

60 YEARS
OF SERVICE TO
AMERICA'S
WORKFORCE



MEDICARE
PART A
+
MEDICARE
PART B
+
APWU HEALTH PLAN
HIGH OPTION
=
100% COVERAGE FOR YOUR MEDICAL BILLS



How APWU Health Plans work with Medicare

TOGETHER. BETTER HEALTH.

Comprehensive health benefits you can rely on.

APWU HEALTH PLAN

Welcome to a health plan that cares about you.

Make the most of the Medicare benefits you've earned.

Retirement is a new phase of life, and with it comes a series of questions about health care coverage that don't always have easy answers. Whether you're getting ready to retire or are already retired, Medicare can be confusing. The APWU Health Plan is here to help you find answers and to make decisions that are right for you.

Maximize your coverage.

For 60 years, APWU Health Plan has served federal employees and retirees with diligence and compassion. Along with affordable premiums, our High Option Plan gives you access to Cigna's extensive PPO network of doctors, hospitals, and health care providers. Once you retire and enroll in both Medicare Part A and Part B, the High Option Plan can help maximize your health care coverage and get your medical bills paid 100 percent by waiving your deductible and coinsurance on covered services.

Are you eligible for Medicare?

To get Medicare, you must be 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.



MEDICARE
Part A

MEDICARE
Part B

APWU HEALTH PLAN
High Option

= 100% coverage for your medical bills

2020 APWU Health Plan High Option premiums

	Enrollment code	Federal monthly retirees pay
Self Only	471	$215.38
Self Plus One	473	$432.77
Self and Family	472	$558.89

An alternative option for affordable, comprehensive care.

Retirees who are looking for greater control over their health care benefits may want to consider the APWU Health Plan Consumer Driven Option. With UnitedHealthcare's expansive national network, this option provides low premiums and a proactive alternative to traditional health plans.

In January, the APWU Health Plan funds a Personal Care Account (PCA) members can use for covered medical services and prescription drugs. Members are covered 100 percent until the PCA is exhausted. The Plan funds the PCA at $1,200 for Self Only and $2,400 for Self Plus One and Self and Family.

To learn more, visit **apwuhp.com.**

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 health care
- 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 health care 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.

As an APWU Health Plan member, you don't need to enroll in Medicare Part C.

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).

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

The High Option works seamlessly with Medicare.

If you or your spouse are employed and have 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 percent 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 percent 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 percent coinsurance, which means you're covered 100 percent. With the Consumer Driven Option, if you have benefit dollars in your Personal Care Account, 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.

How to enroll in Medicare.

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



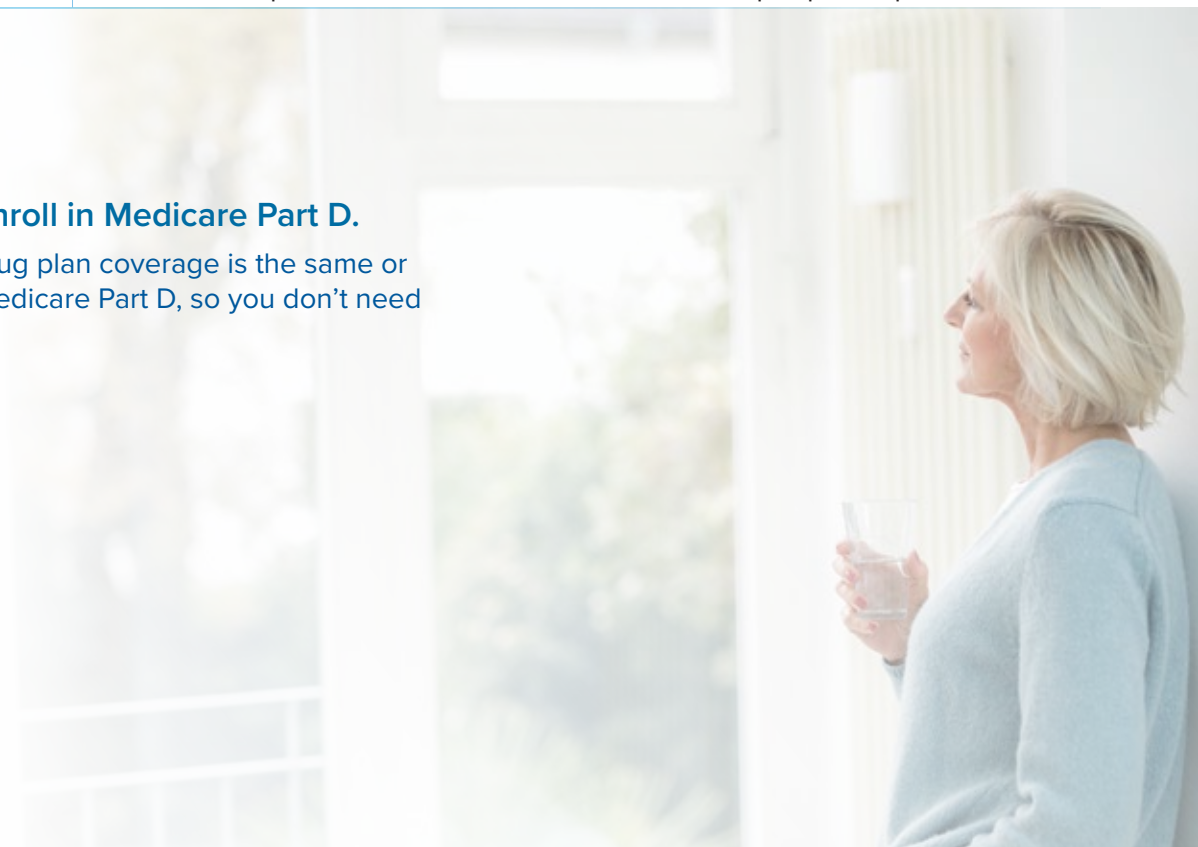
The High Option offers comprehensive benefits.

2020 Benefits	High Option In-network YOU PAY	With Part A & Part B YOU PAY
Calendar year deductible		
Self Only	$450	$0
Self Plus One	$800	$0
Self and Family	$800	$0
Annual out-of-pocket maximum		
Both medical and prescription drugs	$6,500 Self Only $13,000 Self Plus One and Self and Family	$6,500 Self Only $13,000 Self Plus One and Self and Family
Medical visits		
Office and specialist visits	$25 copay	$0
Virtual Visits with American Well	$15 copay	$0
Preventive care		
Annual adult routine exams, adult immunizations, and preventive screenings	$0	$0
Dental care		
Routine dental	30% of allowance	30% of allowance
Hospital/facility care		
Diagnostic tests or imaging	15% ($0 for covered blood work performed at LabCorp and Quest Diagnostics)	$0
Outpatient surgery	15%	$0
Inpatient	15%	$0
Surgical	15%	$0
Cancer Centers of Excellence	5%	$0
Emergency care		
Accidental injury (within 72 hours)	$0	$0
Urgent care	$30 copay	$0
Emergency room	15%	$0
Ambulance	15%	$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)*
Alternative care		
Chiropractic care	$25 copay (24 visits annually)	$25 copay (24 visits annually)
Acupuncture	$25 copay (26 visits annually)	$25 copay (26 visits annually)

* Medicare non-covered service

Prescription coverage is part of your health benefits.

High Option	2020 Prescription Drugs Benefits
Network retail 30-day supply	Tier 1 – $10
	Tier 2 – 25% up to a maximum of $200 coinsurance per prescription
	Tier 3 – 45% up to a maximum of $300 coinsurance per prescription
Out-of-network retail 30-day supply	50% of cost per prescription
Network mail order 90-day supply	Tier 1 – $20
	Tier 2 – 25% up to a maximum of $300 coinsurance per prescription
	Tier 3 – 45% up to a maximum of $500 coinsurance per prescription
Specialty network retail 30-day supply	Tier 4 – 25% up to a maximum of $300 per prescription
	Tier 5 – 25% up to a maximum of $600 coinsurance per prescription
	Tier 6 – 45% up to a maximum of $1,000 coinsurance per prescription
Specialty out-of-network retail 30-day supply	50% of cost per prescription
Specialty network mail order 90-day supply	Tier 4 – 25% with a maximum of $150 coinsurance per prescription
	Tier 5 – 25% up to a maximum of $300 coinsurance per prescription
	Tier 6 – 45% up to a maximum of $500 coinsurance per prescription



There is no need to enroll in Medicare Part D.

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

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, 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.

What is the Medicare limiting charge?

All insurance carriers in the Federal Employees Health Benefits 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.**

When is it time to enroll in 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.**

High Option
8:30 a.m. – 7 p.m. ET
Monday through Friday
800-222-2798
TDD: 800-622-2511
custser@apwhuhp.com

Consumer Driven Option
UnitedHealthcare
800-718-1299
apwu.welcometouhc.com

To learn more about Medicare, visit:
Medicare.gov

For answers to frequently asked questions about Medicare and FEHB benefits, visit:
https://www.opm.gov/healthcare-insurance/healthcare/medicare/

This is a summary of features of the APWU Health Plan. Before making a final decision, please read the Health Plan's Federal Brochure (RI 71-004). Other benefits not shown above are shown in the Brochure. All benefits are subject to the definitions, limitations, and exclusions set forth in the Plan's Brochure.

The information in this brochure is based on the Health Plan's interpretation of the Medicare Handbook. If you have questions about how Medicare processes its claims, please contact the Medicare carrier that serves your geographic area.

Mark Dimondstein, President
John L. Marcotte, Director

799 Cromwell Park Drive
Suite K-Z
Glen Burnie, MD 21061
800-222-2798

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