APWU HEALTH PLAN

Together. Better health.

apwuhp.com

How APWU Health Plan works with Medicare



Get more.

All eligible postal and federal retirees can enroll.

Enroll in a plan that offers 100% coverage for your medical bills.

Make the most of your Medicare benefits.

Whether you're getting ready to retire or are already retired, you can turn to APWU Health Plan for answers to your questions about Medicare. We've been serving federal and postal employees and retirees since 1960.

Enroll in a Medicare Advantage plan for High Option members covered by Medicare Parts A and B.

The UnitedHealthcare® Medicare Advantage (PPO) for APWU Health Plan enhances your Federal Employees Health Benefits (FEHB) Program coverage by reducing or eliminating cost-sharing for services. Get a collection of benefits you won't find anywhere else:

- No copays for covered medical services
- An $85 monthly Part B premium subsidy
- $60 quarterly over-the-counter item allowance
- $1,500 hearing aid allowance
- Dental coverage
- Prescription drug coverage (Part D)
- Nationwide provider network
- One plan with no need to coordinate primary and secondary payers

Find out if you're eligible to enroll in the Medicare Advantage plan:

Call **855-383-8793**
711 (TTY)
8 a.m. – 8 p.m. CT
Monday – Friday

When to sign up for Medicare.

You can enroll in Medicare during specific times. The first time is the Initial Enrollment Period, which starts three months before the month you turn 65 and ends three months after the month you turn 65. After you enroll, you can change your coverage each year during Open Enrollment, October 15 to December 7. To find out about other times you may be able to enroll or make a change, visit **medicare.gov.**

To apply for Medicare, locate your local Social Security Administration office at **ssa.gov** or call **800-772-1213 (TTY: 800-325-0778).**



Get to know the parts of Medicare.

Medicare is a federal insurance program for people 65 and older. It's made up of four parts that help pay for different kinds of services.

Part A: Hospital insurance

Covers mostly inpatient care

- Hospitalization
- Some costs for a skilled nursing facility or home healthcare
- Hospice

Costs

When you sign up for Medicare, you're automatically enrolled in Part A. Most federal employees and retirees pay no premiums for Part A.

Part B: Medical insurance

Covers most outpatient care

- Preventive services
- Doctor visits
- Screenings
- Outpatient hospital
- Clinical research
- Ambulance
- Medical equipment
- Mental health
- Getting a second opinion before surgery
- Home healthcare not covered by Part A

Costs

Your premium is deducted from your Social Security check each month, and you must meet a deductible. You'll also need to pay a percentage for most doctor services, usually 20%.

For many retirees, Part B is a critical component of an overall health package. If you don't sign up for Part B when you're first eligible, you may be penalized by paying a much higher monthly premium.

Part C: Medicare Advantage

These Medicare-approved private health plans have contracts with Medicare. Usually, you must use certain providers.

Covers

- All of the same things as Part A and Part B
- May include prescription coverage and coverage for vision, hearing and dental

Costs

Vary by plan.

APWU Health Plan offers the UnitedHealthcare Medicare Advantage (PPO) for APWU Health Plan. Visit apwuhp.com for details.

Part D: Prescription drug coverage

You must join a Medicare-approved plan.

Covers

- Prescription drugs

Costs

You will pay a monthly premium and must meet a deductible. You'll also need to pay either a set amount per prescription (copayment) or a percentage of the cost (coinsurance).

APWU Health Plan prescription drug coverage is the same or even better than that of Medicare Part D, so you don't need to enroll in Part D.

How APWU Health Plan works with Medicare.

If you or your spouse are employed and have an APWU Health Plan, **APWU Health Plan is your primary health plan** and Medicare is secondary. If both you and your spouse are retired, **Medicare is your primary coverage** and APWU Health Plan is secondary.

Part A

In general, members with Part A as their primary insurance do not need to pre-certify hospital stays. However, a stay must be pre-certified prior to the 90th day of confinement in a benefit period.

Part B

Medicare pays first, and the Plan pays second. Generally, with the **High Option,** most of your medical expenses are covered 100% because your deductible and coinsurance are waived for covered services. With the **Consumer Driven Option,** deductibles and coinsurance are not waived.

Medicare participating doctors and suppliers: Medicare usually pays 80% for covered services after you satisfy the Part B annual deductible. As long as services represent a covered benefit, the **APWU Health Plan High Option** pays the Part B deductible and the 20% coinsurance, which means you're covered 100%. With the **Consumer Driven Option,** if you have benefit dollars in your PCA, the Medicare deductible and coinsurance will be paid.

Part D

You do not need to enroll in Part D. If you do enroll, present both prescription drug ID cards when filling a prescription at a network retail pharmacy. If you use a mail-order pharmacy through your Medicare prescription drug plan, submit a claim to APWU Health Plan with a copy of your Medicare Explanation of Benefits and your pharmacy receipt.

The High Option offers 100% coverage for your medical bills.

When you enroll in both Medicare Part A and Part B, our High Option plan can help maximize your healthcare coverage and get your medical bills paid 100%.

As a member of the High Option plan, you can rely on:

- Comprehensive coverage with low copays
- A nationwide UnitedHealthcare network of 1.7+ million providers (as of July 2023)
- No referrals needed
- Personal service from people who care

You're eligible for Medicare if you are a U.S. citizen or legal resident who has lived in the country for at least five consecutive years. Medicare is for those age 65 and older, though people of any age with a qualifying disability or medical condition may be eligible to enroll.

2024 benefits	High Option	With Part A & Part B	UnitedHealthcare Medicare Advantage (PPO) for APWU Health Plan High Option members
Medical visits	**In-network you pay**	**In-network you pay**	**In-network you pay**
Office and specialist visits	$25 copay	$0	$0
24/7 Virtual Visits with Teladoc®	$10 copay	$0	$0
Preventive care			
Annual adult routine exams, adult immunizations and preventive screenings	$0	$0	$0
Dental care			
Routine dental	30% of plan allowance	30% of plan allowance	$0 for preventive care $50 yearly deductible $1,000 max for non-routine per year
Diabetes care			
Generic oral medication, formulary blood glucose test strips and lancets (used to reduce blood sugar)	$0 through mail-order	$0 through mail-order	$0
Hospital/facility care			
Diagnostic tests or imaging	15% ($0 for covered blood work performed at LabCorp and Quest Diagnostics)	$0	$0
Outpatient surgery	15%	$0	$0
Inpatient	15%	$0	$0
Surgical	15%	$0	$0
Cancer Centers of Excellence	5%	$0	$0
Emergency care			
Accidental injury (within 72 hours)	$0	$0	$0
Urgent care	$30 copay	$0	$0
Emergency room	15%	$0	$0
Ambulance	15%	$0	$0
Hearing services			
Hearing aids	All charges in excess of $1,500 (every 3 years)	All charges in excess of $1,500 (every 3 years)*	$1,500 allowance (must use UnitedHealthcare network)
Alternative care			
Chiropractic care	$25 copay (24 visits per year)	$25 copay (24 visits per year)	$0
Acupuncture	$25 copay (26 visits per year)	$25 copay (26 visits per year)	$0
Physical therapy	15% (60 visits per year)	15% (60 visits per year)	$0

* Medicare non-covered service

The plan covers prescriptions with no deductible and low copays.

The High Option prescription drug plan includes access to nearly 64,000 pharmacies that belong to the Express Scripts® network, along with home delivery options in all 50 states.

2024 prescription coverage	In-network (PPO) you pay
Retail prescription drugs Non-specialty 30-day supply	$10 for Tier 1 25% for Tier 2, max $200 per Rx 45% for Tier 3, max $300 per Rx
Mail-order prescription drugs Non-specialty 90-day supply	$20 for Tier 1 25% for Tier 2, max $300 per Rx 45% for Tier 3, max $500 per Rx
Retail prescription drugs Specialty 30-day supply	25% for Tier 4, max $300 per Rx 25% for Tier 5, max $600 per Rx 45% for Tier 6, max $1,000 per Rx
Mail-order prescription drugs Specialty 90-day supply	25% for Tier 4, max $150 per Rx 25% for Tier 5, max $300 per Rx 45% for Tier 6, max $500 per Rx

Receive Medicare Part D coverage at no extra cost.

Medicare Prescription Drug Plan (PDP) Employer Group Waiver Plan (EGWP)

As a High Option member, if you are enrolled in Medicare and are not enrolled in a Medicare Advantage plan (Part C), you will be automatically enrolled in our Express Scripts Medicare® (PDP) for APWU Health Plan.

The PDP EGWP is a Medicare Part D prescription drug benefit for FEHB covered annuitants and FEHB covered family members who are eligible for Medicare. Your benefits under this prescription drug plan will never be less than your coverage that is available under our FEHB High Option Plan. The advantages of this new prescription drug benefit include lower copays, coverage during the donut hole gap and no additional premium for Part D.

For your convenience, you will be automatically enrolled in our PDP EGWP and continue to remain enrolled in our FEHB High Option Plan. Participation in the PDP EGWP is voluntary, and you can opt out at any time.

For details about the new Medicare Part D plan, contact Express Scripts Medicare at **844-818-8790,** 24 hours a day, 7 days a week, or visit **apwuhp.com.**

Order diabetes medications through the mail.

- $0 copay for generic oral medication, formulary blood glucose test strips and lancets (used to reduce blood sugar)
- $25 copay for a 30-day supply of certain Insulin and non-Insulin drugs to treat diabetes
- $75 copay for a 90-day supply of certain Insulin

Access outpatient specialty medications.

For patients with complex or chronic health conditions, Accredo pharmacy provides access to specialty medications at the lowest cost.

Visit **accredo.com** or download the **Accredo app.**

EXPRESS SCRIPTS®

With Express Scripts *Smart90®*, it's easy to switch from a 30-day supply to a 90-day supply of your daily medications. Fill prescriptions through mail-order home delivery with free standard shipping or at any network retail pharmacy.

Enjoy 100% coverage for network preventive care.

You pay nothing for preventive care and routine screenings when you choose a network doctor.

It's important to see your doctor each year, even if you feel healthy. Your doctor can monitor risk factors for diseases, share tips for healthy living and make sure your immunizations are up-to-date. During a checkup, your doctor may also identify a health issue before it becomes a problem.

Medicare Part A ⊕ **Medicare Part B** ⊕ **APWU Health Plan High Option** = **100% coverage for your medical bills**

Annual adult routine exams and immunizations
Regular preventive care visits are part of maintaining a good relationship with your primary care doctor.

Breast cancer screenings
The plan offers 100% coverage for in-network annual mammograms for members age 65 and older.

Lab tests
Lab tests (covered blood work performed at LabCorp and Quest Diagnostics) are covered 100%.

High blood pressure screenings
High blood pressure—also known as hypertension—often has no symptoms, so it's important to be screened at your annual routine exam.

Premiums for the 2024 High Option
Federal retirees pay per month

Self Only enrollment code 471	Self Plus One enrollment code 473	Self & Family enrollment code 472
Monthly $269.79	**Monthly** $530.73	**Monthly** $658.77

Worldwide coverage when you travel abroad.

Medicare generally doesn't pay for hospital or medical services outside the United States, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa and the Northern Mariana Islands. However, the APWU Health Plan covers you around the world. When you have services outside of the U.S., you'll probably have to pay the bill at the time of service and submit a bill for reimbursement.

Mark Dimondstein
APWU President

Sarah J. Rodriguez
APWU Health Plan Director

799 Cromwell Park Drive
Suite K-Z
Glen Burnie, MD 21061

Stay connected to your plan.

Contact us for help.

High Option
8:30 a.m. – 6:30 p.m. CT
Monday – Friday
800-222-2798
800-622-2511 (TTY)
apwuhp.com

Retirees
OPM Retirement
Information Center
888-767-6738
retire@opm.gov
opm.gov/retirement-services

To learn more about Medicare, visit medicare.gov
opm.gov/healthcare-insurance/healthcare/medicare

What is the Medicare limiting charge?

All insurance carriers in the Federal Employees Health Benefits (FEHB) Program are mandated by law to limit payments for retired members 65 and older who do not have Medicare. Providers absorb these payment reductions. Our members are responsible only for deductibles, coinsurance, amounts over reasonable and customary limits and non-covered charges. For details, see the APWU Health Plan federal brochure at **apwuhp.com.**

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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).

The APWU Health Plan's Notice of Privacy Practices describes how medical information about you may be used by the Health Plan, your rights concerning your health information, and how to exercise them and APWU Health Plan's responsibilities in protecting your health information. The Notice is posted on the Health Plan's website. If you need to obtain a copy of the Health Plan's Notice of Privacy Practices, you may either contact the Health Plan via email or through the website at **apwuhp.com** or by calling **800-222-2798.**

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