

SMART LIVING

A PUBLICATION OF THE PUBLIC EDUCATION HEALTH TRUST



pehtak.com



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SMART LIVING
MAY / JUNE 2026



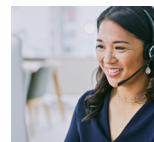
New PEHT Website Coming Soon!

We're building a new site to help you better understand benefits, find plan information and stay up to date on the Trust. Your feedback matters – scan the QR code to share what you'd like to see.



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Questions about your current health plan benefits? Call EBMS at 866-247-1443.

Mon - Thurs: 4 a.m. - 6 p.m. AKDT | Fri: 4 a.m. - 4 p.m. AKDT

NEW! Open Access Medical Plan



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A New Open Access Health Plan Model Is Coming – Here's Why

PEHT is committed to helping you get affordable care from providers you trust with support you can count on. That's why, starting **July 1, 2026**, we're moving from Aetna Signature Administrators Preferred Provider Organization (PPO) to an Open Access plan approach.

Our new Open Access Medical Plan will give you more flexibility, clearer pricing and added support – often with lower costs than a typical PPO. EBMS will continue to provide claims administration and member services.

What's Different (And Better)

While some parts of your plan experience will feel familiar, Open Access gives you what most health plans don't:

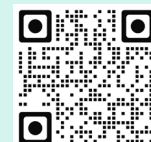
- **Lower prices for high-quality care.** Unlike a typical PPO with inflated costs that continue to rise, your care is priced at a fair, transparent rate – and claims are reviewed for errors and overcharges.
- **Provider choice.** You're not restricted to a network and you can keep seeing providers you already prefer.
- **Billing advocacy.** No matter which provider you see, EBMS manages provider bill concerns on your behalf so you don't overpay.

What Stays the Same

In addition to familiar plan features, like many preventive care services covered at 100% and set copayments for provider visits, there's still:

- **One number to call.** Any time you have questions, you just have to call the member number **(866-247-1443)** on your benefits ID card for real support from real people.
- **Direct provider contracts.** There's no change to our established provider and facility partnerships.

Nothing matters more to PEHT than your peace of mind when it matters most – Open Access offers clarity, confidence and support you can count on.



Learn More: Open Access & Open Enrollment

Scan here or go to pehtak.com to get information on all your health and wellness benefit options.



Why Open Access Costs Less

Across the country, and right here in Alaska, traditional PPO networks are becoming less effective at controlling costs. Even when they promise discounts, those discounts are often tied to higher starting prices that can be marked up hundreds – or even thousands – of percent.

No Inflated Prices

Open Access uses fair pricing based on what care actually costs – so you don't pay more than you should.

That means:

- What you may owe a provider starts from a lower total cost.
- Lower prices can help you reach your deductible with fewer out-of-pocket dollars.
- Overall care costs are often much lower.

Fairer Pricing

Example: An MRI may cost \$1,500 with a PPO, but \$400 with Open Access. Since what you may owe is based on the lower amount, **you pay much less.**

It's a simpler, fairer way to pay for care that helps keep your costs as low as possible.



Open Enrollment Starts Now: May 4 - 29, 2026

Now's your once-a-year chance to review your health plan. Learn more at pehtak.com.

Open Enrollment ends on May 29 at 4 p.m. AKDT. After that, you can't make benefit changes unless you have a qualifying life event.

Make Your Benefit Choices

Choosing your health benefits is an important decision. Submit forms if:

- You're enrolled in a plan and want to change your selection.
- You previously waived plan coverage but want to enroll this year.
- You're enrolled in a plan and want to waive coverage.

Review Dependent Coverage

When completing enrollment, list dependents you'd like to cover.

- **If dependents are already enrolled:** Include their names on your enrollment submission to confirm that you want to continue their coverage. No additional documentation is needed.
- **You want to add dependents not enrolled:** Include eligibility verification, such as a marriage or birth certificate, with your enrollment submission.

Submit Your Forms

You can either:

- Use miBenefits.EBMS.com.
- Fax paper forms – request from PEHT – and any requested documents to PEHT at **907-222-2556**.

Questions? Contact **907-274-7526, 888-685-7526** or info@pehtak.com.

Billing Advocacy for Every Visit

Ever see a provider and then get an unexpected, confusing bill weeks – or even months – later? This happens all the time in healthcare and can be incredibly frustrating. That's where your Open Access plan comes in.

Unlike with most health plans, you're never left to figure out a billing issue on your own.

Here's how EBMS billing advocacy works:

1. After you get care, your provider sends your plan a request for payment (claim).
2. EBMS reviews claims for errors and overcharges – it's built-in price protection.
3. If needed, they adjust the amount paid to the provider.

EBMS will manage any issues so you don't have to.

If you ever get a provider bill, all you need to do is compare it to the Explanation of Benefits (EOB) that your plan sends you. If the provider bill doesn't match your EOB or you aren't sure, you'll just call the member number **(866-247-1443)** on your benefits ID card.

It's one more way Open Access helps protect you from unfair costs.



Support When It Matters Most

With your Open Access plan, you'll have a dedicated support team – real people with clear answers. With just one member number **(866-247-1443)** to call, they'll help you:

- **Find and compare providers.** They'll look at cost, quality and how well they work with your plan, and can even book an appointment for you.
- **Understand your plan:** You'll get all the information you need to make the most of your benefits.
- **Skip the hassle:** From ID cards to claims questions, you have a team to handle all the details for you.
- **Have a smooth visit:** If a provider has plan questions, EBMS talks with them for you.
- **Understand provider bills:** Anytime you have billing questions, you can just call for help.



Your Benefits, All in One Place

With your Open Access plan, you'll keep your miBenefits login information. You can use the site to see your benefits 24/7, find providers, track claims, download your benefits ID card and more.