



2025 COBRA Open Enrollment Guide



Benefit Highlights

The following information highlights the comprehensive benefit offerings for the 2025 benefits plan year. Refer to each section of this guide for more details around each benefit.

Benefits Enrollment

Our benefits enrollment platform powered by PlanSource, a third-party site, will take you through a “shopping” experience streamlined with a variety of benefit options.

Medical

Our medical offerings include simplified and curated plan designs to help you elect the plans that are best for you and your family. Our national medical carrier is Aetna, and if you live in California or Hawaii, you also have the option to alternatively select Kaiser for medical coverage.

If you select Aetna as your medical carrier, you can take advantage of the following programs and benefits for 2025:

- Aetna Integrated Health Care
- Aetna Concierge
- CVS Caremark Pharmacy
- Mental Health Benefits
- Infertility and Fertility Benefits
- Travel Benefits
- Hearing Aid Benefits

The details of the medical plans and programs offered by Aetna and Kaiser are described later in the medical section of this guide.

Dental

Our exclusive dental carrier is Aetna. We will offer two plan options: Aetna Dental and Aetna Dental Plus. The details of the dental plans offered by Aetna are described later in the dental section of this guide.

Vision

Our exclusive vision carrier is Aetna. With Aetna Vision, you will have access to a nationwide member-centered network, including the EyeMed network. We will offer two plan options: Aetna Vision and Aetna Vision Plus. Both plans will offer frames, lenses or contact lens coverage every 12 months. The Vision Plus plan has no copay for eye exams and frames.



Aetna Medical and Pharmacy

TriNet provides access to three Aetna medical plan options: a PPO, HDHP and EPO. **Note:** The EPO plan has no out-of-network coverage except in an emergency.

BENEFIT	Aetna PPO		Aetna HDHP		Aetna EPO	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Annual/Calendar Year Deductible (Individual/Family)*	\$750 / \$1,500	\$1,500 / \$3,000	\$2,500 / \$5,000	\$6,000 / \$12,000	\$0 / \$0	N/A
Annual/Calendar Year Out-of-Pocket Maximum (Individual/Family)	\$3,000 / \$6,000	\$8,000 / \$16,000	\$5,000 / \$10,000	\$10,000 / \$20,000	\$2,500 / \$5,000	N/A
Lifetime Maximum	Unlimited except where otherwise indicated.		Unlimited except where otherwise indicated.		Unlimited except where otherwise indicated.	
Coinsurance	20%	40%	10%	30%	100% Covered	N/A
Physician Services						
In-Person Doctor's Office Visit	\$30 copay; deductible waived	40% coinsurance; after deductible	10% coinsurance; after deductible	30% coinsurance; after deductible	\$20 copay	N/A
Telehealth Doctor's Office	\$15 copay; deductible waived	40% coinsurance; after deductible	5% coinsurance; after deductible	30% coinsurance; after deductible	\$10 copay	N/A
In-Person Specialist Office Visit	\$60 copay; deductible waived	40% coinsurance; after deductible	10% coinsurance; after deductible	30% coinsurance; after deductible	\$40 copay	N/A
Telehealth Specialist Office Visit	\$30 copay; deductible waived	40% coinsurance; after deductible	5% coinsurance; after deductible	30% coinsurance; after deductible	\$20 copay	N/A
Preventive Care	Covered 100%	40% coinsurance; after deductible	Covered 100%	30% coinsurance; after deductible	Covered 100%	N/A
Lab & X-ray Services	\$30 copay; deductible waived	40% coinsurance; after deductible	10% coinsurance; after deductible	30% coinsurance; after deductible	100%	N/A
Hospital Services						
Inpatient	20% coinsurance; after deductible	40% coinsurance; after deductible	10% coinsurance; after deductible	30% coinsurance; after deductible	\$250 copay	N/A
Outpatient	20% coinsurance; after deductible	40% coinsurance; after deductible	10% coinsurance; after deductible	30% coinsurance; after deductible	Covered 100%	N/A
Emergency Care	\$400 copay (waived if admitted); deductible waived		10% coinsurance; after deductible		\$400 copay (waived if admitted)	
Urgent Care	\$50 copay; deductible waived	40% coinsurance; after deductible	10% coinsurance; after deductible	30% coinsurance; after deductible	\$50 copay	N/A
Inpatient Maternity Coverage (includes delivery and postpartum care)	20% coinsurance; deductible waived	40% coinsurance; after deductible	10% coinsurance; after deductible	30% coinsurance; after deductible	\$250 copay	N/A
Prenatal Maternity (not including delivery and postpartum)	Covered 100%; deductible waived	40% coinsurance; after deductible	Covered 100%; deductible waived	30% coinsurance; after deductible	Covered 100%	N/A
Infertility and Fertility Benefits	\$25k medical annual maximum / \$10k Rx annual maximum Deductible & coinsurance apply	\$25k medical annual maximum / \$10k Rx annual maximum Deductible & coinsurance apply	\$25k medical annual maximum / \$10k Rx annual maximum Deductible & coinsurance apply	\$25k medical annual maximum / \$10k Rx annual maximum Deductible & coinsurance apply	\$25k medical annual maximum / \$10k Rx annual maximum	N/A
Mental Health Services	Covered 100%; deductible waived	40% coinsurance; after deductible	Covered 100%; after deductible	30% coinsurance; after deductible	Covered 100%	N/A

* Please refer to the SBC for more information on how deductibles work.

Aetna Medical and Pharmacy

TriNet provides access to three Aetna medical plan options: a PPO, HDHP and EPO. **Note:** The EPO plan has no out-of-network coverage except in an emergency.

BENEFIT	Aetna PPO		Aetna HDHP		Aetna EPO	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
PRESCRIPTION DRUGS						
Retail (30-day Supply)						
Preventive Generics		\$0		\$0	\$0	N/A
Non-Preventive Generic/ Preferred Brand		\$10		10% coinsurance; after deductible	\$10	N/A
Non-Preferred Brand		\$30		10% coinsurance; after deductible	\$30	N/A
Specialty		\$50		10% coinsurance; after deductible	\$50	N/A
Mail Order (90-day Supply)						
Preventive Generics		\$0		\$0	\$0	N/A
Non-Preventive Generic/ Preferred Brand		\$20		10% coinsurance; after deductible	\$20	N/A
Non-Preferred Brand		\$60		10% coinsurance; after deductible	\$60	N/A
Specialty (retail only)		\$100		10% coinsurance; after deductible	\$100	N/A

Please note that under the Dispense as Written Policy, if a member, covered dependent or physician requests a brand drug when a generic is available, the member is responsible for the difference in cost between the brand and generic drug plus the applicable copay.

If there is a medical necessity for a member or covered dependent to take a brand medication, the prescribing physician must complete a Brand Penalty Exception Request form on their behalf. Once a Brand Penalty Exception Request is received, it will be reviewed based on the CVS standard medical necessity criteria and guidelines. Both the member and prescribing physician will be notified of the approval or denial of the request.



Aetna Medical and Pharmacy

Aetna Integrated Health Care

If you select Aetna for all of your health benefits, you will have the convenience of one website, one mobile app and one ID card for your medical and vision benefits. All your health providers will have direct connection and information to health claims and pharmacy information. The sharing of information helps to ensure follow-up care and necessary outreach.

Aetna Concierge

With a simple, personalized experience, Aetna concierge connects you to the right programs and resources and makes your lives a little easier. Think of it as a personal health assistant that goes above and beyond. Most questions are resolved on the first call and cover a range of topics such as locating providers, estimating costs, maximizing benefits, real-time claims processing and more. [Click here](#) to learn more.



Mental Health

A Care Advocate takes a 360-degree approach by connecting you with all the specialists, community services and tools you need to achieve your best health or to help you reach your mental health goals. Aetna mental health support services provide you with personalized support to connect you with the right person, whether that person is a psychiatrist, counselor or psychotherapist. The Aetna mental health providers will help you deal with depression, anxiety, eating disorders, bipolar disorders, substance abuse and more, whether you want to discuss in person, on the phone or virtually via telehealth. The Aetna EPO and PPO plans cover in-network mental health services at 100%. The Aetna HDHP covers in-network mental health services at 100%, after the deductible. [Click here](#) to learn more about the comprehensive programs Aetna offers.

Infertility and Egg Freezing and Storage Benefits

The Infertility benefit includes coverage for Advanced Reproductive Technology-based medical procedures including but not limited to In Vitro Fertilization (IVF) as well as medically necessary Egg Freezing and Embryo Cryopreservation and Transfers.

In addition, TriNet covers elective egg freezing and storage for up to 12-months (lifetime maximum).

Travel Benefit

If you elect an Aetna medical plan, TriNet will reimburse up to \$4,000 per occurrence for travel costs to obtain covered services for a range of medical procedures that are not available within a certain range of your residence.

Hearing Aids Benefit

Hearing aids are covered in-network in the amount of \$4,800 every 24 months. Over the counter and prescription hearing aids are eligible for coverage if they are cleared by the FDA and prescribed by a qualified health care provider and medical necessity criteria for hearing aids are met.

Aetna Medical and Pharmacy

CVS Caremark® Pharmacy Benefits Manager (PBM)

Aetna partners with [CVS Caremark](#) to meet your pharmacy needs. Depending on the Aetna medical plan you elect, your prescription will fall into one of four tiers, with preventive generic prescriptions covered at no cost to you. With over 66,000 pharmacies in CVS Caremark's national network, you're sure to find a local pharmacy for you and your family. [Click here](#) to search the CVS Caremark network.

Note: You will receive a dedicated CVS Caremark pharmacy card separate from your Aetna medical card.

Also, with CVS Caremark, you have access to MinuteClinic® located in 35 states and D.C., which offers cost-effective, 7 days-per-week walk-in care, including evenings to provide minor illness and injury exams, certain physical exams, vaccinations and other health services. [Click here](#) to learn more.

[CVS Specialty](#) provides specialized care and support along with your medications for complex conditions such as rheumatoid arthritis, multiple sclerosis, HIV and cancer. And their digital tools make it easy to manage your health whenever—and wherever—you like. You can look for saving opportunities, stay on top of your prescriptions and more.

Access these flyers to learn more about CVS Caremark—your new pharmacy benefits:

- [Meet Our Mobile App](#)
- [Contactless Delivery By Mail](#)
- [Save With Generics](#)



CVS Caremark® Maintenance Choice®

Save with 90-day supplies. [Maintenance Choice](#)* helps keep your medication as affordable as possible. Make the change to 90-day supplies to enjoy these savings.

Help keep your copay low. Start filling the medication you take regularly (like medication for asthma or high blood pressure) in 90-day supplies at select participating pharmacies. Choose the option that works best for you — and change it whenever you like.



* **Oklahoma:** Some Oklahoma residents may not be eligible to participate in the Maintenance Choice program. If you have questions about your eligibility, please contact Customer Care at the number on the back of your member ID card.

CVS Caremark® Savings Advisor

You could be paying less for your Rx with the new [Savings Advisor](#) tool. How it works:

1. You'll get an email from CVS Caremark to alert you when savings are available. *If you currently spend \$15 (or more) for your Rx and have the chance to save \$10 (or more), CVS will let you know.*
2. Click on the link provided. Then sign in to your Caremark.com account to view your list of savings opportunities. *This includes options like starting Rx delivery by mail, switching to a 90-day supply or changing to a lower-cost alternative medication.*
3. Share saving options with your doctor. For help deciding what works best for you. *For savings related to starting Rx delivery by mail, simply click "Add to Cart," and CVS will take care of the rest.**

* Not all clients allow their plan members to request a new prescription on Caremark.com. CVS will only enable this capability for eligible members

Aetna Medical and Pharmacy

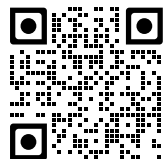


Aetna Health Mobile App

The Aetna Health mobile app is an easy and convenient way to have helpful information at your fingertips, 24/7. When you download the app, you'll be able to:

- Access your ID card whenever you need it
- View your benefits and coverage details specific to your plan
- Track spending and progress toward meeting your deductible
- View and pay claims for you and your family
- Find in-network providers near you and search by location or specialty
- Compare cost estimates for doctor visits and procedures
- Receive personalized reminders to help improve your health

Search for the Aetna Health mobile app in the App Store or Google Play, or simply scan the QR code below (QR code will launch the app from an iPhone or android).



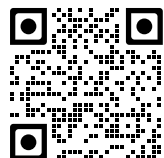
Scan to download the Aetna Health mobile app

You can also text the word Aetna to 90156 to receive a link to download the Aetna Health mobile app.*

* Message and data rates may apply.

Telehealth

Aetna provides access to telemedicine services through **Teladoc**. Download the Teladoc app so you have convenient access when you need it.



Scan to download the Teladoc mobile app

Phone: 855.TELADOC (835.2362)

Teladoc.com

Aetna Medical Provider Search

- Go to the Aetna website [Aetna.com](https://www.aetna.com)
- Select “Find a doctor”
- Select “Plan from an employer”
- Enter your ZIP code and select your search radius, then click “Search”
- Under Select a Plan, scroll down to Aetna Open Access Plans, then choose one of the following networks
 - For the PPO and HDHP, select “Aetna Choice® POS II (Open Access)”
 - For the EPO, select “Aetna Select® (Open Access)”
- Select provider specialty



Kaiser Medical and Pharmacy

TriNet provides access to an HMO plan in three regions: Northern California, Southern California and Hawaii.

BENEFIT	Northern California	Southern California	Hawaii
	Kaiser HMO	Kaiser HMO	Kaiser HMO
Plan Deductible (Individual / Family)	None	None	None
Drug Deductible	None	None	None
Out-of-Pocket Maximum (Individual/Family)	\$1,500/\$3,000	\$1,500/\$3,000	\$2,500/\$7,500
Physician Services			
Primary Care	\$20	\$20	\$15
Specialist	\$35	\$35	\$15
Well-Child Preventive Care Visits (18 Months and Younger)	No charge	No charge	No charge
Scheduled Prenatal Care and First Postpartum Visit	No charge	No charge	No charge
X-rays and Lab Tests	No charge	No charge	10% coinsurance
Hospital Services			
Services Rendered While Hospitalized	\$250 per admit	\$250 per admit	\$75/day
Urgent Care	\$20	\$20	\$15
Outpatient Surgery	\$35	\$35	\$15
Emergency Department Visits	\$100	\$100	\$75
Ambulance Services	\$50 per trip	\$50 per trip	20% coinsurance per trip
Outpatient Prescription Drugs			
Pharmacy	\$10 gen / \$35 brand / 20% specialty (up to \$150 max)	\$10 gen / \$35 brand / 20% specialty (up to \$150 max)	\$10 gen / \$35 brand / \$200 specialty
Mail Order	\$20 gen / \$70 brand	\$20 gen / \$70 brand	\$20 gen / \$70 brand
Day Supply	30 retail / 100 mail	30 retail / 100 mail	30 retail / 90 mail
Mental Health Services / Chemical Dependency			
Inpatient Psychiatric Care	\$250 per admit	\$250 per admit	\$75 per day
Outpatient Individual Therapy Visits	\$20	\$20	\$15
Outpatient Group Therapy Visits	\$5	\$5	\$15
Infertility Services			
Covered Services Related to the Diagnosis and Treatment of Infertility	50% coinsurance	50% coinsurance	20% coinsurance
Additional Benefits			
Durable Medical Equipment	20% coinsurance	20% coinsurance	20% coinsurance
Home and Hospice Care	No charge	No charge	No charge
Chiropractic Services	\$15 per visit (up to 20 visits per year)	\$15 per visit (up to 20 visits per year)	\$15 per visit (up to 20 visits per year)

Kaiser Medical and Pharmacy

When you enroll in Kaiser, you receive integrated health coverage and care delivery resulting in a coordinated experience.

Mental Health and Wellness Resources

Your mind and body are connected. You deserve care that supports your total health — mind, body, and spirit. If you need help with depression, anxiety, addiction and recovery, or other mental or emotional issues that interfere with your daily life, Kaiser is here to help. Get quick access to resources such as:

- [Mental health services](#)
- [Learn about mental health care](#)
- [Take the depression self-assessment](#)
- [Self-care apps](#)
- [Youth mental health](#)

Telehealth

Visit kp.org and sign up for Virtual Visits. When you download The Kaiser Health mobile app, you can get your regional contact phone number, and then you'll be all set to virtually meet with your doctor.

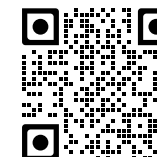


Kaiser Permanente Health Mobile App

Kaiser's mobile app is an easy and convenient way to have helpful information at your fingertips, 24/7. When you download the app, you'll be able to:

- Access your ID card whenever you need it
- View your benefits and coverage details specific to your plan
- Track spending and progress toward meeting your deductible
- Find in-network providers near you and search by location or specialty
- Compare cost estimates for doctor visits and procedures
- Receive personalized reminders to help improve your health
- Check most lab results
- Refill most prescriptions
- Email your doctor's office with nonurgent questions
- Schedule or cancel routine appointments

Download the Kaiser Permanente mobile app in the App Store or Google Play, or simply scan the QR code below (QR code will launch the app from an iPhone or android).



Scan to download the Kaiser Permanente Health mobile app

Kaiser Medical Provider Search

- Northern California Provider Search: [Click here](#)
- Southern California Provider Search: [Click here](#)
- Hawaii Provider Search: [Click here](#)

Understanding Your Plan Options

	EPO (Exclusive Provider Organization)	HDHP (High-Deductible Health Plan)	PPO (Preferred Provider Organization)	HMO (Health Maintenance Organization)
Amount You Pay Per Pay Period for Coverage	Higher	Lower	Generally higher	Lower
How You Pay for Health Care Services	Copay after deductible, up to out-of-pocket maximum	Coinsurance after deductible, up to out-of-pocket maximum	Generally copay or coinsurance after deductible, up to out-of-pocket maximum	Generally copay or coinsurance after deductible, up to out-of-pocket maximum
Network Size	Smaller	Larger	Larger	Smaller
Availability of Out-of-Network Coverage	Only in emergencies	Available, but more costly than in-network care	Available, but more costly than in-network care	Only in emergencies
Selecting a Primary Care Physician	Not required	Not required	Not required	Required or recommended, depending on the plan
Referrals	Not required	Not required	Not required	Required
Available Health Care Spending Accounts	FSA	HSA and limited purpose FSA	FSA	FSA
Carriers (based on geographic region)	Aetna	Aetna	Aetna	Kaiser (CA and HI only)
Why this Type of Plan Might Be a Good Fit	<ul style="list-style-type: none"> • Low out-of-pocket maximum is more important to you than flexibility • Your providers are within the EPO network already 	<ul style="list-style-type: none"> • You would prefer to pay lower rates each pay period and more when you receive care • You want the flexibility to use out-of-network providers 	<ul style="list-style-type: none"> • You want the flexibility to use out-of-network providers 	<ul style="list-style-type: none"> • Low cost is more important to you than flexibility • Your providers are within the HMO network already



See the following page for Aetna Plan Comparison Hypotheticals.

Aetna Dental

TriNet offers access to dental coverage through Aetna with two options available.

Dental Benefits

BENEFIT	Aetna Dental	
	IN-NETWORK	OUT-OF-NETWORK
Annual/Calendar Year Benefit Maximum	\$1,000	\$1,000
Annual/Calendar Year Deductible (Individual/Family)	\$100/\$300	\$150/\$450
Preventive Services	100% Covered	100% Covered
Basic Services	70% Covered	50% Covered
Major Services	50% Covered	50% Covered
Orthodontia Lifetime Maximum	Not Covered	Not Covered

BENEFIT	Aetna Dental Plus	
	IN-NETWORK	OUT-OF-NETWORK
Annual/Calendar Year Benefit Maximum	\$2,000	\$2,000
Annual/Calendar Year Deductible (Individual/Family)	\$50/\$150	\$100/\$300
Preventive Services	100% Covered	100% Covered
Basic Services	90% Covered	80% Covered
Major Services	60% Covered	50% Covered
Orthodontia Lifetime Maximum (Adult and Child)	\$3,500	\$3,500
Orthodontia Coinsurance (Adult and Child)	50%	50%
Orthodontia Deductible (Adult and Child)	\$50	\$50

Aetna Dental Provider Search

- Go to the Aetna website [Aetna.com](https://www.aetna.com)
- Select “Find a doctor”
- Select “Plan from an employer”
- Enter your ZIP code and select your search radius, then click “Search”
- Under Select a Plan, scroll down to Dental PPO/PDN with PPO II and Extend Network
- Select “Dental PPO/PDN with PPO II and ExtendSM”
- Select provider specialty



Aetna Vision

TriNet offers access to vision coverage through Aetna with two options available.

Vision Benefits

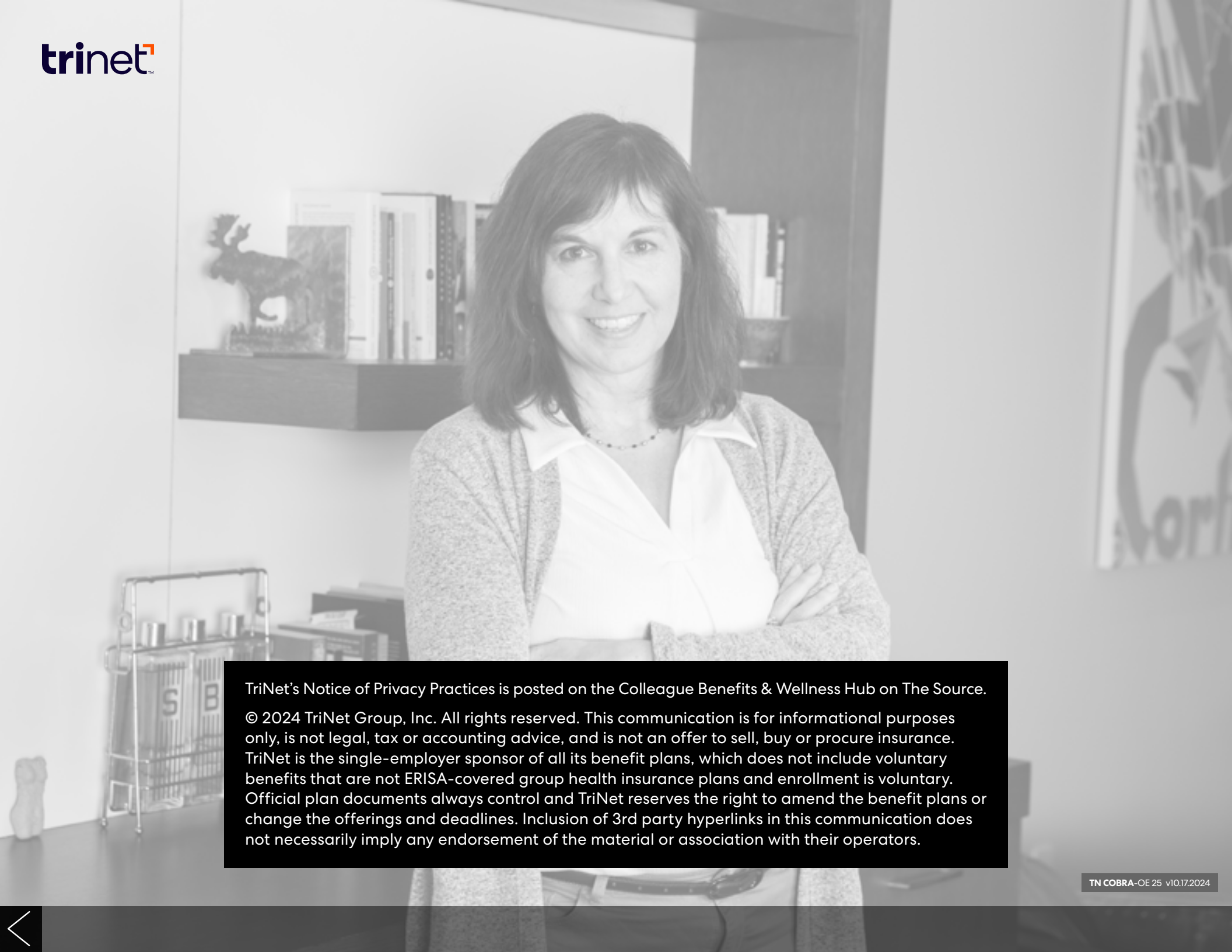
BENEFIT	Aetna Vision	
Benefit Frequency (Exam/Lens/Frames)	12/12/12	
	IN-NETWORK	OUT-OF-NETWORK
Exam	\$10 copay	\$45 Reimbursement
Lenses	\$25 copay	\$45 Reimbursement
Frames	\$0 copay, \$130 allowance and 20% discount over allowance	\$47 Reimbursement
Contact Lenses Instead of Glasses		
Conventional/Disposable	\$0 copay, \$130 allowance and 15% discount over allowance	\$105 Reimbursement
Medically Necessary	Covered 100%	\$150 Reimbursement

BENEFIT	Aetna Vision Plus	
Benefit Frequency (Exam/Lens/Frames)	12/12/12	
	IN-NETWORK	OUT-OF-NETWORK
Exam	\$0 copay	\$50 Reimbursement
Lenses	\$20 copay	\$50 Reimbursement
Frames	\$0 copay, \$150 allowance and 20% discount over allowance	\$75 Reimbursement
Contact Lenses Instead of Glasses		
Conventional/Disposable	\$0 copay, \$200 allowance and 15% discount over allowance	\$200 Reimbursement
Medically Necessary	Covered 100%	\$210 Reimbursement

Aetna Vision Provider Search

- Go to the Aetna website Aetna.com
- Select “Find a doctor”
- Select “Plan from an employer”
- Enter your ZIP code and select your search radius, then click “Search”
- Under Select a Plan, scroll down to Vision
- Select “Aetna VisionSM Preferred”



A grayscale photograph of a woman with shoulder-length dark hair, smiling and standing with her arms crossed in an office setting. In the background, there is a bookshelf with books and a decorative moose figurine, and a desk with a metal tray holding pens and a small white object.

TriNet's Notice of Privacy Practices is posted on the Colleague Benefits & Wellness Hub on The Source.

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