

PUBLIC EDUCATION HEALTH TRUST

Governed, led, supervised and guided by Public Education Employees
Local Control, Low Costs, Local Choice, High Quality

ABOUT US

PEHT was created by public education employees. You elect the board that governs PEHT and all benefit decisions are made by your peers. PEHT is a not-for-profit insurance provider with no profit motivation. Your claim activity is always protected and kept private. Your organization chooses which of the 8 medical plans it wants to offer, providing flexibility to meet the individual family needs.



BENEFIT ENHANCEMENTS

Does not apply to Legacy Plan



ER DEDUCTIBLE

PEHT Trustees have removed the ER Deductible. No longer exposed to possible \$500 for using the Emergency Department

INPATIENT DEDUCTIBLE

PEHT Trustees have removed the Inpatient Deductible. No longer exposed to up to \$1,000 for being admitted to hospital

RX COINSURANCE MAXIMUMS

All plans now have a prescription co-insurance maximums. Co-insurance per scripts still apply, however annual caps have been provided.

A wide-angle photograph of a mountain range under a clear blue sky. The mountains are covered in snow, with some rocky peaks visible. In the foreground, there is a body of water and a grassy, rocky hillside.

Any changes made during open enrollment are effective July 1, 2022. Any deductibles or out of pockets met January - June will count towards July-December



OPEN
ENROLLMENT
BEGINS MAY
9TH AND WILL
END JUNE 17TH.
DON'T BE LATE

CHOOSING THE RIGHT PLAN FOR YOUR FAMILY

Medical Plan Summary	Plan CB+	Plan FB	HDHPB	Legacy
Deductible	\$500/\$1,500	\$1,500/\$3,000	**\$1,500/**\$3,000 Medical and RX	\$50/\$150
20% Co-Insurance Maximum * In- Network	\$2,000/\$6,000	\$3,000/\$6,000	\$3,500/\$7,000	\$264.75
Primary Care Physician, Mental Health Office Visits	Deductible/Co-Insurance	\$25 Copay for 6 visits* in- network	Deductible/Co-Insurance	Deductible/Co-Insurance
Preventative Services *In Network	100%	100%	100%	100%
Telemedicine - Teladoc	100%	100%	\$50 then 100% after deductible	100%
*In-Patient Deductible ER Deductible	\$0	\$0	\$0	Inpatient \$500 deductible
RX Co-Insurance	30%	30%	20% after deductible	(\$12/\$25/\$50)
RX Co-Insurance Annual Maximum	\$3,000/\$6,000	\$3,000/\$6,000	\$2,050/\$4,100 after deductible	N/A
*In-Network Benefit			**aggregated deductible family of 2 or more, the deductible is \$3,000. No single deductible when more than one	

CHOOSING THE RIGHT PLAN FOR YOUR FAMILY

Dental and Vision Plan Summaries	Plan CB+	Plan FB	HDHPB	Legacy
Dental Deductible	\$75/\$225	\$75/\$225	\$75/\$225	No deductible
Annual Maximum	\$3,000 per person	\$3,000 per person	\$3,000 per person	\$2,000 per person
Preventative/Basic/Major	100%/80%/50%	100%/80%/50%	100%/80%/50%	100%/80%/50%
Orthodontia – Lifetime	\$2,000	N/A	N/A	\$2,000 Under age 19
Vision Exam (VSP Provider)	\$25	\$25	\$25	\$25
Vision Frames/Lenses	\$25	\$25	\$25	\$25
Frames	1 year/2 every other year			
Contacts	Up to \$170 in lieu of frames			

JEA SELECTED PREMIUMS FY23
SHOWN AS MONTHLY AND AS PAYROLL DEDUCTIONS

12 Months of Coverage July 22 – June 23	Plan CB+	Plan FB	HDHPB	Legacy
Employee Only	220.37	140.77	0.00	322.47
Employee and spouse	450.20	283.00	192.00	664.70
Employee and Children	414.73	257.13	172.13	610.13
Employee and Family	597.82	352.62	220.62	905.62
21 Paycheck Deductions				
Employee Only	125.93	80.44	0.00	184.27
Employee and Spouse	257.26	161.72	109.72	379.83
Employee and Children	236.99	146.93	98.36	348.64
Employee and Family	341.61	201.50	126.07	517.50

PEHT

MOVING TO A NEW PLAN?

www.mibenefits.com login or create your unique login

Open Enrollment - May 9th the mibenefits will have options for you to move plans.

Any deductibles and out of pockets met during January-June will transfer to July-December plans.

Go365 - by September 30

Bronze Status is at 13% **Need 50%**

Silver Status is at 3% **Need 10%**

Contact Ryia Waldern

Individuals can earn \$450 a year

Group can earn 2% off next years rates



TELADOC

24 hr 7 day a week Medical provider

www.tealdoc.com

1-800-835-2362

Schedule your free* medical consult

*\$50 for HDHP

GO365



Register today !!

Earn points for check ups

Points = bucks = Amazon Gift Cards

PROVIDENCE EXPRESS CARE AND URGENT CARE

5 locations in Anchorage

-Mat-Su. Also available
in Washington/Oregon

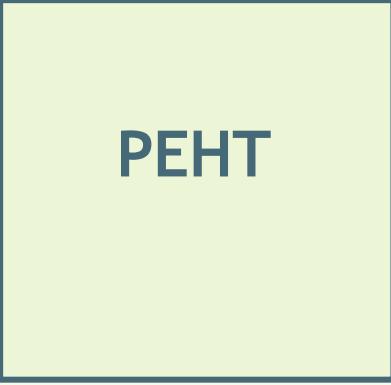
7am-7pm 7 days a week

\$25 copay for office visit*

(HDHP After deductible)



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The logo for PEHT, featuring the acronym in a bold, dark blue sans-serif font inside a light green square with a thin dark blue border.

PEHT

RESPONSIVENESS

PEHT has one purpose. To serve its members with high quality service and access to reasonable health insurance plans.

We protect your health claims data.

Our governance board is elected by you the member.
(two seats open this fall)

The board designs the plans to meet the needs of education employees.

PEHT administrative costs are less than 5% of total costs.

Last five years of premium increases have been below national medical inflation numbers.

We are consistent with no SPIKES or surprises.



OPEN ENROLLMENT ENDS
JUNE 17TH DON'T BE LATE

LOGIN TO MIBENEFITS.COM
TO MAKE ANY CHANGES
EFFECTIVE JULY 1, 2022



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