

2025 Health Plan Changes Highlight

Open Enrollment elections are effective **January 1, 2025**.

FSA program:

- ❖ Run-off claims:
 - Deadline for 2024 Claims: All claims must be received by WEX no later than March 31, 2025.
- ❖ 2025 FSA Health Care Account:
 - Annual contribution limits will increase from \$3,050 in 2024 to \$3,200 in 2025.
 - For the plan year 2024, it is permissible to carry over up to \$610 of unused funds from the Health Care Account into the plan year 2025. Similarly, for the plan year 2025, you may carry over up to \$640 of unused funds from the Health Care Account into the plan year 2026.
- ❖ 2025 FSA Commuter Benefits:
 - The maximum tax-free monthly allowance for transit and parking will increase from \$300 to \$315. The Commuter Express program enables participants to purchase transit passes with pre-tax dollars, with monthly payroll deductions aligned with your preauthorized amount. Please note that the program does not permit excess purchases with after-tax funds.
 - In accordance with IRS regulations, the FSA Commuter Program is exclusively intended for employee use and does not extend to dependents.
 - For new subscribers, your new ID cards will be dispatched during the second week of December. For existing participants, Debit Cards are reissued every four years.

Dental Plan:

- ❖ The monthly employee contribution is \$5 (employee only), \$10 (employee plus one), or \$15 (employee plus family).

Vision Plan:

- ❖ The monthly employee contribution is \$1 (employee only), \$2 (employee plus one), or \$3 (employee plus family).

2025 Changes to Basic Plans

- ❖ PERS Gold and PERS Platinum:
 - Blue Shield of California will be the new Third-Party Administrator for all PPO plans.
 - For members in a basic plan they are partnering with Included Health to provide member services, including answering inquiries, guiding members to the most appropriate in-network and high-quality providers, and providing care coordination services for members, particularly those with complex health conditions. Included Health will also expand access to care through their supplemental virtual primary care and behavioral health care services.
 - There are no changes to copays, coinsurance, or deductibles with this transition to Blue Shield.
- ❖ Anthem Blue Cross Del Norte:
 - Third-party administrator transition removes the plan; no longer part of CalPERS health plan offerings
 - Administrative transfer plan to Blue Shield Access+

- ❖ Blue Shield Trio:
 - Expansion into: Contra Costa county, 3 ZIP codes in Shasta county
- ❖ Kaiser Permanente HMO:
 - Expansion into 14 ZIP codes in Monterey county
- ❖ UnitedHealthcare SignatureValue Harmony:
 - Expansion into Napa county, 50 ZIP codes in Contra Costa county, 2 ZIP codes in Solano county

*Regardless of the health plan you enroll in, continuity of care coverage is available to you even if your current doctor, medical group, or hospital is not available. This means you'll continue to receive the medical and behavioral health services and medicines you need. Check with your health plan or call the Department of Managed Health Care at 1-888-466-2219 for more information about continuity of care options.

2025 Changes to Medicare Plans (Retirees Only)

- ❖ PERS Gold & PERS Platinum Supplement Medicare Plan:
 - Blue Shield of California will be the new Third Party Administrator for all PPO plans.
 - Provider networks and care coordination will not change.
 - No changes to copays or coinsurance with this transition to Blue Shield.
- ❖ UnitedHealthcare Medicare Advantage Edge:
 - Exits all counties; no longer part of CalPERS health plan offerings
 - Administrative transfer plan to UnitedHealthcare Group Medicare Advantage
- ❖ Western Health Advantage MyCare Select:
 - Exits all counties; no longer part of CalPERS health plan offerings
 - Administrative transfer plan to Blue Shield Medicare; Napa County residents: UnitedHealthcare Group Medicare Advantage

Benefit design changes in 2025:

- ❖ Doula services for all pregnant and postpartum members in Basic plans to receive health education, advocacy, physical and emotional non-medical support before, during, and after pregnancy, miscarriage, stillbirth, and abortions.
- ❖ Travel benefit to standardize travel and lodging coverage for eligible medically necessary services including, but not limited to abortion services, gender affirming care, complex surgeries, and cancer care that cannot be accessed within 50 miles from the member's residence for all Basic and Medicare members, up to \$5,000 per occurrence. This includes transportation, lodging, and meals for the member and a companion (both parents/guardians when patient is under 18).

*Any enrollment changes made through CalPERS self-service will not be validated. All enrollments and changes must be done via SECOVA. (Active Employees Only)