impacted, you will receive a letter from CVS Caremark. To review the current list of covered prescription drugs, log in to www.caremark.com. If you have questions, call the Caremark Customer Service Center at 1-888-865-6564.

MEDICARE PRESCRIPTION DRUG

Prescriptions
Retail
Generic
Preferred Brand (Formulary)
Non-Preferred Brand
Mail Order
Generic
Preferred Brand (Formulary)
Non-Preferred Brand

KAISER MEDICARE ADVANTAGE			
Preferred Pharmacy	Standard Pharmacy Cout-of-Network Long-Term Co		
(up to a 60-day supply)	(up to a 60-day supply)	(up to a 30-day supply)	
\$5 copay	\$10 copay	\$5 copay	
\$5 copay	\$10 copay	\$5 copay	
\$5 copay	\$10 copay	\$5 copay	
(up to a 90-day supply)	(up to a 90-day supply)	N/A	
\$3 copay	\$3 copay	N/A	
\$3 copay	\$3 copay	N/A	
\$3 copay	\$3 copay	N/A	

CAREFIRST
SilverScript
(up to a 34-day supply)
\$10 copay
\$40 copay
\$70 copay
(up to a 90-day supply)
\$20 copay
\$80 copay
\$140 copay

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a <u>federal law</u> gives you more choices about your prescription drug coverage. Refer to the required notice, Prescription Drug Coverage and Medicare Notice of Creditable Coverage, available on www.pgcps.org/benefits for more information.



10

VISION

If you are enrolled in a PGCPS medical plan, vision benefits are automatically included. For retirees enrolled in the stand-alone option at retirement, the **BlueVision Plus** plan provides additional coverage.

The BlueVision Plus plan includes vision services such as routine eye examinations, eyeglasses, and contact lenses. The plan is offered by CareFirst through the **Davis Vision**, **Inc.** national network of providers.

You have the option of using providers in or out of the Davis Vision network; however, benefits are higher when you use in-network providers.



BLUEVISION PLUS

Frames	In-Network	Out-of-Network
Davis Vision Frame Collection	\$0 copay	N/A
Non-Collection Frame	Plan pays up to \$160; you pay balance minus 20% discount	Plan pays \$20; you pay balance
Eyeglass Lenses		
Single Vision	\$10 copay	Plan pays \$40; you pay balance
Lenticular	\$10 copay	Plan pays \$130; you pay balance
Basic Bifocal	\$10 copay	Plan pays \$60; you pay balance
Basic Trifocal	\$10 copay	Plan pays \$80; you pay balance
Contact Lenses		
Davis Vision Contact Lens Collection	100% covered, no copay	N/A
Medically Necessary Contacts	100% covered, no copay; prior approval required	Plan pays \$230; you pay balance
Other (Non-Collection or Elective Lenses)	Plan pays up to \$200; you pay balance minus 15% discount	Plan pays \$105; you pay balance

DENTAL

You have access to dental benefits through PGCPS at retirement.

Dental benefits include coverage for routine diagnostic services such as exams and cleanings, as well as basic services such as fillings and extractions, and major services such as crowns and dentures. Orthodontia for both children and adults is available.

Dental benefits are provided through Aetna. You may use providers in or out of the Aetna provider network, but your out-of-pocket cost for care will generally be lower when you use innetwork providers.

Aetna does not require dental cards to obtain services. However, you can print out a card and access claim forms by creating an account and logging in to the <u>Aetna website</u>.

Featur	res
Annua	al Deductible
Retire	e Only
Retire	e + Dependents (Family)
Annua	al Benefit Maximum
(preve	ntive, minor and major services)
Lifetin	ne Orthodontia Maximum
Servic	es
Preve	ntive Care
(exam	s, X-rays, cleanings)
Basic :	Services
	Services s, root canals, extractions)
(filling	
(filling	s, root canals, extractions)
(filling	s, root canals, extractions) Services as, inlays, onlays)

AETNA DENTAL PPO		
In-Network	Out-of-Network	
\$50 \$100	\$100 \$200	
\$4,000 per person	\$3,000 per person	
\$3,000 per person	\$3,000 per person	
Plan Pays	Plan Pays	
	. iaii ayo	
100% no deductible	90% no deductible	
100%	90%	
100% no deductible	90% no deductible 90%	





PGCPS pays the full cost of this coverage.

At retirement, your life insurance will become 25% of the basic policy you had while employed, up to a maximum of \$25,000. Life insurance benefits are administered through MetLife. For additional information or to update your beneficiaries, contact PGCPS Benefits Services at pgcps.benefits@pgcps.org or call: 301-952-6600.



2026 RATES

Health plan costs will increase in 2026. However, some retiree + dependent combinations may see lower premiums with the new coverage levels.



MEDICAL AND PRESCRIPTION DRUG

	KAISER MEDICAL AND PRESCRIPTION DRUG	CAREFIRST MEDICAL	CAREMARK PRESCRIPTION DRUG
Non-Medicare (20% contribution)	Monthly	Monthly	Monthly
Retiree Only	\$153.94	\$127.72	\$ 51.17
Retiree + Child(ren)	\$307.88	\$255.45	\$102.35
Retiree + Spouse	\$323.27	\$268.22	\$107.46
Family	\$400.25	\$336.27	\$134.73
Medicare¹ (20% contribution)	Monthly	Monthly	Monthly
Medicare – Retiree Only	\$ 67.52	\$ 55.92	\$ 51.17
Medicare – Retiree + Child (one w/Medicare)	\$221.46	\$183.65	\$102.35
Medicare – Retiree + Child (both w/Medicare)	\$135.04	\$111.85	\$102.35
Medicare – Retiree + Children (one w/Medicare)	\$375.40	\$311.38	\$102.35
Medicare - Retiree + Children (two w/Medicare)	\$288.98	\$239.58	\$134.73
Medicare – Retiree + Spouse (one w/Medicare)	\$221.46	\$183.65	\$107.46
Medicare – Retiree + Spouse (both w/Medicare)	\$135.04	\$111.85	\$107.46
Medicare – Retiree + Family² (one w/Medicare)	\$390.79	\$324.15	\$134.73
Medicare – Retiree + Family² (two w/Medicare)	\$288.98	\$239.58	\$134.73
Medicare – Retiree + Family ² (three or more w/Medicare)	\$202.56	\$167.78	\$134.73

¹ The amount you pay will take into account whether you and your family members are eligible for Medicare.

DENTAL AND VISION

	AETNA DENTAL PPO	BLUEVISION PLUS
20% contribution	Monthly	Monthly
Retiree Only	\$10.10	\$1.00
Retiree + Child(ren)	\$20.20	\$2.00
Retiree + Spouse	\$21.22	\$2.10
Family	\$29.30	\$2.90

Dental and vision rates do not vary by Medicare status.

Please note, the monthly deduction amounts may vary slightly from the actual monthly deductions due to rounding.

² Family includes the retiree, spouse and one or more children.

WHO TO CALL

PGCPS Benefits Services is available to help you answer questions about your benefits. Contact your designated Benefits Coordinator based on your last name.

Last names starting with A

Jennifer Brady jennifer.brady@pgcps.org 301-952-6347

Last names starting with B-G

LaVon Johnson

lavon.johnson@pgcps.org

301-952-6323

Last names starting with H-Pa

Shafeqah Uqdah shafeqah.uqdah@pgcps.org 301-952-6322

Last names starting with Pe - Z

Wilma Samuel-Reeves
wilma.samuelreeves@pgcps.org
301-780-6881

PGCPS Benefits Services pgcps.benefits@pgcps.org

301-952-6600

Benefit partners
Medical/Vision CareFirst Kaiser
Prescription Drugs CVS Caremark SilverScript Kaiser
Dental Aetna
Vision Davis Vision, Inc.
Life Claims MetLife

Phone
1-800-628-8549 1-800-777-7902
1-888-865-6564 1-844-449-8738 1-800-777-7902
1-877-238-6200
1-800-783-5602
1-800-638-6420

Web
www.carefirst.com/pgcps my.kp.org/pgcps
www.caremark.com www.caremark.com my.kp.org/pgcps
www.aetna.com
www.davisvision.com
www.WillsCenter.com www.metlife.com/info/pgcps





PGCPS provides a comprehensive benefits coverage package for employees. This guide highlights available plan benefits but does not include every detail of each plan. Each benefit is governed by an official plan document or insurance contract. If there is a conflict between this guide and the official plan documents, the plan documents will govern.