

BE INFORMED!
KNOW YOUR BENEFITS!

**2026 Benefits at Retirement
Educational Information**



The Office of Risk and Benefits Management's mission and vision is to promote the health and well-being of our employees and retirees. Our dedicated staff includes district personnel and on-site representatives of our benefits providers who are ready to assist and guide you with your benefits needs.

BENEFITS AT RETIREMENT

You may be eligible to continue your healthcare coverage and Flexible Benefits for yourself and your currently insured eligible dependent(s).



BENEFITS AT RETIREMENT

- You may only continue the Hospital Indemnity Coverage, Term Life Insurance and Accidental Death & Dismemberment (at the same or decreased level) if enrolled as an active employee at the time of retirement.**
- You may convert all or any portion of your Board Life insurance in force on the date of your retirement through Metropolitan Life to an individual policy.**
- In addition, you will be offered the opportunity to purchase a \$5,000 or \$10,000 term life insurance policy through Metropolitan Life on a guaranteed basis.**

BENEFITS AT RETIREMENT

- **Benefits for 11-month and 12-month employees will be effective the 1st of the month following your retirement date.**
- **Ten-month employees who retire on the last day of the school year will continue to receive Board-paid benefits through August 31st, and benefits selected as a retiree will be effective September 1st.**
- **If you retired and had declined healthcare coverage, you will not be eligible to enroll as a retiree in healthcare coverage, even if you are Medicare eligible. However, you may still be eligible for flexible benefits.**

ENROLLMENT PERIOD

(30-DAYS FROM DATE OF NOTIFICATION)

If you do not enroll during this enrollment period, the following will occur:

- ▶ Your healthcare coverage & flexible benefits will terminate at the end of your retirement month
- ▶ Your current dependent healthcare coverage and flexible benefits will terminate at the end of your retirement month
- ▶ If you are a 10-month employee that works until the end of the school year, your current benefits, including dependent coverage, will terminate on August 31st

HEALTH INSURANCE SUBSIDY (HIS)

- **The HIS amount is based on your length of service, and the subsidy amount is \$7.50 per month per year of service, up to \$225 per month maximum amount.**
- **If your health insurance premium is directly deducted from your FRS check, your state subsidy of \$7.50 per month per year of service, up to \$225 per month, is tax free.**
- **If your health insurance premium is paid via direct pay, you do qualify for the HIS, but the benefit becomes taxable.**
- **If you elect not to continue benefits through a School Board sponsored healthcare plan, you are eligible for the HIS but the benefit becomes taxable.**
- **If you are Medicare eligible, you are eligible and all the above applies.**

PAYMENT OPTIONS

- You may elect to have your premiums deducted from your Florida Retirement System (FRS) check.
- You may elect to have your premiums automatically deducted from your personal bank account.

OR

- You may elect to be billed monthly.

NOTE: Please mail your first month's payment (additional payment may be due) for your selected benefits (Healthcare and/or Flexible Benefits) to: **FBMC Benefits Management, Inc., P. O. Box 746907, Atlanta, GA. 30374-6907.** If you elect to pay through FRS deductions, you may be billed for the months that a deduction is not taken from your check.

Current law provides that, if your health insurance premium is directly deducted from your FRS check, your state subsidy of \$7.50 per month per year of service, up to \$225 per month, is tax free.

UNDER AND OVER 65

- Retirees under 65, or over 65 on the Teachers Retirement System (TRS) and not eligible for Medicare, are offered the ability to continue the se Cigna medical plan.

NOTE: If you are eligible for Medicare, you can't elect not to enroll. If you do, you will automatically be terminated from your Cigna Plan.

- Retirees over 65, or under 65 but Medicare eligible, cannot remain enrolled in the Cigna plans. However, they are eligible to enroll in a Medicare Group Plan sponsored by the School Board.

NOTE: If you are Medicare eligible, you must enroll in both Part A and B.

2026 CIGNA HEALTHCARE PLANS

OVER/UNDER 65 & NOT MEDICARE ELIGIBLE

	OAP Extended Network	LocalPlus Focused Network	SureFit Network*
CIGNA Medical Plans			
Retiree Only	\$ 1,071.00	\$ 1,040.00	\$ 1,011.00
Spouse/Domestic Partner	\$ 1,495.00	\$ 1,447.00	\$ 1,405.00
Child(ren)	\$ 1,052.00	\$ 1,018.00	\$ 988.00
Family	\$ 2,994.00	\$ 2,898.00	\$ 2,811.00
Adult Dependent Child	\$ 911.00	\$ 884.00	\$ 859.00

NOTE: You must add the Retiree Only rate to the Dependent rate to get the total monthly premium.

*At the time of enrollment, a Primary Care Physician (PCP) is required, and you must live in the tri-county area (Mii-Dade, Broward and Palm Beach Counties).

**Over 65 and Under 65
Medicare
Eligible Retirees**

SPECIAL ENROLLMENT PERIOD (SEP) FOR NEW RETIREES

It is important to enroll for Medicare to be eligible for the Medicare Plans offered by MDCPS.

You can enroll in Medicare Part A and/or Medicare Part B in the following ways:

- 1. Online at www.SocialSecurity.gov**
- 2. Call Social Security at 1-800-772-1213 (Monday – Friday 8 a.m. to 7 p.m.)**

ORIGINAL MEDICARE

Medicare Part "A"	Medicare Part "B" You must pay a monthly premium
Inpatient Care in Hospitals Skilled Nursing Facility Nursing Home Care Hospice Home Health Services	Prevented Services Medically Necessary Services Lab Tests Doctors Visits Ambulance
Premium is usually \$0	Premiums Start at \$202.90 Based on Income
You Pay: \$1,736 deductible Hospitalization Days 61-90: \$434 Days 91-150: \$868	\$283 per year deductible Typically pay 20% of Medicare approved amount for most doctor, outpatient therapy and durable medical equipment. NO PRESCRIPTION DRUG COVERAGE

MEDICARE PLANS

Medicare Part “C”	Medicare Part “D”
<p>Medicare Advantage Plans –function much like the District plans offered to active employees. Plans are HMO or PPO plans</p>	<p>Prescription Drug Coverage –stand alone plans that cover the cost of prescription drugs only.</p>
<p>Services include all Medicare Part A and Part B benefits. Hospitalization - Skilled Nursing Services Home Health Services, Hospice Preventive Services Medically Necessary Services, Lab Tests, Doctors Visits and Ambulance Services</p>	<p>If enrolling in a Medicare Supplement Plan you must also enroll in a Medicare Prescription Drug plan.</p> <p>Medicare requires continuous prescription drug coverage. If you do not continue a Medicare approved PDP plan you will be subject to a Late Enrollment Penalty for life.</p>
<p>All District sponsored Medicare Advantage plans include Prescription Drug coverage.</p>	

2026 MEDICARE ADVANTAGE PLANS

(Offering both HMO and PPO Medicare Advantage Plans)

Medicare Healthcare (Medical & Pharmacy) Plans Monthly Rates:

OVER/UNDER 65 & MEDICARE ELIGIBLE			
Humana Medical Plans	Zero Premium HMO*	Passive PPO	Traditional PPO
	\$ 0.00	\$ 478.91	\$ 338.91
UHC Medical Plans*	Differential PPO		Passive PPO
	\$ 267.53		\$ 392.38

NOTE: *At the time of enrollment, a Primary Care Physician (PCP) is required for the Humana Zero Premium HMO plans.

Visit [Medicare Healthcare Plans](#) to learn more.

MEDICARE SUPPLEMENT PLANS

Four UHC Medicare Supplement Plans: A, F, G & N

- ✓ Both plan design and premiums are pending approval by the Centers for Medicare and Medicaid Services (CMS)
- ✓ Freedom of choosing physicians of your choice
- ✓ Plan F will only continue to be offered to anyone who became a Medicare recipient prior to 1/1/2020
- ✓ Rates are based on the applicant's date of birth, place of residence and tobacco usage
- ✓ Supplements Medicare coverage

Note: Please be advised that the Supplemental rates are based on the applicant's date of birth, place of residence and tobacco usage. Rates for the calendar year receive CMS approval in November. To receive your individual rate, please contact UnitedHealthcare directly. Pre-65 Medicare recipients are not eligible for these supplement plans.

Visit [Medicare Supplement Plans](#) to learn more.

MEDICARE PRESCRIPTION DRUG PLANS

UnitedHealthcare (UHC) continues to offer the below Prescription Drug Plans (PDP).

UNITEDHEALTHCARE PHARMACY PLANS (MEDICARE PART D ONLY)		
4-Tier High	4-Tier Low	5-Tier Standard
\$ 351.92	\$ 163.00	\$ 169.81

If you select a Medicare Supplement Plan, the addition of a Prescription Drug Plan will provide coverage for prescriptions.

Participants currently enrolled in a PDP only plan may enroll in any of the School Board sponsored Medicare Group Healthcare plans; this enrollment will result in the automatic termination of your PDP plan.

Visit [Medicare Prescription Drug Plans](#) to learn more.

FLEXIBLE BENEFITS

You are eligible to enroll in any of the following flexible benefits plans, if you maintained at least one active benefit this year. There will be no plan design changes for the 2026 plan year.

- Dental: Delta Dental (DHMO & PPO) and UnitedHealthcare Dental (DHMO & PPO)
- Vision: EyeMed
- Legal: ARAG and MetLife
- Identity Theft Protection: ID Watchdog

Additionally, you must be currently participating in the following benefits, to be eligible to continue or decrease coverage for the 2026 plan year:

- Hospital Indemnity Coverage (HIC): Metropolitan Life Insurance Company (MetLife)
- Voluntary Life: Metropolitan Life Insurance Company (MetLife)
- Accidental Death and Dismemberment (AD&D): Metropolitan Life Insurance Company (MetLife)

Visit [Flexible Benefits](#) for additional information.

CONTACT INFORMATION

For Additional information regarding your benefits, please contact us at:

FBMC Benefits Management **1-855-632-7748**

Cigna Healthcare **1-800-806-3052**

Florida Retirement System (FRS) **1-886-446-9377**

Medicare Group Healthcare Plans

Humana Medicare Plans **1-866-396-8810**

UnitedHealthcare:

Medicare Advantage and PDP **1-888-867-5548**

Medicare Supplement **1-800-523-5800**

CONGRATULATIONS ON YOUR RETIREMENT

Should you have any questions regarding this information or need assistance with your enrollment, you may contact the FBMC Service Center at 855-MDC-PS4U (855-632-7748), Monday – Friday, 7 a.m. to 7 p.m.

