

NALC Health Benefit Plan is best fit for letter carriers and their families

We just keep getting better by pushing the envelope.

That's how the NALC Health Benefit Plan works to keep letter carriers and their families healthy—each year, the Plan seeks to make changes that keep up with the latest medical advances and keep your costs low.

We've been pushing the envelope since the Plan was created, by letter carriers, for letter carriers, in 1950. Since then, the Plan has never stopped providing the high level of service you expect from a plan that works not for a profit, but for its members. The Health Plan's director, Brian Hellman, is a member of New York City Branch 36

A special insert about the Health Benefit Plan can be found in this issue of *The Postal Record*.

and has been a letter carrier since 1982, and he assures that the Health Benefit Plan keeps your health at the top of its list of priorities.

Open Season for choosing a health plan through the Federal Employee Health Benefits (FEHB) Program is Nov. 14 through Dec. 12. Whether you are starting your career, have a few years of carrying the mail under your belt, or have retired, please take a few minutes to look at the special NALC Health Benefit Plan insert in this issue of *The Postal Record*.

"Our health care plan never stops looking for better ways to provide the best care at a great price," NALC President Fredric Rolando said. "Medicine is advancing and so are we."

The Plan offers a comprehensive High Option health benefit package, a fee-for-service plan with a preferred provider (PPO) network that offers generous benefits with low out-of-pocket costs. In partnership with Cigna, the Plan is able to offer access to nearly 2.5 million doctors and specialists and thousands of medical facilities. Chances are your doctor already is part of the network, but to make sure, call the Plan at 877-220-NALC (6252).

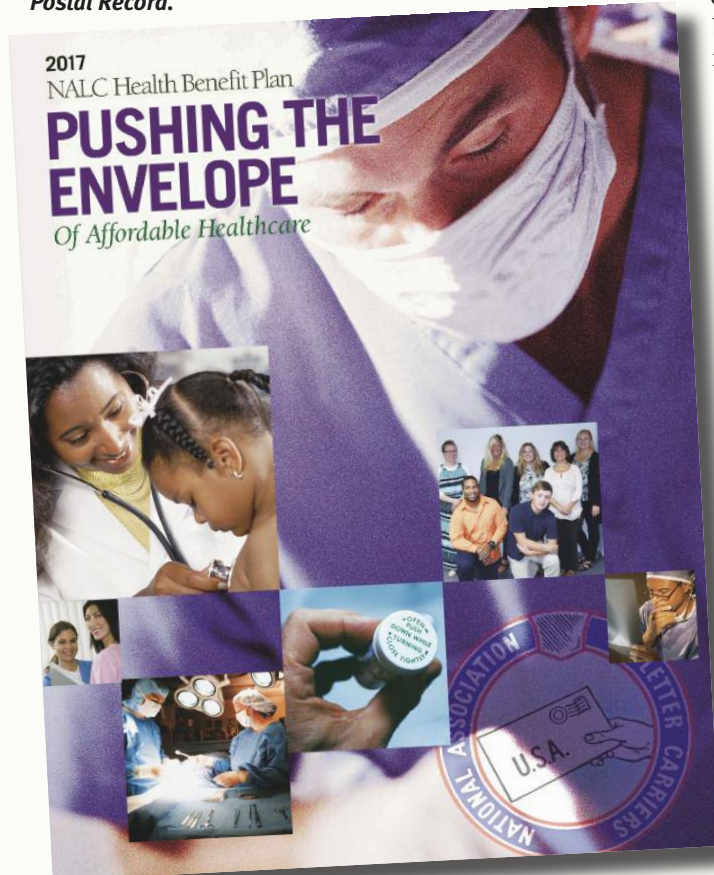
The High Option Plan pays for a wide variety of preventive care

treatments and tests for adults and children at 100 percent when you use a PPO provider. You pay only a \$20 co-payment for each primary care or specialist office visit when the services are rendered by a PPO provider. The calendar-year deductible for the High Option Plan is \$300 per person and \$600 per family.

Prescription medication is also covered under the High Option Plan at reasonable rates. For generics bought from a network retail pharmacy, you pay just 20 percent of the cost; when ordering by mail, you pay \$8 for up to a 60-day supply or between \$5 and \$12 for a 90-day supply. You pay just 30 percent for formulary brand drugs at a retail network pharmacy, \$43 for up to a 60-day supply by mail and \$65 for up to a 90-day supply by mail. Non-formulary and specialty drugs have different rates; see the Plan brochure for more information.

If Medicare is your primary payor, the High Option Plan also offers great benefits. Signing up for the NALC Health Benefit Plan in addition to your Medicare Parts A and B coverage is a good way to assure that you won't be surprised by unexpected costs. The Plan pays for most out-of-pocket medical costs that Medicare doesn't—deductibles, co-payments and co-insurance charges—for doctor visits, procedures and hospitalization. It also gives Medicare recipients access to lower out-of-pocket costs for prescription drugs.

With the Health Benefit Plan, you also get access to a wealth of programs to help you maintain or improve your health outside the doctor's office. They include the Health Assessment, an online tool that analyzes your health-related responses and gives you a personalized plan to achieve your specific health goals; the Quit for Life smoking cessation program; the Weight Talk weight-loss coaching program; Your Health First disease management program, with personalized medical care programs for people



with chronic illnesses; and the Healthy Rewards discount program for savings of up to 60 percent on vision and hearing care, fitness clubs and other benefits.

The Consumer Driven Health Plan (CDHP) and the Value Option Plan are alternatives to the High Option Plan.

Carriers who choose the CDHP or the Value Option Plan are provided a personal care account (PCA). A PCA allows the member to control medical costs while enjoying the protection of an affordable health plan that will cover major medical costs if they arise. The Health Benefit Plan adds money to each enrollee's PCA each year to pay for medical costs, including medication, and uses the same PPO network as the High Option Plan.

For instance, if you go to an in-network doctor who charges \$50 for the visit, the doctor will submit your claim to the Plan and \$50 will be deducted from your PCA. You pay nothing. If there is money left over in a PCA at the end of the year, it is carried over to the next year (subject to certain limitations).

On the other hand, if you use all of the funds in a PCA, further medical expenses are covered just as they are under a traditional insurance plan, including a deductible that you pay out of your pocket. The maximum annual amount you pay out of pocket (when you use In-Network providers), including deductibles, co-payments, etc., is \$6,600 for Self Only enrollment and \$13,200 for Self and Family. Some costs are excluded from these limits.

The annual amount added to a CDHP PCA is \$1,200 for Self Only enrollment or \$2,400 for Self Plus One or Self and Family enrollment. For the Value Option, the PCA amount is \$100 for Self Only and \$200 for Self Plus One or Self and Family.

Both the CDHP and the Value Option Plan include a wide range of benefits, including 100 percent coverage of preventive care when rendered by a PPO

provider. They also use the same PPO network—Cigna HealthCare's Cigna Open Access Plus PPO—as the High Option Plan, and both provide access to in-network pharmacies through the prescription benefit manager CVS/caremark.

These great benefits come at reasonable rates. In 2017, the active letter carrier's share of the High Option premium will be \$65.09 biweekly for Self Only, \$149.76 for Self Plus One and \$139.35 biweekly for Self and Family. For retired carriers, the rates are \$167.70 per month for Self Only, \$381.74 for Self Plus One

and \$363.76 per month for Self and Family. Different rates and benefits apply to the Value Option Plan and CDHP and to other types of employees; see the Plan's official brochure for details.

Comparing the Plan's benefits to other plans is simple. Just go to opm.gov/healthcare-insurance/healthcare/plan-information.

Active letter carriers have four ways to enroll in the NALC Health Benefit Plan during Open Season:

- Go to liteblue.usps.gov. You must have your employee ID number





The official 2017 HBP brochure (RI 71-009) is available at nalchbp.org.

(it's the eight-digit number printed on your earnings statement just above the words "employee ID"). You will also need your USPS PIN (it's the same one you use to access PostalEASE).

- The Blue Page (Intranet) at work.
- Employee Self-Service Kiosks located at some USPS facilities.
- PostalEASE by telephone. Call 877-4PS-EASE (877-477-3273) and enter Option 1.
- Annuitants and retirees can enroll by calling Employee Express at 800-332-9798, by going to OPM's Open Season website at retireefebh.opm.gov if you are a retiree, or by submitting a Standard 2809 to your retirement office.

If you submit your change by mail, the address is: OPM, Open Season Processing Center, P.O. Box 5000, Lawrence, KS 66046-0500.

The information in this article is just a summary of some of the features of the NALC Health Benefit Plan. Detailed information on the NALC Health Benefit Plan can be found in the official 2017 brochure (RI 71-009) at nalchbp.org. All benefits are subject to the definitions, limitations and exclusions set forth in the official brochure.

"This Open Season is your chance to check out the many benefits of the NALC Health Benefit Plan," President Rolando said. "I think you'll agree that it's the best plan for you and your family." **PR**



Advanced Formal A and Beyond Training

NALC Vice President Lew Drass (l) led a session of the Advanced Formal A and Beyond training Oct. 16-21 at the Maritime Institute near Baltimore. The training helps experienced activists sharpen their skills to process grievances at Formal Step A more effectively. For more on the training session and applying for future sessions, see Drass' column on page 29.

