Your Choice MANATEE HEALTH PLAN PLAN INFO PACKET

New Plan Names, Same Amazing Coverage!

What's New

- A new, streamlined structure in the Medical Plan allows you to choose what's best for your family's needs — ***It really is your choice!*** Select either the Standard Plan or the Premium Plan and that choice will apply to you and everyone on the plan... No more individual Aetna ID cards for members in your family! Everyone will be listed as a dependent under your (employee) insurance ID number for all of your Aetna plans.
- The Ultimate Plan is now called the **Premium Plan**. The Best Plan is now called the **Standard Plan**.
- The Premium Plan will have a 1% rate increase (compared to 2025). The Standard Plan has a rate decrease.
- There is no longer any cotinine (nicotine) testing to qualify for the Premium Plan.

Plan Coverage Comparison

Medical Service	Standard Plan	Premium Plan
Deductible	• In Network - Individual: $250 • In Network - Family: $500 • Out of Network - Individual: $750 • Out of Network - Family: $1,500	• In Network - Individual: $0 • In Network - Family: $0 • Out of Network - Individual: $500 • Out of Network - Family: $1,000
Out of Pocket Limit (includes copays, inpatient hospital, mental health/substance abuse, and prescriptions)	• In Network - Individual: $3,600 • In Network - Family: $7,200 • Out of Network - Individual: $10,000 • Out of Network - Family: $20,000	• In Network - Individual: $2,800 • In Network - Family: $5,600 • Out of Network - Individual: $5,600 • Out of Network - Family: $11,200
Primary Care Provider Office Visit	• In Network $30 Copay • Preventative Care/Screening $0 (Deductible does not apply)	• In Network $30 Copay • Preventative Care/Screening $0
Health Care Specialist Office Visit	• In Network $30 Copay (Deductible does not apply)	• In Network $30 Copay
Diagnostic Test (X-Ray, Blood Work)	• In Network Deductible plus 20% Coinsurance	• In Network $0
Imaging (CT/PET Scan, MRI)	• In Network Deductible plus 20% Coinsurance	• In Network $0
Outpatient Surgery Facility Fees	• In Network Deductible plus 20% Coinsurance	• In Network $0
Physician/Surgeon Fees	• In Network Deductible plus 20% Coinsurance	• In Network $0
Emergency Room	• In Network $200 Copay per visit plus Deductible plus 20% Coinsurance	• In Network $150 Copay
Emergency Medical Transport	• In Network Deductible plus 20% Coinsurance	• In Network $0
Urgent Care	• In Network Deductible plus 20% Coinsurance	• In Network $30 Copay
Hospital Stay Facility Fee	• In Network $250 Copay per stay plus Deductible plus 20% Coinsurance	• In Network $0
Hospital Stay Physician/Surgeon Fees	• In Network Deductible plus 20% Coinsurance	• In Network $0
Pregnancy Office Visits	• In Network Deductible plus 20% Coinsurance	• In Network $100 Copay per pregnancy
Childbirth/Delivery Professional Services	• In Network Deductible plus 20% Coinsurance	• In Network $100 Copay per pregnancy
Childbirth/Delivery Facility Services	• In Network $200 Copay per visit plus Deductible plus 20% Coinsurance	• In Network $100 Copay per pregnancy

Medical Premiums

Medical Plan Tier	Standard Plan		Premium Plan	
	Employee Per Pay	Employer Per Pay	Employee Per Pay	Employer Per Pay
Employee Only	$36.30	$365.86	$46.61	$365.86
Employee Plus Spouse	$154.51	$668.67	$175.61	$668.67
Employee Plus Children	$132.43	$573.15	$150.52	$573.15
Employee Plus Family	$183.30	$977.16	$213.05	$977.16

Dental Premiums*

Tier	Employee Per Pay
Employee Only	$17.00
Employee Plus One	$27.50
Employee Plus Two or More	$37.50

**Does not apply to employees of the Manatee County Clerk's office*

Vision Premiums

Tier	Employee Per Pay
Employee Only	$2.46
Employee Plus Spouse	$4.68
Employee Plus Children	$4.92
Employee Plus Family	$7.24

2026 Plan Year Annual Enrollment

Annual enrollment is your opportunity each year to make changes to your insurance coverage without experiencing a qualifying life event. Employees can make changes to beneficiaries at any time throughout the year. All benefits elections/changes made during the Annual Enrollment period will take effect on January 1, 2026.

This year's enrollment is **active**, meaning you must make your benefit elections to continue coverage into 2026. **Failure to act will result in the cancellation of your benefits.** Don't risk losing your coverage — Annual Enrollment opens on October 13, 2025 and closes promptly at 11:00 pm Eastern Standard Time on November 14, 2025.

Scan the QR Code for a full overview of our benefits or visit: manateeyourchoice.com

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