





RETIREE **BENEFITS**

2027 ENROLLMENT DECISION GUIDE



PGCPS

OUR FOCUS IS You





At Prince George's County Public Schools

OUR FOCUS IS **YOU**

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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 2027 benefits is October 27 to November 12, 2026. Any changes you make will be effective January 1, 2027.

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 27 – November 12, 2026), if you want to delete dependents, drop coverages or switch between plans (Kaiser Permanente 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 or by contacting PGCPS Benefits Services.

WHAT YOU NEED TO KNOW

Review the summary of What You Need to Know (WYNTK) for 2027 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 Permanente to CareFirst or vice versa) complete and return the Retiree Enrollment Form by November 12, 2026.

ARE YOU UNDER 65? Important Changes to the Kaiser Permanente HMO for 2027
To minimize the impact of rising healthcare costs on your monthly contributions, we are introducing plan changes to the Kaiser Permanente plan for participants not eligible for Medicare. Review a summary of these changes at **www.pgcps.org/open**.

PAYING YOUR PREMIUMS

As a retiree, your monthly premiums for healthcare 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 Health Equity/WageWorks, 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 monthly 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 HMO or the CareFirst BlueChoice Triple Option (CareFirst).

KAISER PERMANENTE

With Kaiser Permanente, 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 Permanente has 34 medical centers in the Mid-Atlantic region. Visit **my.kp.org/pgcps** to choose a provider near you. Prescription drug coverage is included.

The coverage you receive is based on your Medicare eligibility:

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

Kaiser Permanente HMO – Non-Medicare

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

- **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.
- **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 **kp.org/healthyliving** 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.
- **Virtual visits::** 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 Permanente 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.
- **One Pass® Fitness Program:** The One Pass fitness program can help you find the right fitness routine for you, whether you exercise at home or the gym. Choose from a large nationwide network of gyms and fitness centers and enjoy digital fitness classes from the comfort of home. For more information, visit **YourOnePass.com** or call **1-877-614-0618** (TTY **711**), Monday through Friday, 9 a.m. to 10 p.m.
- **Vision Essentials:** The Kaiser Permanente plan includes coverage for eye exams, glasses and contacts. As a Kaiser Permanente 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 Permanente Medicare Advantage

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

- **Transportation to appointments:** Members can receive up to 24, one-way rides per plan year for non-urgent medical appointments at Kaiser Permanente medical centers and contracted facilities.
- **Virtual care[1]:** Virtual care allows members to see their personal doctor—as well as any specialists they've been referred to—by video, phone, or email. When you need medical attention, you can start your journey using any of Kaiser Permanente's virtual care options after registering and logging on to **kp.org** and downloading the Kaiser Permanente app.
- **One Pass® Fitness Program[2]:** The One Pass fitness program can help you find the right fitness routine for you, whether you exercise at home or the gym. Choose from a large nationwide network of gyms and fitness centers and enjoy digital fitness classes from the comfort of home. For more information, visit **YourOnePass.com** or call **1-877-614-0618** (TTY **711**), Monday through Friday, 9 a.m. to 10 p.m.
- **Preventive dental plan:** Kaiser Permanente Medicare health plans include preventive dental coverage through LIBERTY Dental Plan. You'll pay a $30 copayment for each preventive care office visit, which includes up to two oral exams, two cleanings, and two bitewing X-rays every year. Other covered dental services are provided at a reduced fee.
- **BrainHQ:** Your brain is the center of everything you think, do and feel. That's why Kaiser Permanente 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.
- **Thriving After 60:** Make new friends at Kaiser Permanente'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 Permanente plan includes coverage for eye exams and an allowance for glasses or contacts. As a Kaiser Permanente 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.



KAISER PERMANENTE MEDICARE ADVANTAGE

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

1 When appropriate and available. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors and health care providers from providing care across state lines. Laws differ by state.

2 One Pass® is a registered trademark of One Pass Solutions, Inc. in the U.S. and other jurisdictions and is a voluntary program.

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, Walgreens Healthcare Clinic or CloseKnit.
- **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

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 online tools and resources.

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

CareFirst WellBeing

CareFirst WellBeing delivers resources customized to your interests and needs. It 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.

To get started, visit **www.carefirst.com/wellbeing**.

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 PERMANENTE HMO	CAREFIRST		
		BlueChoice HMO	BluePreferred PPO	Indemnity Option
Features				
Annual Deductible Employee Only Employee + Dependents (Family)	 $250 $500	 None None	 $200 $600	 $500 $1,000
Annual Out-of-Pocket Max (includes Annual Deductible) Employee Only (Individual) Employee + Dependents (Family)	 $2,000 $4,000	 $1,000 $2,000	 $1,000 $2,000	 $2,000 $4,000
Coinsurance	Plan pays 90%	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	$10 copay	Plan pays 100% after $10 copay	Plan pays 100% after $20 copay	Plan pays 70% after deductible; you pay 30%
Specialist	$25 copay	Plan pays 100% after $25 copay	Plan pays 100% after $35 copay	Plan pays 70% after deductible; you pay 30%
Hospital Services				
Inpatient	$150 copay, after deductible	Plan pays 100% after $150 copay	Plan pays 80% after deductible; you pay 20%	Plan pays 70% after deductible; you pay 30%
Outpatient	$150 copay, after deductible	Plan pays 100%	Plan pays 80% after deductible; you pay 20%	Plan pays 70% after deductible; you pay 30%
Emergency Room Services	$250 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	$150 copay, after deductible	Plan pays 100%	Plan pays 100% after deductible	Plan pays 70% after deductible; you pay 30%
Outpatient	$10 copay	Plan pays 100%	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)	$10 copay (Optometry) $25 copay (Opthalmology)	Plan pays 100% after $10 copay	Plan pays 100% after $10 copay	N/A
Frames/Eyeglass Lenses	$75 discount at KP	Discounts available	Discounts available	N/A
Contact Lenses	$25 discount at KP	Discounts available	Discounts available	N/A
Hearing Care	Once every 36 months	Once every 36 months, up to $5,000		
Hearing Aid Evaluation Test	$0 copay	Plan pays 100%	Plan pays 80%	Plan pays 70%
Hearing Aids	No coinsurance, 1 hearing aid/ear	Plan pays 100%	Plan pays 80%	Plan pays 70%

Medicare Medical Coverage At-a-Glance

	KAISER PERMANENTE 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% CareFirst Plan pays Part A deductible, then covered at 100%
Outpatient	Plan pays 100%	
Emergency Room Services	Plan pays 100% after $50 copay	
Mental Health and Substance Abuse Treatment		
Inpatient	Plan pays 100%	Medicare pays 80% CareFirst Plan pays 20% of Medicare's approved amount
Outpatient	Plan pays 100%	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 Permanente 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

PGCPS offers you access to prescription drug benefits at retirement.

If you participate in the Kaiser Permanente medical plan option, prescription drug benefits are included with your coverage. You will receive all prescription medications through a Kaiser Permanente 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

	KAISER PERMANENTE HMO		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	$25 copay	$35 copay	$10 copay
Preferred Brand (Formulary)	$40 copay	$60 copay	$40 copay
Non-Preferred Brand	$65 copay	$85 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	$50 copay	$70 copay	$20 copay
Preferred Brand (Formulary)	$80 copay	$120 copay	$80 copay
Non-Preferred Brand	$130 copay	$170 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

	KAISER PERMANENTE MEDICARE ADVANTAGE			CAREFIRST
Prescriptions	**Preferred Pharmacy**	**Standard Pharmacy**	**Out-of-Network/ Long-Term Care**	**SilverScript**
Retail	(up to a 60-day supply)	(up to a 60-day supply)	(up to a 31-day supply)	(up to a 34-day supply)
Generic	$5 copay	$10 copay	$5 copay	$10 copay
Preferred Brand (Formulary)	$5 copay	$10 copay	$5 copay	$40 copay
Non-Preferred Brand	$5 copay	$10 copay	$5 copay	$70 copay
Mail Order	(up to a 100-day supply)	(up to a 90-day supply)	N/A	(up to a 90-day supply)
Generic	$3 copay	$3 copay	N/A	$20 copay
Preferred Brand (Formulary)	$3 copay	$3 copay	N/A	$80 copay
Non-Preferred Brand	$3 copay	$3 copay	N/A	$140 copay

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a **federal law** 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.





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**, 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 in-network 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 **Aetna website**.

	AETNA DENTAL PPO	
Features	**In-Network**	**Out-of-Network**
Annual Deductible Retiree Only Retiree + Dependents (Family)	 $50 $100	 $100 $200
Annual Benefit Maximum (preventive, minor and major services)	$4,000 per person	$3,000 per person
Lifetime Orthodontia Maximum	$3,000 per person	$3,000 per person
Services	**Plan Pays**	**Plan Pays**
Preventive Care (exams, X-rays, cleanings)	100% no deductible	90% no deductible
Basic Services (fillings, root canals, extractions)	100% after deductible	90% after deductible
Major Services (crowns, inlays, onlays)	60% after deductible	50% after deductible
Orthodontia (adults and children)	50% after deductible	40% after deductible



LIFE

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 by email: **pgcps.benefits@pgcps.org** or call: **301-952-6600**.





2027 RATES

Health plan costs will increase in 2027
for participants not eligible for Medicare.

MEDICAL AND PRESCRIPTION DRUG	KAISER PERMANENTE MEDICAL AND PRESCRIPTION DRUG	CAREFIRST MEDICAL	CAREMARK PRESCRIPTION DRUG
Non-Medicare (20% contribution)	**Monthly**	**Monthly**	**Monthly**
Retiree Only	$156.25	$131.55	$ 51.17
Retiree + Child(ren)	$312.50	$263.11	$102.35
Retiree + Spouse	$328.12	$276.26	$107.46
Family	$406.25	$348.04	$134.73
Medicare[1] (20% contribution)	**Monthly**	**Monthly**	**Monthly**
Medicare – Retiree Only	$ 67.54	$ 57.60	$ 51.17
Medicare – Retiree + Child (one w/Medicare)	$223.79	$189.16	$102.35
Medicare – Retiree + Child (both w/Medicare)	$135.08	$115.21	$102.35
Medicare – Retiree + Children (one w/Medicare)	$380.04	$320.72	$102.35
Medicare – Retiree + Children (two w/Medicare)	$291.33	$246.77	$134.73
Medicare – Retiree + Spouse (one w/Medicare)	$223.79	$189.16	$107.46
Medicare – Retiree + Spouse (both w/Medicare)	$135.08	$115.21	$107.46
Medicare – Retiree + Family[2] (one w/Medicare)	$395.66	$333.87	$134.73
Medicare – Retiree + Family[2] (two w/Medicare)	$291.33	$246.77	$134.73
Medicare – Retiree + Family[2] (three or more w/Medicare)	$202.62	$172.81	$134.73

[1] The amount you pay will take into account whether you and your family members are eligible for Medicare.
[2] Family includes the retiree, spouse and one or more children.

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.

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
Bernardine Annor
bernardine.annor@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	Phone	Web
Medical/Vision CareFirst Kaiser Permanente	**1-800-628-8549** **1-800-777-7902**	www.carefirst.com/pgcps my.kp.org/pgcps
Prescription Drugs CVS Caremark SilverScript Kaiser Permanente	**1-888-865-6564** **1-844-449-8738** **1-800-777-7902**	www.caremark.com www.caremark.com my.kp.org/pgcps
Dental Aetna	**1-877-238-6200**	www.aetna.com
Vision Davis Vision, Inc.	**1-800-783-5602**	www.davisvision.com
Life Claims MetLife	**1-800-638-6420**	www.WillsCenter.com www.metlife.com/info/pgcps



OUR FOCUS IS You

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.

OCTOBER 2026