APWU HEALTH PLAN

AVAILABLE TO ALL POSTAL SUPPORT EMPLOYEES WITH ONE YEAR OF SERVICE



CONSUMER DRIVEN OPTION 2022 PREMIUMS

474	476	475
SELF ONLY	SELF PLUS ONE	SELF AND FAMILY
BIWEEKLY	BIWEEKLY	BIWEEKLY
$69.65	$151.38	$165.14

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(800) 222-2798 | www.apwuhp.com

United Healthcare

The Consumer Driven Option is administered by UnitedHealthcare.

Contact us about the Consumer Driven Option
(800) 718-1299 | www.welcometouhc.com/apwu

CONSUMER DRIVEN OPTION

Consumer Driven Option 2022 benefits	In-network you pay
Preventive care	
Well-child care, immunizations, well-woman care, adult routine exams, preventive screenings	$0 — No PCA used Receive a $25 wellness incentive when a covered member completes an annual physical exam.
Medical visits	
Office, virtual and specialist visits	15% of plan allowance (Plan allowance: The maximum amount a plan will pay for a covered health care service)
Maternity	
Complete maternity care, including prenatal, delivery, post-natal and initial exam of newborn covered under family enrollment	$0 — No PCA used
Hospital/facility care	
Diagnostic tests or imaging Outpatient surgery Inpatient Cancer Centers of Excellence	15% of plan allowance 15% of plan allowance 15% of plan allowance 10% of plan allowance
Emergency care	
Accidental injury (within 24 hours) Urgent care Emergency room Ambulance	15% of plan allowance 15% of plan allowance 15% of plan allowance 15% of plan allowance
Hearing services	
Diagnostic hearing tests Hearing aids	15% every 2 years All charges in excess of $1,500 (every 3 years, no deductible applied)
Mental health/substance use	
Office visit Virtual visit Outpatient treatment Diagnostics, inpatient and outpatient service	15% 15% 15% 15%

Overall plan features			
Personal Care Account			
In January, the Health Plan funds a PCA members can use for covered medical services. Members are covered 100% until the PCA is exhausted.			**PCA rollover** As long as you remain in this plan, any unused balance in your PCA at the end of the calendar year may be rolled over to subsequent years. The maximum amount allowed in your PCA balance in any given year is $5,000 Self Only and $10,000 Self Plus One and Self and Family.
Self Only	$1,200		
Self Plus One	$2,400		
Self and Family	$2,400		
Net deductible			
	In-network	**Out-of-network**	**Coinsurance** Once the deductible is met, you pay coinsurance for in- or out-of-network services and prescription drugs. A deductible is the amount the member pays before carrier begins to pay.
Self Only	$1,000	$1,500	
Self Plus One	$2,000	$3,000	
Self and Family	$2,000	$3,000	
Out-of-pocket maximum			
Both medical and prescription drugs	**In-network**	**Out-of-network**	Because the unexpected happens, the plan has a built-in out-of-pocket maximum which, when reached, allows the rest of your annual health care costs to be paid at 100% (both medical and prescription drugs and PCA). PCA and net deductible expenses are included in accumulation of out-of-pocket expenses.
Self Only	$6,500	$13,000	
Self Plus One / Self and Family	$12,000	$24,000	

A Personal Care Account is an easy way to reduce your expenses.

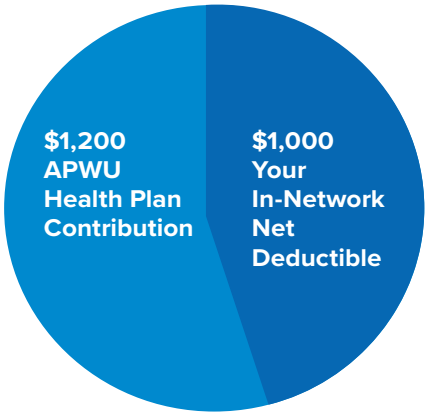
The Consumer Driven Option features a PCA that covers your health care expenses. In January, the plan funds your PCA at $1,200 per year for Self Only enrollment or $2,400 per year for Self Plus One or Self and Family enrollment. The Personal Care Account (PCA) helps cover your health care expenses, lowering any deductible you may have to pay.

Roll over unused funds in your PCA.

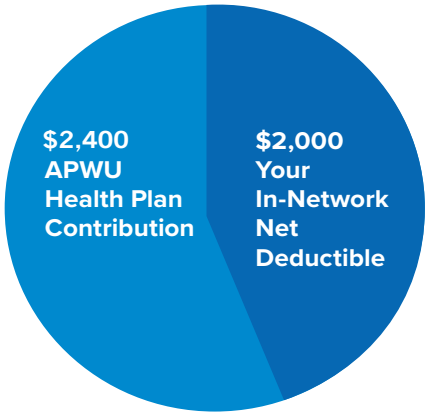
If you have money in your PCA at the end of the year, you can roll over the balance (up to the maximum allowed amount) to the next year, as long as you stay enrolled in this plan.

The Consumer Driven Option provides a flexible alternative to conventional health plans. The Personal Care Account (PCA) helps cover your health care expenses, lowering any deductible you may have to pay.

Self Only
$2,200 Plan Deductible



Self Plus One or Family
$4,400 Plan Deductible



How your PCA works

1. Your full PCA balance is available in January. Use your PCA for any eligible expenses.
2. If you use up your PCA funds, you need to satisfy your annual net deductible.
3. After you satisfy the annual plan deductible, you pay coinsurance—a percentage of the cost of covered health care—and the plan pays the rest.
4. If you reach the out-of-pocket maximum, the plan pays 100% of your covered health care costs for the rest of the year.

THE PATH TO LOWER PREMIUMS FOR POSTAL SUPPORT EMPLOYEES

From the USPS plan to the APWU Health Plan's Consumer Driven Option and Career Employee Rate



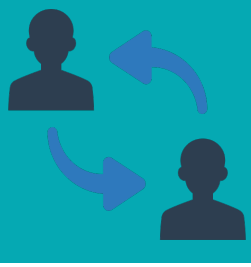
A PSE GETS HIRED

When hired, a PSE is only eligible for the USPS plan administered by CareFirst/BCBS. The USPS plan is for non-career employees. This plan is not the APWU Health Plan's Consumer Driven Option and is not a part of the FEHB Program.



ONE YEAR AS A PSE

When a PSE completes one year of service, they become eligible for the APWU Health Plan's Consumer Driven Option. PSE's are also eligible for other health plans in the FEHB Program but must pay the total amount of the premium cost for those other plans. With the Consumer Driven Option, the USPS is paying 75% of the premium.



CONVERTING TO CAREER

When a PSE converts to career status, after being enrolled in the FEHB Program for one year, the premium will drop to the APWU special rate where the USPS pays 95%. Time enrolled as a PSE in the APWU Health Plan CDHP will count toward the one year requirement when you are converted to career.

READY TO ENROLL?

As a Postal Support Employee, you can enroll in the APWU Consumer Driven Option Plan and the United States Postal Service pays 75% of the premium. With other plans, you would be responsible for paying 100% of the premium.

How to Enroll:

Fax your forms to 202-268-0359 or mail to:

Shared Services Benefits and Compensation
P.O. Box 970400
Greensboro, NC 27497-0400

Visit apwuhp.com and click on the "Enroll" tab. Under the "How to Enroll" section, select the Postal Support Employee link for details and downloadable forms.

You can also call HR Shared Services Center (HRSSC) at (877) 477-3273 (Option 5) and request a copy of the forms.

ENROLLMENT CODES

Self Only 474
Self Plus One 476
Self and Family 475

TWO OPPORTUNITIES TO ENROLL

1. Enroll within 60 days of completing your 360-day initial appointment
2. Enroll during Open Season after completing your 360-day initial appointment

www.apwuhp.com/enroll/how-to-enroll/postal-support-employees/

This is a summary of benefits and features offered by the APWU Health Plan. All benefits are subject to the definitions, limitations, and exclusions set forth in the Plan's Brochure (RI 71-004)