APWU HEALTH PLAN

35th Annual Open Season Seminar

TOGETHER. BETTER HEALTH.®

MARKETING PLUS

Basic

PRESENTED BY

TINA CROMARTIE AND KENNETH WILLIAMS



Today's Agenda
Marketing Materials

- Premiums
- Flyers
- Communication Strategy
- Open Season Website



PREMIUMS



Postal Rates: 2021 Brochure

2021 Rate Information for the APWU Health Plan

To compare your FEHB health plan options please go to www.opm.gov/fehbcompare.

To review premium rates for all FEHB health plan options please go to www.opm.gov/FEHBpremiums or www.opm.gov/Tribalpremium.

Non-Postal rates apply to most non-Postal employees. If you are in a special enrollment category, contact the agency that maintains your health benefits enrollment.

Postal rates apply to certain United States Postal Service employees as follows:

- **Postal Category 1 rates** apply to career bargaining unit employees who are represented by the following agreement: NALC.
- **Postal Category 2 rates** apply to career bargaining unit employees who are represented by the following agreement: PPOA.

APWU rates apply to career Postal employees represented by APWU.

Non-Postal rates apply to all career non-bargaining unit Postal Service employees and career bargaining unit employees who are represented by the following agreements: APWU, IT/AS, NPMHU, NPPN AND NRLCA. Postal rates do not apply to non-career Postal employees, Postal retirees, and associate members of any Postal employee organization who are not career Postal employees.

USPS Human Resources Shared Service Center: 1-877-477-3273, option 5, Federal Relay Service 1-800-877-8339

Premiums for Tribal employees are shown under the monthly non-Postal column. The amount shown under employee contribution is the maximum you will pay. Your Tribal employer may choose to contribute a higher portion of your premium. Please contact your Tribal Benefits Officer for exact rates.

Postal Rates: 2021 Brochure

Type of Enrollment	Enrollment Code	Non-Postal Premium				Postal Premium		
		Biweekly		Monthly		Biweekly		
		Gov't Share	Your Share	Gov't Share	Your Share	Category 1 Your Share	Category 2 Your Share	APWU Your Share
High Option Self Only	471	$241.58	$103.66	$523.42	$224.60	$100.30	$90.24	$103.66
High Option Self Plus One	473	$517.46	$207.51	$1,121.16	$449.61	$200.32	$178.76	$207.51
High Option Self and Family	472	$562.25	$266.30	$1,218.21	$576.98	$258.49	$235.07	$266.30
CDHP Option Self Only	474	$208.96	$69.65	$452.75	$150.91	$66.87	$57.81	$13.93
CDHP Option Self Plus One	476	$454.15	$151.38	$983.99	$327.99	$145.33	$125.65	$37.76
CDHP Option Self and Family	475	$495.44	$165.14	$1,073.45	$$357.81	$158.54	$137.07	$43.67

Postal Rates: 2021 Brochure

2021		NP	NP	Postal		
		Biweekly	Monthly	Biweekly		
Enrollment	Code	Your Share	Your Share	Cat 1	Cat 2	APWU
HO Self	471	103.66	224.60	100.30	90.24	103.66
HO Self Plus One	473	207.51	449.61	200.32	178.76	207.51
HO Self and Family	472	266.30	576.98	258.49	235.07	266.30
CDO Self	474	69.65	150.91	66.87	57.81	13.93
CDO Self Plus One	476	151.38	327.99	145.33	125.65	37.76
CDO Self and Family	475	165.14	357.81	158.54	137.07	43.67

Compare		NP	NP	Postal		
		Biweekly	Monthly	Biweekly		
Enrollment	Code	Your Share	Your Share	Cat 1	Cat 2	APWU
HO Self	471	4.25	9.22	4.17	3.93	7.53
HO Self Plus One	473	7.77	16.84	7.58	7.03	14.77
HO Self and Family	472	8.35	18.09	8.13	7.47	15.94
CDO Self	474	0.69	1.49	0.67	0.57	-3.23
CDO Self Plus One	476	1.50	3.24	1.44	1.25	-8.65
CDO Self and Family	475	1.63	3.54	1.57	1.36	-10.78

High Option Premiums

Take advantage of benefits available to High Option members.

- **NEW Medicare Advantage** — High Option members enrolled in Medicare can receive a $50 monthly reimbursement and added benefits — see page 5
- **NEW Breast cancer screenings for women** — 100% coverage for in-network annual mammograms starting at age 40 and for women age 65+ — see page 8
- **NEW Diabetes care** — Reduced and fixed costs for diabetes medications and insulin — see page 10
- **Preventive care and treatment** — You pay nothing for in-network care — see pages 8–9
- **Video chat with a doctor 24/7 without leaving home** — Learn more about virtual visits — See page 17
- **Expanded behavioral health coverage** — Cigna Behavioral Health features a larger, broader network of providers and enhanced services — see page 14

Premiums for the 2021 plan year.

Enrollment type	Enrollment code	Non-postal biweekly	Non-postal monthly	Postal Biweekly Category 1	Postal Biweekly Category 2	Postal Biweekly APWU career
Self Only	471	$103.66	$224.60	$100.30	$90.24	$103.66
Self Plus One	473	$207.51	$449.61	$200.32	$178.76	$207.51
Self and Family	472	$266.30	$576.98	$258.49	$235.07	$266.30

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- **Postal Category 2** rates apply to career bargaining unit employees who are represented by the following agreement: PPOA.

APWU rates apply to career Postal employees represented by APWU.

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Premiums for the 2021 plan year.

Enrollment type	Enrollment code	Non-postal biweekly	Non-postal monthly	Postal Biweekly Category 1	Postal Biweekly Category 2	Postal Biweekly APWU career
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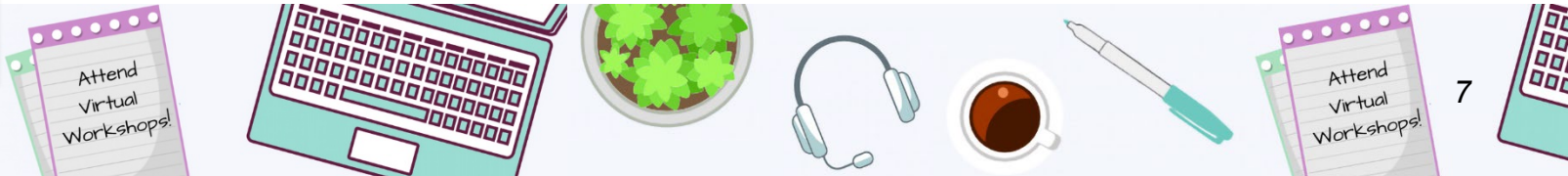

Consumer Driven Option Premiums

Take advantage of benefits available to Consumer Driven Option members.

Personal Care Account (PCA) funded by APWU Health Plan
See pages 4 – 5 to learn how you can use your PCA to decrease your out-of-pocket expenses.

NEW $25 PCA wellness incentive
Automatically receive a wellness incentive—added to your PCA—when you complete an annual physical exam.

Video chat with a doctor 24/7 without leaving home
See page 17 to learn more about Virtual Visits.

Preventive care
See pages 10 – 11 for details about in-network preventive services that are covered 100%.

Get personalized recommendations for improving your health
See page 18 for details about Rally®.

Premiums for the 2021 plan year.

Enrollment type	Enrollment code	Non-postal biweekly	Non-postal monthly	Postal Biweekly: APWU career less than a year in FEHB	Postal Biweekly: Category 2	Postal Biweekly: APWU career greater than 1 year
Self Only	474	$69.65	$150.91	$69.65	$57.81	$13.93
Self Plus One	476	$151.38	$327.99	$151.38	$125.65	$37.76
Self and Family	475	$165.14	$357.81	$165.14	$137.07	$43.67

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Non-Postal rates apply to Postal executive, Law Enforcement and Management Association.
NALC (See **Postal Category 1** in full Brochure).
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Premiums for the 2021 plan year.

Enrollment type	Enrollment code	Non-postal biweekly	Non-postal monthly	Postal Biweekly: APWU career less than a year in FEHB	Postal Biweekly: Category 2	Postal Biweekly: APWU career greater than 1 year
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Self Plus One	476	$151.38	$327.99	$151.38	$125.65	$37.76
Self and Family	475	$165.14	$357.81	$165.14	$137.07	$43.67

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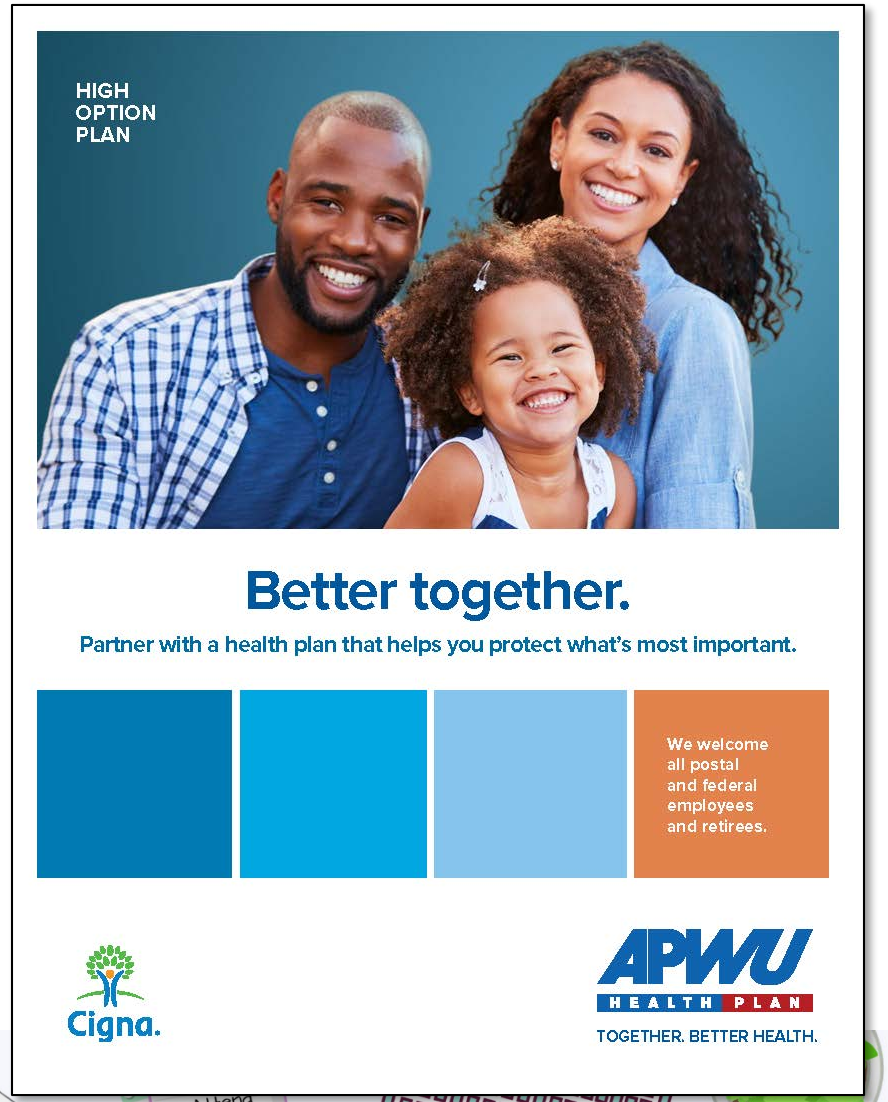
HIGH OPTION AND CONSUMER DRIVEN OPTION FLYERS



High Option Cover



High Option Flyer (pgs 2-3)



Better together

means building a strong partnership to protect your health and wellbeing.

APWU Health Plan has been serving America's postal and federal workers and retirees for more than 60 years. We're here to help you get the most from your plan.

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

- Comprehensive coverage with low copays
- A nationwide Cigna® Healthcare network of 1 million+ providers
- No referrals needed
- Personal service from people who care

Take advantage of benefits available to High Option members.

NEW Medicare Advantage High Option members enrolled in Medicare can receive a $50 monthly reimbursement and added benefits	see page 5
NEW Breast cancer screenings for women 100% coverage for in-network annual mammograms starting at age 40 and for women age 65+	see page 8
NEW Diabetes care Reduced and fixed costs for diabetes medications and insulin	see page 10
Preventive care and treatment You pay nothing for in-network care	see pages 8–9
Video chat with a doctor 24/7 without leaving home Learn more about virtual visits	See page 17
Expanded behavioral health coverage Cigna Behavioral Health features a larger, broader network of providers and enhanced services	see page 14

Premiums for the 2021 plan year.

				Postal Biweekly		
Enrollment type	Enrollment code	Non-postal biweekly	Non-postal monthly	Category 1	Category 2	APWU career
Self Only	471	$103.66	$224.60	$100.30	$90.24	$103.66
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High Option Flyer (pgs 4-5)

Cigna Healthcare network

Save money by staying in the Cigna Healthcare network.

The High Option plan offers access to a large nationwide Cigna Healthcare network that features more than 1 million health care providers, with no need for referrals. Cigna negotiates rates with providers, which means you can save money when you use network doctors.

Cigna Healthcare network features a strong, robust network of first-in-class providers and facilities, with broad accessibility across the U.S.

Visit **apwuhp.com** to search the provider directory and find doctors in the Cigna Healthcare network.

Health coaches are here to help you.

Manage chronic conditions by making sure you take medication as prescribed and follow your treatment plan.

Navigate care and treatment by helping you get a second opinion or information on surgery and other procedures.

Establish lifelong healthy behaviors through strategies to reduce stress, lose weight, stay active, quit tobacco or cope with depression.

Save on health care costs by finding network providers and other cost-saving health support.

Medicare Advantage

A Medicare Advantage plan designed for the FEHB Program.



Take advantage of it.

High Option enrollees receive added benefits and reduced costs.

APWU Health Plan offers a Medicare Advantage plan for High Option members covered by Medicare Part A and Part 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. Plus, it includes a $50 Medicare Part B monthly reimbursement and added benefits at no additional cost.

There's so much to take advantage of:

- No deductible, coinsurance or copays
- No need to coordinate primary and secondary payers
- Prescription drug coverage throughout the Gap stage and Catastrophic coverage stage

To qualify for enhanced Medicare Advantage benefits you must be:

- Enrolled in the APWU Health Plan High Option
- Retired
- Enrolled in Medicare Parts A and B

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

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

Choose a plan with benefits that fit your needs.

Plan benefits and programs include:

SilverSneakers®[1]
Stay active and have fun with a free fitness program.

NurseLine[2]
Access a registered nurse 24/7 for help with health concerns.

UnitedHealthcare HouseCalls[3]
Get an annual in-home preventive care visit with a health care practitioner at no extra cost.

UnitedHealthcare Hearing[4]
Receive a hearing exam and access a wide selection of custom-programmed hearing aids—available in-person at any of our 5,000 providers nationwide[5] or through home delivery.

Provider network
See any doctor you want and pay the same cost share, as long as they accept Medicare patients and the plan.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.

[1] Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details. Consult a health care professional before beginning any exercise program. SilverSneakers is a registered trademark of Tivity Health, Inc. ©2019 Tivity Health, Inc. All rights reserved.

[2] The NurseLine service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through this service is for informational purposes only. The nurses cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. Access to this service is subject to terms of use.

[3] HouseCalls may not be available in all areas.

[4] Other hearing exam providers are available in our network. Your plan includes benefits for hearing aid coverage outside of the UnitedHealthcare Hearing network. See plan for details.

[5] 2019 UnitedHealthcare Internal Data.

High Option Flyer
(pgs 6-7)

High Option

A premier plan in the Federal Employees Health Benefits (FEHB) Program

High Option 2021 benefits	High Option in-network you pay	UnitedHealthcare Medicare Advantage (PPO) for APWU Health Plan in-network you pay (For High Option members. Administered by UnitedHealthcare.)
Calendar year deductible (The amount the member pays before carrier begins to pay.)		
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	$0 $0
Medical visits		
Office and specialist visits	$25 copay (no deductible applied)	$0
Virtual visits with Amwell®	$15 copay (no deductible applied)	$0
Preventive care		
Well-child care	$0	n/a
Childhood immunizations	$0	n/a
Annual adult routine exams	$0	$0
Adult immunizations	$0	$0
Preventive screenings	$0	$0
Dental care		
Routine dental	30% of plan allowance (no deductible applied)	Extra dental benefits available



Features the Cigna Healthcare provider network

High Option 2021 benefits	High Option in-network you pay	UnitedHealthcare Medicare Advantage (PPO) for APWU Health Plan in-network you pay (For High Option members. Administered by UnitedHealthcare.)
Diabetes care Generic oral medication, formulary blood glucose test strips and lancets (used to reduce blood sugar)	$0 through mail-order	$0
Maternity		
Physician and hospital care	$0	n/a
Hospital/facility care		
Diagnostic tests or imaging	15% ($0 for covered blood work performed at LabCorp and Quest Diagnostics)	$0 for covered blood work performed at LabCorp and Quest Diagnostics
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 (no deductible applied)	$0
Emergency room	15%	$0
Ambulance	15% (no deductible applied)	$0
Hearing services		
Diagnostic hearing tests	15% every 2 years	$0
Hearing aids	All charges in excess of $1,500 (every 3 years, no deductible applied)	All charges in excess of $1,500 (every 3 years, no deductible applied)
Alternative care		
Chiropractic care	$25 copay (24 visits annually, no deductible applied)	$0
Acupuncture	$25 copay (26 visits annually, no deductible applied)	$0
Mental health/substance abuse		
Office visit	$25 copay (no deductible applied)	$0
Virtual visit	$15 copay (no deductible applied)	$0
Outpatient treatment	15%	$0
Diagnostics, inpatient and outpatient service	15%	$0

High Option Flyer
(pgs 8-9)

100% coverage and preventive care

100% covered services.

You pay nothing for preventive care and routine screenings when you choose a network doctor. Preventive medications are also covered 100%.

Regular checkups and routine screenings help protect your health. That's why it's important to see your doctor each year, even if you feel healthy. Your doctor can identify risk factors for diseases, share tips for healthy living, make sure your immunizations are up to date and identify health issues before they become a problem.

100% covered

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

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

Breast cancer screenings
Treatment is more likely to be successful the sooner breast cancer is detected. The plan offers 100% coverage for in-network annual mammograms for women starting at age 40. **NEW** this year: Women age 65 and older can get a mammogram every calendar year.

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.



100% covered

Well-child exams and immunizations
Regular exams and tests are an effective way to track your child's health and development. Pediatricians recommend well-child checkups for kids and teens.

Maternity care
Regular prenatal visits throughout your pregnancy can help catch potential issues early and reduce the risk of complications.

Diabetes screenings
The symptoms of diabetes are often hard to spot. If you have any risk factors for diabetes, talk to your doctor about getting your blood sugar tested.

Diet and nutrition support
Visits to a registered dietician/nutritionist are covered 100%.

Emergency care
You're covered 100% for accidental injury outpatient services within 72 hours.

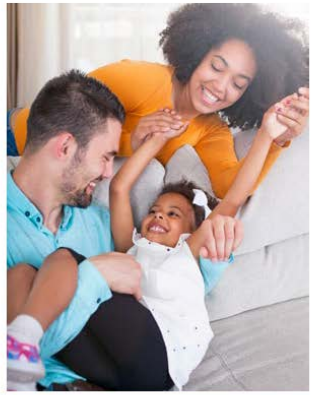
Members pay $0 for lifestyle management programs.
These programs offer 24/7 access to online resources and tools. Participants also receive a welcome letter and workbook, along with post-graduation follow-up calls.

Tobacco cessation targets physical, emotional and social addiction and uses best practices to improve success. Nicotine replacement therapy is available at no extra charge.

Weight management focuses on the role emotions and sensations play in eating patterns. Participants can achieve sustainable weight loss by making small changes.

High Option Flyer (pgs 10-11)

The plan covers prescriptions with no deductible and low copays.



The High Option prescription drug plan includes access to 67,000+ contracted pharmacies in the Express Scripts network, representing more than 99% of all U.S. pharmacies.

Spend less time and money getting your medications.

Making monthly trips to the pharmacy can be an inconvenient. 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 Express Scripts mail-order home delivery with free standard shipping or at any network retail pharmacy. With fewer trips to the pharmacy, you're less likely to run out of your medications or miss a dose.

EXPRESS SCRIPTS®

Save on prescriptions by using the Express Scripts® *Smart90*® program.

Diabetes medications available through mail-order

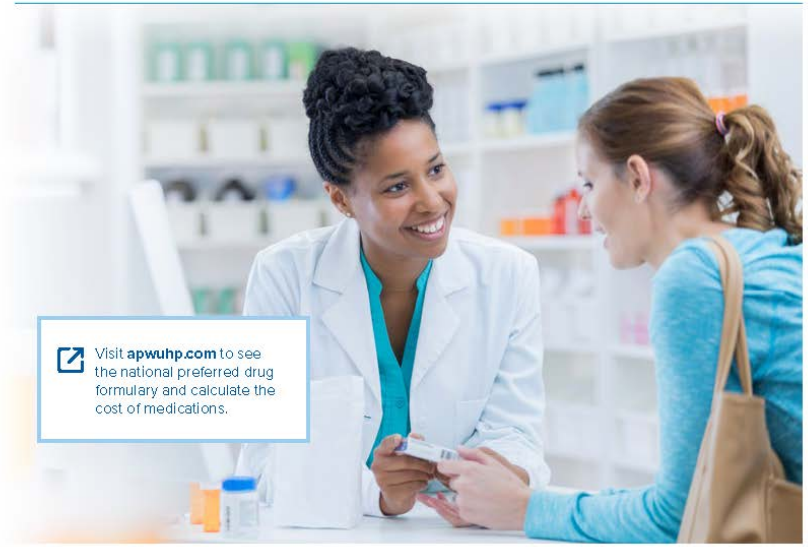
- $0 copay for generic oral medication, formulary blood glucose test strips and lancets (used to reduce blood sugar)
- $25 copay for a 30-day supply of certain insulin
- $75 copay for a 90-day supply of certain insulin

Outpatient specialty medications

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

High Option 2021 prescription coverage		In-network (PPO) you pay	Out-of-network you pay
Prescription drugs EXPRESS SCRIPTS®	Retail prescription drugs — non-specialty 30-day supply	$10 for Tier 1 25% for Tier 2, maximum $200 per Rx 45% for Tier 3, maximum $300 per Rx	50%
	Mail-order prescription drugs — non-specialty 90-day supply	$20 for Tier 1 25% for Tier 2, maximum $300 per Rx 45% for Tier 3, maximum $500 per Rx	n/a
	Retail prescription drugs — specialty 30-day supply	25% for Tier 4, maximum $300 per Rx 25% for Tier 5, maximum $600 per Rx 45% for Tier 6, maximum $1,000 per Rx	50%
	Mail-order prescription drugs — specialty 90-day supply	25% for Tier 4, maximum $150 per Rx 25% for Tier 5, maximum $300 per Rx 45% for Tier 6, maximum $500 per Rx	n/a

Pharmacy benefits do not count toward your deductible.



Visit **apwuhp.com** to see the national preferred drug formulary and calculate the cost of medications.

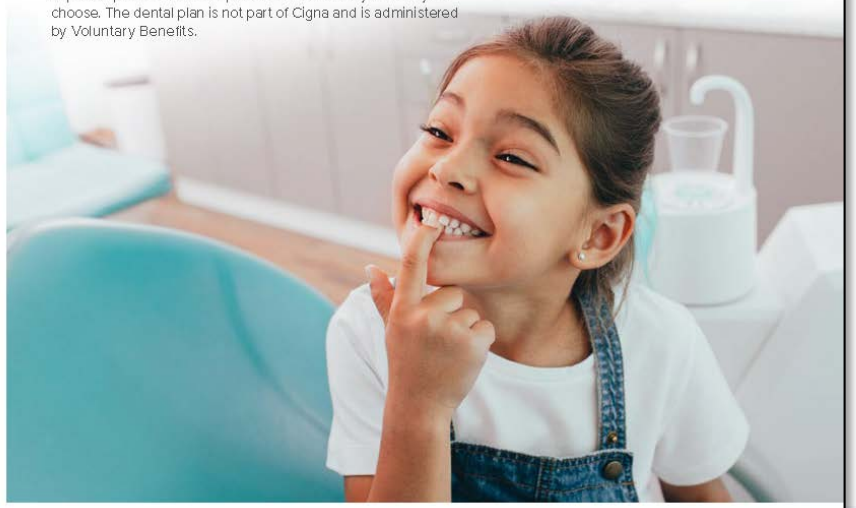
High Option Flyer
(pgs 12-13)

Consider your dental coverage options.

1. **High Option members receive certain dental benefits as part of the medical plan.** The plan pays 70% of the allowed amount for routine dental care, office visits, exams, cleanings, X-rays, fluoride treatment, fillings and simple extractions. Use any dentist you choose. Some providers may require you to pay at the time of service and file a claim with APWU Health Plan.
2. **Receive an extra dental discount when you take a Health Risk Assessment.** After you enroll in the medical plan and complete a Health Risk Assessment, you'll be enrolled in the Cigna*Plus* Savings® discount dental program, which includes access to discounts with participating dental providers.
3. **Federal and postal employees and retirees can also enroll in the APWU Health Plan Dental Insurance Plan.** You'll pay a separate premium for this plan and can use any dentist you choose. The dental plan is not part of Cigna and is administered by Voluntary Benefits.

Learn more about the APWU Health Plan Dental Insurance Plan and download the brochure:

- Go to **apwuhp.com**
- Select the **Become a Member** tab
- Under **HIGH OPTION**, select **Dental**



Members who enroll in the APWU Health Plan Dental Plan pay a separate premium.

APWU Health Plan Dental Insurance Plan Administered by Voluntary Benefits	
Calendar year deductible	Type I benefits: No deductible Type II and Type III benefits: $50 per person/Family $150 Type IV benefits: No deductible for orthodontic coverage (if selected)
Calendar year maximum	$20,000 per person for all covered services
Lifetime maximum	$2,500 per person per year Maximum of $5,000 for orthodontic services (if selected)

After the annual deductible is met, this plan pays:			
Type I benefits	Type II benefits	Type III benefits	Type IV benefits
Preventive services: • Exams • X-rays • Cleanings	Basic services: • Fillings • Oral surgery • Extractions	Major services: • Crowns • Bridges • Dentures • Periodontics	Optional coverage: • Orthodontic services
100% of reasonable and customary charges	80% of reasonable and customary charges	50% of reasonable and customary charges (12-month waiting period)	50% of reasonable and customary charges



High Option Flyer
(pgs 14-15)

Behavioral health and substance use

Help is available for behavioral health and substance use treatment.

To help you feel better and more in control of your emotional wellbeing, the High Option plan offers behavioral health and substance use services through Cigna Behavioral Health. As a member, you can find the confidential support you need to do all of this and more:

- **Manage stress and anxiety**
- **Cope with depression**
- **Live with a chronic condition**
- **Address the challenges of adoption**
- **Support caregivers**
- **Treat substance use disorders**

Call **800-582-1314** anytime, any day, for immediate help. We're here 24/7 to assist you with routine and urgent needs. Behavioral clinicians are available to provide crisis support.

If you or a loved one is in crisis, Cigna counselors are available 24/7:

- Call the number on your ID card
- Text **HOME** to **741741** from anywhere in the USA
- Call the National Suicide Prevention Lifeline: **800-273-8255**

1 in 5
U.S. adults experiences mental illness each year.

*"Mental Health By The Numbers," National Alliance on Mental Illness, September 2019.

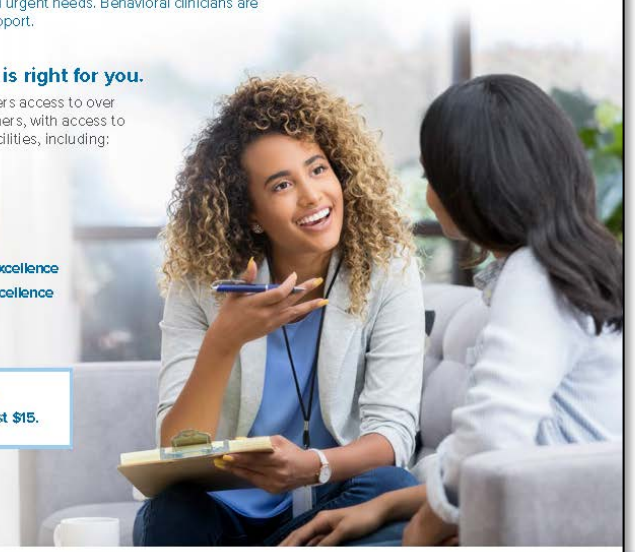
Find a provider who is right for you.

Cigna Behavioral Health offers access to over 180,000 individual practitioners, with access to many more locations and facilities, including:

- **Licensed counselors**
- **Nurse practitioners**
- **Psychologists**
- **Psychiatrists**
- **Substance use centers of excellence**
- **Mental health centers of excellence**

The copay for in-network office visits is $25.

The copay for a virtual visit is just $15.



Vision and hearing

Protect your vision and hearing.

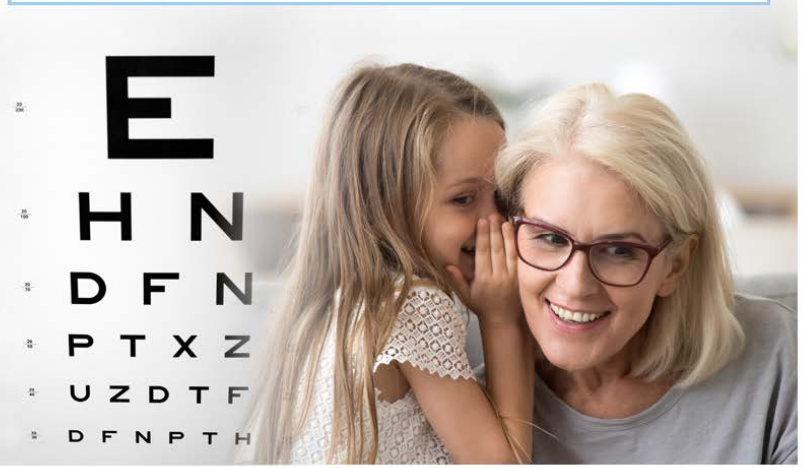
The High Option plan covers diagnostic hearing tests every two years and hearing aids every three years.

Members can also save on vision and hearing care through Cigna Healthy Rewards®. Along with vision and hearing exams, the program offers discounts on eyeglasses and frames, Lasik vision correction and hearing aids.

American Hearing Benefits

Supplement your High Option plan benefits with no additional premium and get a free hearing consultation and a discount on hearing aids.

Call **888-863-7222**
Visit **americanhearingbenefits.com**



High Option Flyer (pgs 16-17)

Member portal and mobile app

Manage your High Option plan from your computer or mobile device.

Member portal
myapwuhp.com

The member portal features resources to keep you healthy and tools to help you get the most from the High Option plan.

As a member, you can log in to your portal to:

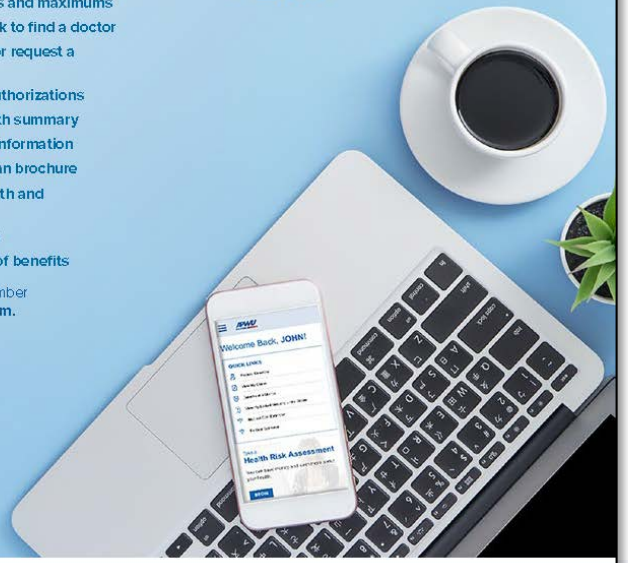
- Access deductibles, copays and maximums
- Check the provider network to find a doctor
- Print a temporary ID card or request a replacement ID card
- View or print claims and authorizations
- Review your personal health summary
- See benefit and eligibility information
- View and download the plan brochure
- Read industry-leading health and wellness information
- Update your email address
- Update your coordination of benefits

Register for a free member account at **apwuhp.com.**

Mobile app
myapwuhp

The member app is another tool that can help you manage your health plan. See your claims, year-to-date information, prescriptions and more.

Download it at the **App Store®** or **Google Play™**.



Virtual visits

See a doctor 24/7 from the comfort of home.

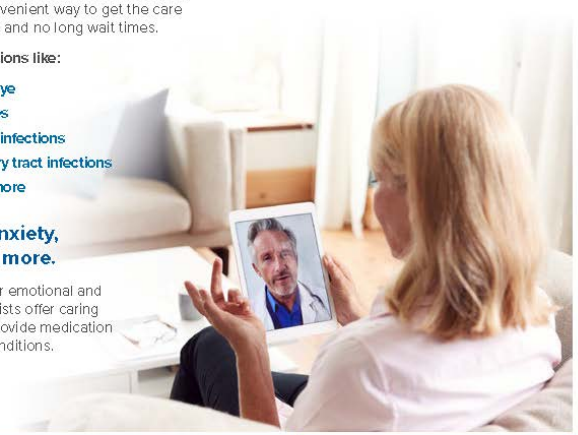
The High Option plan covers telehealth visits using Amwell. With virtual visits, you can speak to a board-certified doctor about minor medical and mental health concerns, get a diagnosis and, if appropriate, have prescriptions sent to your local pharmacy. It's an easy, convenient way to get the care you need—with no appointment and no long wait times.

Doctors can treat health conditions like:

- Allergies
- Bronchitis
- Colds
- Flu
- Migraines
- Pink eye
- Rashes
- Sinus infections
- Urinary tract infections
- And more

Save money with virtual visits.

APWU Health Plan offers a reduced copay of just $15 for a virtual visit.



Get help coping with anxiety, stress, depression and more.

Virtual visits are also available for emotional and behavioral health issues. Therapists offer caring support, and psychiatrists can provide medication management for many health conditions.

Reduce your family's risk of exposure to the novel coronavirus.

Telehealth can be a safe option for preventive, chronic and routine care during the COVID-19 pandemic. By improving access to care directly from home, virtual visits reduce the strain on in-person primary care, urgent care and emergency departments.

Need a COVID-19 screening?

Virtual visits are an ideal way to screen patients who may have symptoms of COVID-19. Board-certified telehealth providers are trained to screen patients, assign risk, answer questions and recommend the next steps a patient should take.

High Option Flyer
(pgs 18-19)

Cigna Healthy Rewards

Reward yourself with health and wellness discounts.

Cigna Healthy Rewards offers discounts on a wide variety of health and wellness programs and services:

- **Fitness club memberships**
- **Virtual workouts**
- **Yoga, fitness and wellness products**
- **Wearable fitness devices**
- **Hearing exams and hearing aids**
- **Complementary and alternative medicine**
- **Nutritional home delivery meal service**
- **Eyeglasses**
- **Laser vision correction (LASIK)**

After you enroll, to access member resources:

- Go to **apwuhp.com**
- Select the **Already a Member** tab
- Under **HIGH OPTION**, select **My Tools**



Tools and resources help you make the most of your plan.

Health Information Line
Research health topics and talk to a nurse 24/7 by phone.

Hospital Quality Ratings
Check hospital ratings online to find the hospital that is best for you, wherever you live.

Treatment Cost Estimator
Estimate the costs of care ahead of time.

Enrollment

Enroll now.

Choose the option that works best for you.

Postal Service employees

- Call PostalEASE at **877-477-3273**, option 5
- Visit **liteblue.usps.gov**
- Make sure you have your Employee Identification Number and USPS PIN

Postal Service retirees

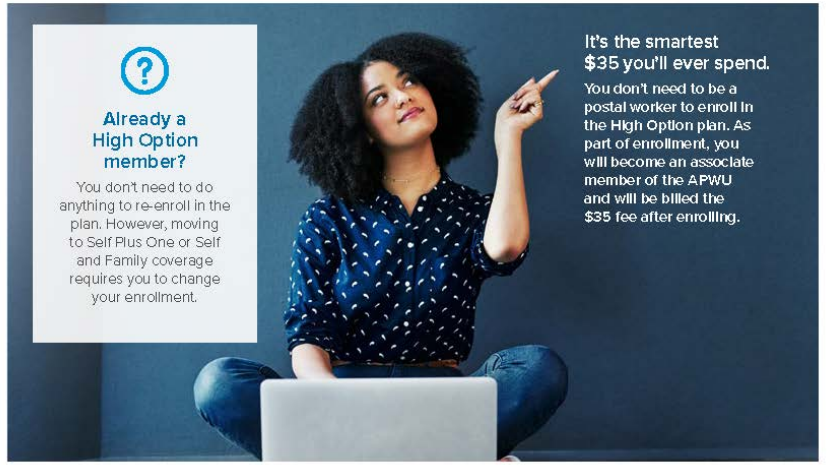
- Complete the FEHB Health Benefits Election Form (SF2809)
- Visit **apwuhp.com/enroll** to download the form
- Visit **opm.gov/forms/pdf_fill/sf2809.pdf** to download the form

Federal employees and retirees

- Complete the FEHB Health Benefits Election Form (SF2809)
- Pick up the form in your employing office
- Visit **opm.gov/forms/pdf_fill/sf2809.pdf** to download the form
- Ask your agency if you can enroll online or by phone

Already a High Option member?

You don't need to do anything to re-enroll in the plan. However, moving to Self Plus One or Self and Family coverage requires you to change your enrollment.



It's the smartest $35 you'll ever spend.

You don't need to be a postal worker to enroll in the High Option plan. As part of enrollment, you will become an associate member of the APWU and will be billed the $35 fee after enrolling.

High Option Flyer
(Back Cover)

Join the plan that's focused on protecting your health and wellbeing.

The APWU Health Plan has proudly served America's workforce for more than 60 years. We're here to help you get the most from your benefits.

Mark Dimondstein
APWU President

Sarah J. Rodriguez
APWU Health Plan Director

NEW
High Option members can enroll in the UnitedHealthcare Medicare Advantage (PPO) for APWU Health Plan. **For more information, see page 5 inside.**



Contact us for help.

HIGH OPTION
800-PIC-APWU (Open Season)
800-222-2798
800-622-2511 (TDD)
apwuhp.com

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

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

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.

Virtual visits: Prescription availability is defined by physician judgment.

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APWU HEALTH PLAN

TOGETHER. BETTER HEALTH.

Consumer Driven Option Flyer (Cover)



Consumer Driven Option Flyer (pgs 2-3)



Better together

means building a strong partnership to protect your health and wellbeing.

APWU Health Plan has been serving America's postal and federal workers and retirees for more than 60 years. We're here to help you get the most from your plan.

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

Comprehensive coverage with low copays	A nationwide Cigna® Healthcare network of 1 million+ providers	No referrals needed	Personal service from people who care

Take advantage of benefits available to Consumer Driven Option members.

- **Personal Care Account (PCA) funded by APWU Health Plan**
  See pages 4 – 5 to learn how you can use your PCA to decrease your out-of-pocket expenses.
- **NEW $25 PCA wellness incentive**
  Automatically receive a wellness incentive—added to your PCA—when you complete an annual physical exam.
- **Video chat with a doctor 24/7 without leaving home**
  See page 17 to learn more about Virtual Visits.
- **Preventive care**
  See pages 10 – 11 for details about in-network preventive services that are covered 100%.
- **Get personalized recommendations for improving your health**
  See page 18 for details about Rally®.

Premiums for the 2021 plan year.

				Postal		
				Biweekly		
Enrollment type	Enrollment code	Non-postal biweekly	Non-postal monthly	APWU career less than a year in FEHB	Category 2	APWU career greater than 1 year
Self Only	474	$69.65	$150.91	$69.65	$57.81	$13.93
Self Plus One	476	$151.38	$327.99	$151.38	$125.65	$37.76
Self and Family	475	$165.14	$357.81	$165.14	$137.07	$43.67

Postal rates apply to certain United States Postal Service employees as follows:
Postal Category 2 rates apply to career bargaining unit employees who are represented by the following agreement: PPOA.
Non-Postal rates apply to most non-Postal employees. If you are in a special enrollment category, contact the agency that maintains your health benefits enrollment.
Non-Postal rates apply to all career non-bargaining unit Postal Service employees and career employees represented by the NRLCA, APWU, NPMHU and NPPN agreements.
Non-Postal rates apply to Postal executive, Law Enforcement and Management Association.
NALC (See **Postal Category 1** in full Brochure).
Postal rates do not apply to non-career Postal employees, Postal retirees, and associate members of any Postal employee organization who are not career Postal employees.

Consumer Driven Option Flyer (pgs 4-5)

Personal Care Account

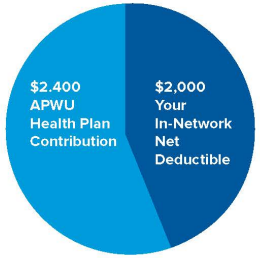
A Personal Care Account is an easy way to reduce your expenses.

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



Get to know the Consumer Driven Option plan.

Plan deductible: The total amount of eligible medical expenses you must meet each year before traditional health coverage begins.

Personal Care Account (PCA): APWU Health Plan contributes funds to your PCA each year. By using this money to pay for eligible medical expenses, you decrease your plan deductible and out-of-pocket expenses.

Net deductible: The remaining amount you have to pay once the funds in your PCA have been exhausted and before traditional health coverage begins. **Net deductible = plan deductible - PCA.**

Traditional health coverage: Your benefits begin after you satisfy the plan deductible. For most services, you pay only 15% of the cost.

Personal Care Account

Your PCA covers 100% of all covered health care 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. You can use your PCA for:

- Medical care
- Prescription drugs and supplies
- Dental treatment
- Vision, including eyeglasses and contact lenses
- Surgery and hospital services
- Mental health and substance use treatment
- Emergency care

Your PCA covers both in-network and out-of-network services. However, care can be less expensive when you stay in the network because network providers discount their fees.



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.

How your PCA works

1. Your full PCA balance is available in January. Use your PCA for any eligible expense.
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. 100% — If you reach the out-of-pocket maximum, the plan pays 100% of your covered health care costs for the rest of the year.

Consumer Driven Option Flyer (pgs 6-7)

Personal Care Account

Learn the features of a Personal Care Account (PCA).

	PCA
What is it?	It's a health reimbursement account to help you pay for covered health care services and eligible medical expenses.
How do I get it?	You get it when you sign up for your health plan.
Who owns it?	APWU Health Plan.
Who puts money in it?	Only APWU Health Plan.
How is money put in it?	APWU Health Plan puts all of the money in the account at the start of the plan year.
If I don't spend it all this year, can I use it next year?	Yes. APWU Health Plan can limit the amount that can carry over.
Can I keep it if I leave APWU Health Plan? What happens to the money?	No. APWU Health Plan keeps the money.
When can I start spending it?	You can start spending your PCA on the first day of the plan year.



	PCA
Do I have to pay taxes on it?	No. You don't have to pay federal or state income taxes on this money.
What can I pay for with it?	You can pay for eligible medical expenses determined by the IRS and APWU Health Plan. You can also use it to pay for dental, vision and other health care services and supplies listed under Section 213(d) of the Internal Revenue Code.
Can I have any other accounts with it?	Yes. You can have a health care FSA and dependent care FSA.
If I receive COBRA benefits, do COBRA rights apply to it?	Yes.

Choose how you pay for medical claims.

If you have funds available in your PCA, claims will be paid out of your PCA first. If you want to use your FSA or another account to pay a medical bill, you can instruct the health plan to turn off your PCA for the plan year. In some cases, you may have to pay the cost of the services up front. Pharmacy claims will always be paid out of your PCA, as long as you have funds available.

Consumer Driven Option Flyer (pgs 8-9)

Consumer Driven Option

A proactive alternative to conventional health plans

Overall plan features			
Personal Care Account (PCA) In January, the Health Plan funds a PCA members can use for covered medical services. Members are covered 100% until the PCA is exhausted. Self Only Self Plus One Self and Family	 $1,200 $2,400 $2,400		**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.
Net deductible Self Only Self Plus One Self and Family	**In-network** $1,000 $2,000 $2,000	**Out-of-network** $1,500 $3,000 $3,000	**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.
Out-of-pocket maximum Both medical and prescription drugs Self Only Self Plus One / Self and Family	**In-network** $6,500 $13,000	**Out-of-network** $12,000 $24,000	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.



UnitedHealthcare

UnitedHealthcare administers the Consumer Driven Option.

Consumer Driven Option 2021 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 aid	 15% every 2 years All charges in excess of $1,500 (every 3 years) $1,500 (every 3 years, no deductible applied)
Mental health/substance abuse Office visit Virtual Visit Outpatient treatment Diagnostics, inpatient and outpatient services	 15% of plan allowance 15% of plan allowance 15% of plan allowance 15% of plan allowance

Consumer Driven Option Flyer (pgs 10-11)

100% coverage and preventive care

100% covered services.

You pay nothing for preventive care and routine screenings when you choose a network doctor. Preventive medications are also covered 100%.

Regular checkups and routine screenings help protect your health. It's important to see your doctor each year, even if you feel healthy. Your doctor can identify risk factors for diseases, share tips for healthy living, make sure your immunizations are up to date and identify health issues before they become a problem.

Find your doctor.

With the Consumer Driven Option, you can use any doctor, clinic, hospital or health care facility you want. But you'll save money when you see providers in the UnitedHealthcare network. If you use out-of-network providers, you'll have a lower level of coverage.

Visit **apwuhp.com** to search the provider directory and find doctors in the UnitedHealthcare network.

UnitedHealthcare

Annual adult routine exams, lab tests and immunizations

Checkups and screenings can help prevent diseases and other health problems. Regular preventive care visits are part of maintaining a good relationship with your primary care doctor.

Breast cancer screenings

Mammograms are important for women because treatment is more likely to be successful the sooner breast cancer is detected. These tests are covered for women age 35 and older.

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.



Well-child exams and immunizations

Regular exams and tests are an effective way to track your child's health and development. Pediatricians recommend well-child checkups for kids and teens.

Prenatal care

Get the care you need for a healthy pregnancy. Regular prenatal visits throughout your pregnancy can help catch potential issues early and reduce the risk of complications.

Diabetes screenings

The symptoms of diabetes are often hard to spot. If you have any risk factors for diabetes, talk to your doctor about getting your blood sugar tested.

Members pay $0.

These services are covered 100% when you choose a network doctor:

- Preventive care and screenings
- Well-woman care
- Healthy pregnancy program
- Tobacco cessation program

Receive a $25 wellness incentive—added to your PCA—when you or a covered family member completes an annual physical exam.

Consumer Driven Option Flyer (pgs 12-13)

Pharmacy

Your PCA covers the cost of prescription drugs.

Save money when you use OptumRx® Home Delivery

OptumRx, a UnitedHealthcare company, provides pharmacy benefits for the Consumer Driven Option. The OptumRx network features more than 64,000 retail pharmacies, including all large national chains, many local community pharmacies and OptumRx Home Delivery.

If you fill a prescription when you have benefit dollars available in your PCA, the funds will be applied and you may pay nothing.

OPTUMRx™



Consumer Driven Option 2021 prescription coverage	In-network you pay
Network retail	
Tier 1/Tier 2	25%, min. $15 and max. per Rx of $200 for a 30-day supply, $400 for a 60-day supply, $600 for a 90-day supply
Tier 3	40%, min. $15 and max. per Rx of $300 for a 30-day supply, $600 for a 60-day supply, $900 for a 90-day supply
Network home delivery	
Tier 1/Tier 2	25%, min. $10 and max. per Rx of $200 for a 30-day supply, $400 for a 60-day supply, $600 for a 90-day supply
Tier 3	40%, min. $10 and max. per Rx of $300 for a 30-day supply, $600 for a 60-day supply, $900 for a 90-day supply

Dental coverage

Consider your dental coverage options.



1. **As a Consumer Driven Option member, you can pay for eligible dental expenses from your PCA as long as funds are available.** You'll pay for dental care at the time of service.
2. **Federal and postal employees and retirees can also enroll in the APWU Health Plan Dental Insurance Plan.** You'll pay a separate premium for this plan and can use any dentist you choose. There is no deductible for preventive services, including exams, X-rays and cleanings.

Learn more about the APWU Health Plan Dental Insurance Plan and download the brochure:

- Go to **apwuhp.com**
- Select the **Become a Member** tab
- Under **CONSUMER DRIVEN OPTION,** select **Dental**

Members who enroll in the APWU Health Plan Dental Plan pay a separate premium.

APWU Health Plan Dental Insurance Plan Administered by Voluntary Benefits			
Calendar year deductible	Type I benefits: No deductible Type II and Type III benefits: $50 per person/Family $150 Type IV benefits: No deductible for orthodontic coverage (if selected)		
Calendar year maximum	$20,000 per person for all covered services		
Lifetime maximum	$2,500 per person per year Maximum of $5,000 for orthodontic services (if selected)		
After the annual deductible is met, this plan pays:			
Type I benefits	Type II benefits	Type III benefits	Type IV benefits
Preventive services: • Exams • X-rays • Cleanings	Basic services: • Fillings • Oral surgery • Extractions	Major services: • Crowns • Bridges • Dentures • Periodontics	Optional coverage: • Orthodontic services
100% of reasonable and customary charges	80% of reasonable and customary charges	50% of reasonable and customary charges (12-month waiting period)	50% of reasonable and customary charges

Consumer Driven Option Flyer (pgs 14-15)

Behavioral health

Get back to being you with Behavioral Health Solutions.

To help you feel better and more in control of your emotional wellbeing, the Consumer Driven Option plan offers mental health and substance use services through Behavioral Health Solutions. If you or a loved one are facing emotional struggles or substance use issues, you're not alone. Behavioral Health Solutions offers confidential assistance to help you find the support you need to do all of this and more:

- Manage stress and anxiety
- Cope with depression
- Live with a chronic condition
- Address the challenges of adoption
- Support caregivers
- Treat substance use disorders

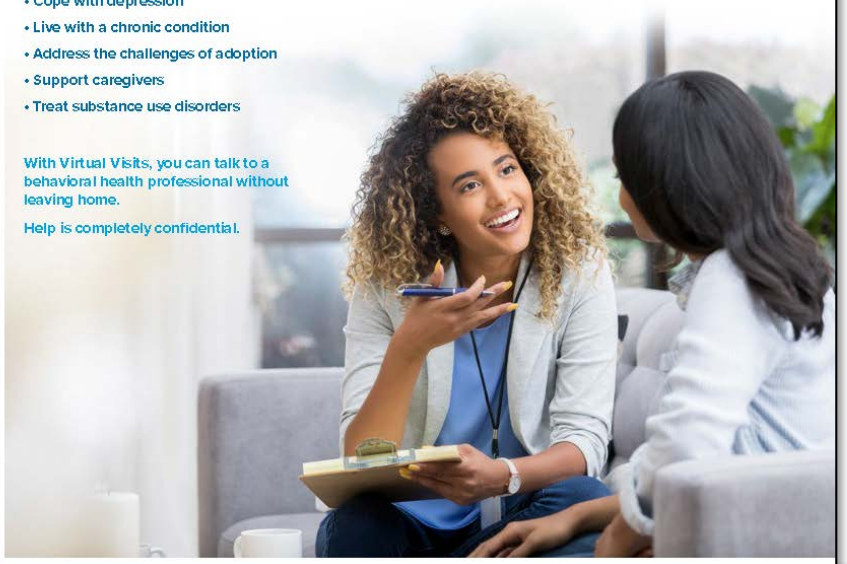
With Virtual Visits, you can talk to a behavioral health professional without leaving home.

Help is completely confidential.

Members pay 15% of the plan allowance for behavioral health visits.

1 in 5
U.S. adults experiences mental illness each year.

"Mental Health By The Numbers," National Alliance on Mental Illness, September 2019.



Vision and hearing

Protect your vision and hearing.

The Consumer Driven Option plan covers diagnostic hearing tests every two years and hearing aids every three years.

American Hearing Benefits
Supplement your Consumer Driven Option plan benefits with no additional premium and get a free hearing consultation and a discount on hearing aids.

Call **888-863-7222**
Visit **americanhearingbenefits.com**



Consumer Driven Option Flyer (pgs 16-17)

Member portal and mobile app

Manage your Consumer Driven Option plan from your computer or mobile device.

Member website
myuhc.com®

With **myuhc.com,** you can access your health plan 24/7. It only takes a few minutes to set up your account. After you're signed in, you'll have easy access to tools and resources that can help you do so many things:

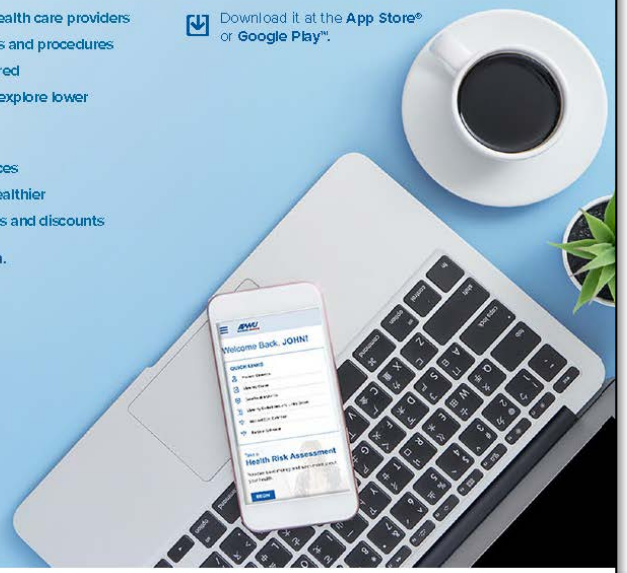
- **Find network doctors and health care providers**
- **Get estimates for treatments and procedures**
- **Find what services are covered**
- **Price your medications and explore lower cost options**
- **Print a temporary ID card**
- **View claims and PCA balances**
- **Find ways to get and stay healthier**
- **Learn about health programs and discounts**

Register at **apwuhp.com.**

Mobile app
UnitedHealthcare® app

The UnitedHealthcare app helps you find care, review and manage claims, share your digital health plan ID card and more—all from your mobile device. Plus, you can log in with Touch ID® and video chat with a doctor 24/7.

Download it at the **App Store®** or **Google Play™.**



Virtual Visits

See a doctor 24/7 without leaving home.

Virtual Visits let you video chat with a doctor 24/7 from your mobile device, tablet or computer. Doctors can diagnose a wide range of nonemergency medical and behavioral conditions and prescribe medications, if needed. Simply log in to **myuhc.com** to get started.

Virtual Visits are good for:

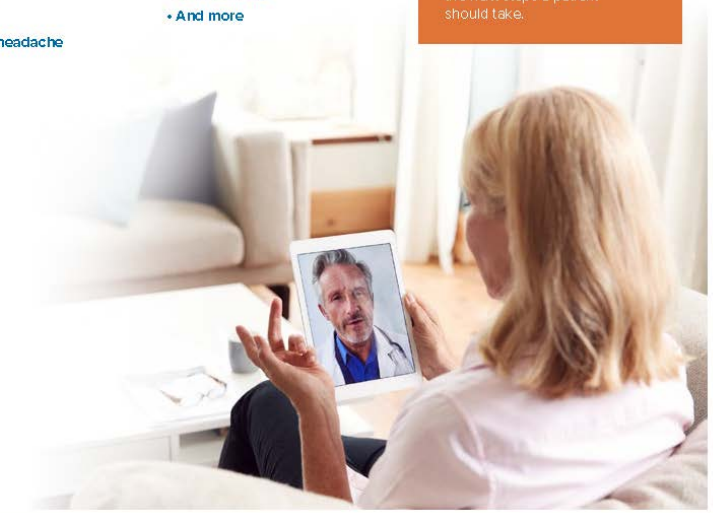
- **Allergies**
- **Behavioral issues**
- **Bladder/urinary tract infection**
- **Bronchitis**
- **Coughing**
- **Diarrhea**
- **Fever**
- **Migraine/headache**
- **Pink eye**
- **Rash**
- **Seasonal flu**
- **Sinus problem**
- **Sore throat**
- **Stomachache**
- **And more**

Save money with Virtual Visits.

Members pay 15% of the plan allowance for Virtual Visits, less than the cost of an in-person office visit.

Need a COVID-19 screening?

Virtual Visits are an ideal way to screen patients who may have symptoms of COVID-19. Board-certified telehealth providers are trained to screen patients, assign risk, answer questions and recommend the next steps a patient should take.



Consumer Driven Option Flyer (pgs 18-19)

Tools and resources

Tools and resources help you make the most of your plan.

Clinical Resources

Nurses are available to help you find providers, answer questions about benefits, assist with ongoing care and educate you about plan resources and programs, including:

- Cancer support
- Maternity support
- Kidney resources
- Decision support
- Wellness coaching
- Tobacco cessation

Find Care & Costs

Conveniently located on **myuhc.com**, this free online tool combines quality provider searches and cost transparency to help you make more educated decisions about care. Cost estimates are based on actual rates, plus your plan and current benefit status.

Rally

Rally is a digital health experience that offers personalized recommendations to help you move more, eat better and feel great. Earn Rally Coins for participating in customized Missions.



After you enroll, to access member resources:

- Go to **apwuhp.com**
- Select the **Already a Member** tab
- Under **CONSUMER DRIVEN OPTION,** select **My Tools**

Enrollment

Enroll now.

Choose the option that works best for you.

Postal Service employees

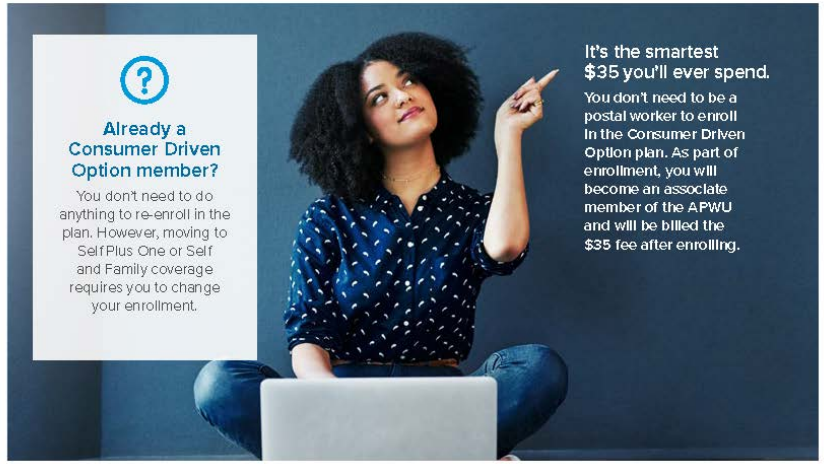
- Call PostalEASE at **877-477-3273**, option 5
- Visit **liteblue.usps.gov**
- Make sure you have your Employee Identification Number and USPS PIN

Postal Service retirees

- Complete the FEHB Health Benefits Election Form (SF2809)
- Visit **apwuhp.com/enroll** to download the form
- Visit **opm.gov/forms/pdf_fill/sf2809.pdf** to download the form

Federal employees and retirees

- Complete the FEHB Health Benefits Election Form (SF2809)
- Pick up the form in your employing office
- Visit **opm.gov/forms/pdf_fill/sf2809.pdf** to download the form
- Ask your agency if you can enroll online or by phone



Already a Consumer Driven Option member?

You don't need to do anything to re-enroll in the plan. However, moving to Self Plus One or Self and Family coverage requires you to change your enrollment.

It's the smartest $35 you'll ever spend.

You don't need to be a postal worker to enroll in the Consumer Driven Option plan. As part of enrollment, you will become an associate member of the APWU and will be billed the $35 fee after enrolling.

Consumer Driven Option Flyer (Back Cover)

Join a plan that gives you more control over how you spend your health care dollars.

The APWU Health Plan has proudly served America's workforce for more than 60 years. We're here to help you get the most from your benefits.

Mark Dimondstein
APWU President

Sarah J. Rodriguez
APWU Health Plan Director

Getting ready to retire?
Now is a good time to start learning about Medicare. Visit **apwuhp.com** to learn more about how the APWU Consumer Driven Option works with Medicare.



Contact us for help.

CONSUMER DRIVEN OPTION
800-718-1299
apwu.welcometouhc.com

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

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

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 (R171-004).

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.

App Store is a secure mark of Apple Inc. Google Play is a registered trademark of Google LLC.

Virtual Visits are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times or in all locations. Certain prescriptions may not be available, and other restrictions may apply. Data rates may apply. The Designated Virtual Visit Provider's reduced rate for a virtual visit is subject to change at any time.

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APWU HEALTH PLAN

TOGETHER. BETTER HEALTH.

APWU Postal Poster



Communication Strategy

Call the Open Season Hotline for more information at **800-PIC-APWU**.

Email general Open Season questions to: **virtualopenseason@apwuhp.com**

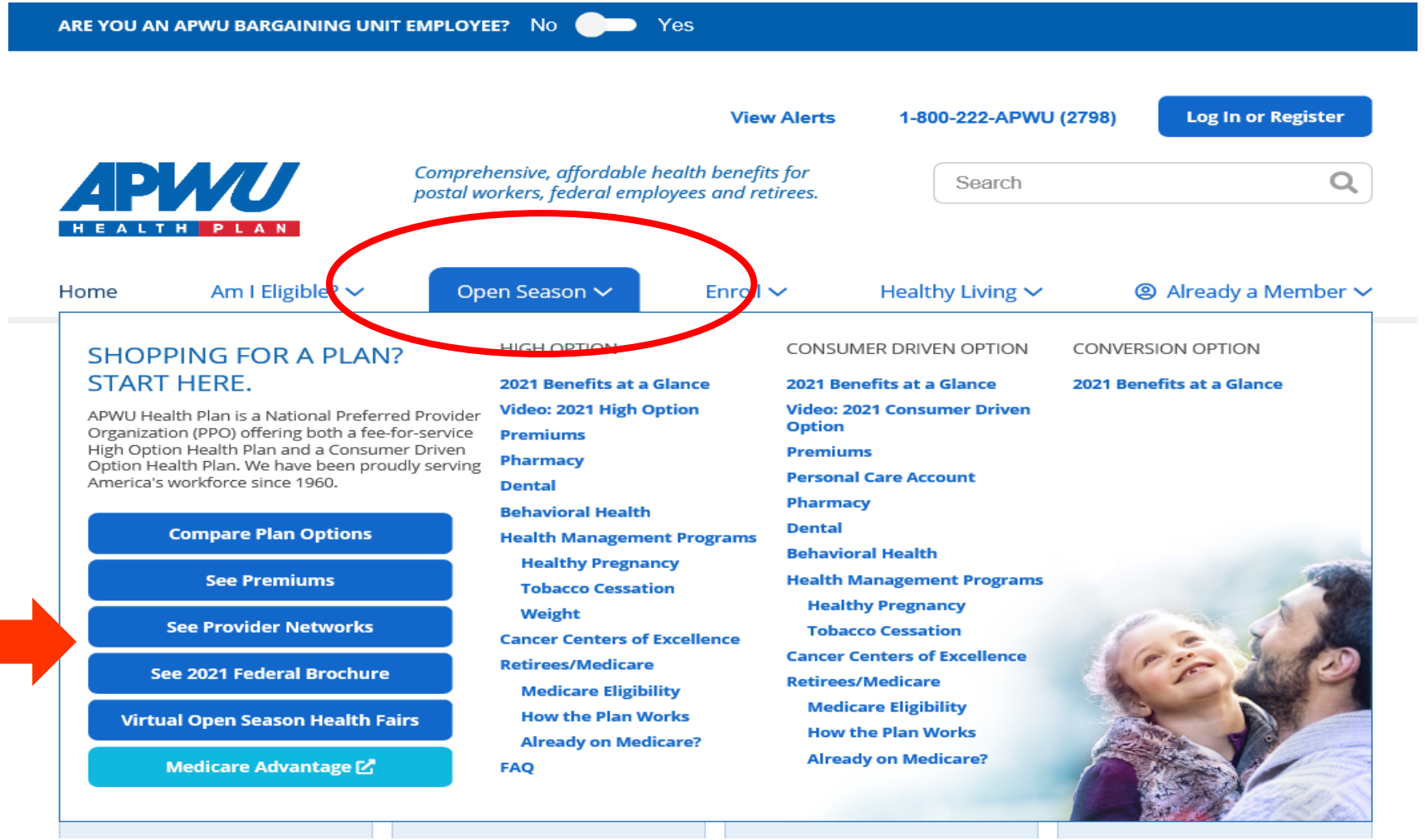
Go to: **www.apwuhp.com** and click on Open Season

- 2021 rates
- Directory
- Brochure
- Informational videos
- Links to Medicare Advantage, Behavioral Health, MYUHC, MYAPWU

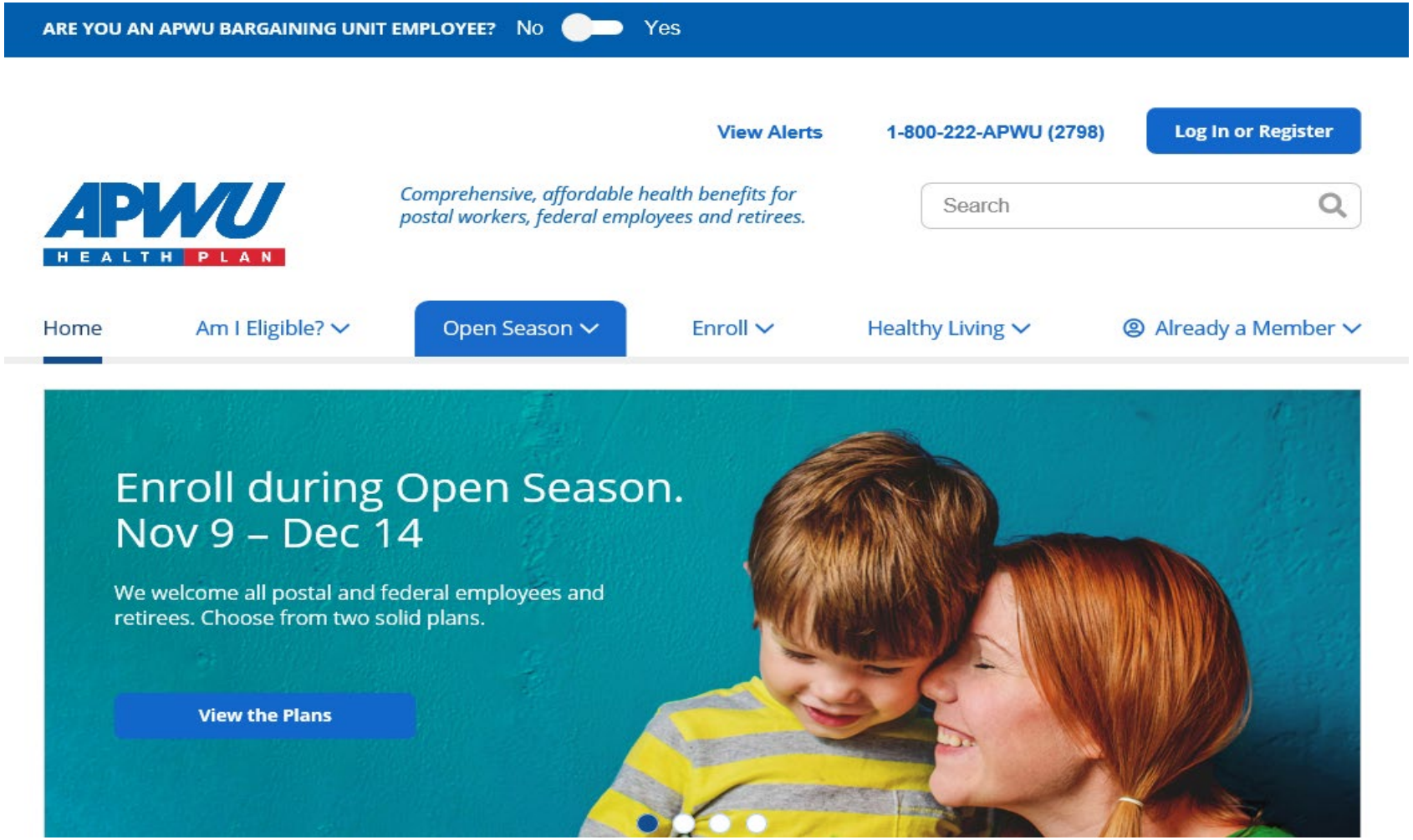
Join our virtual Open Season Health Fairs every Tuesday and Thursday during Open Season at: **https://www.cvent.com/d/h7q0kp/4W**



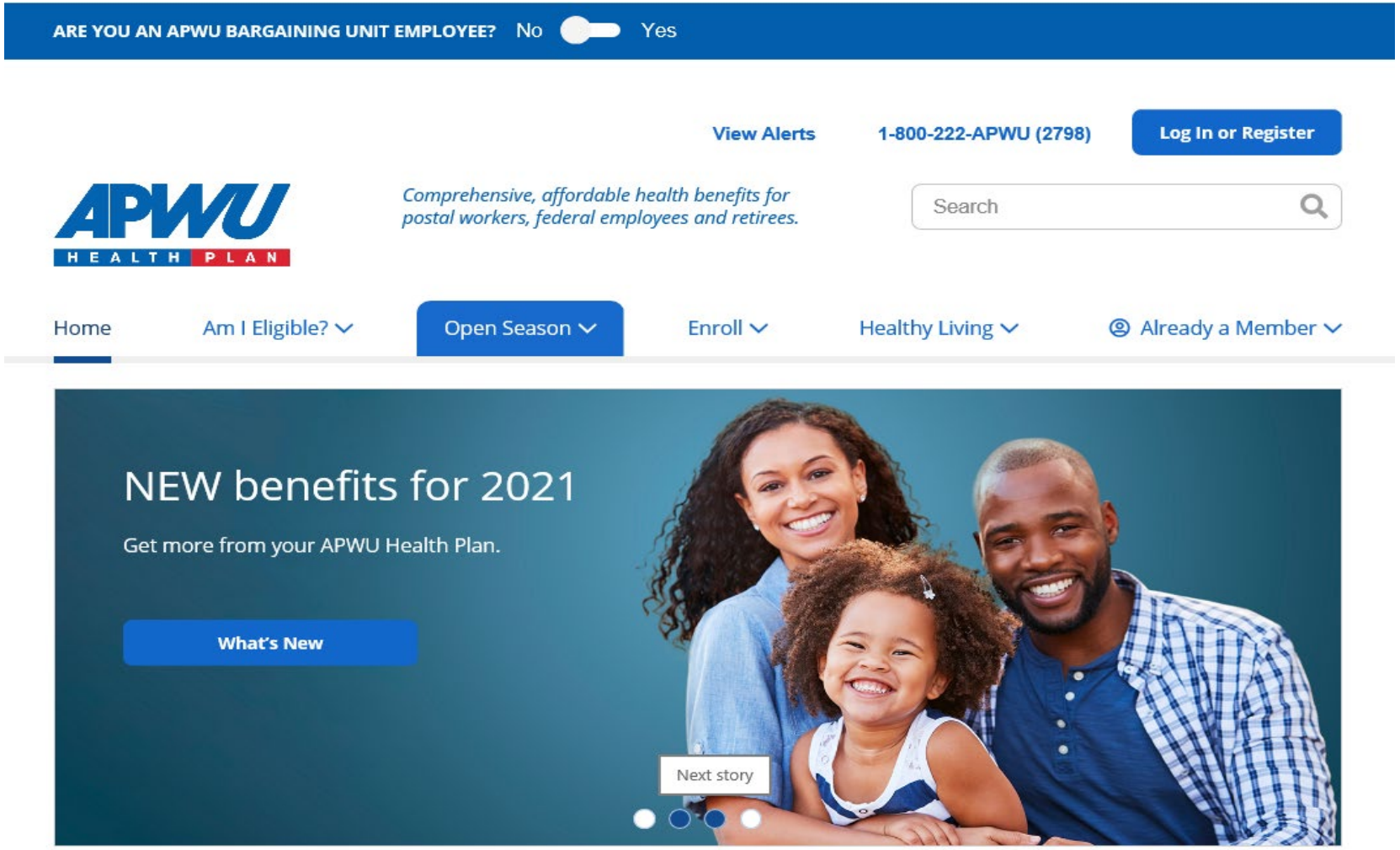
Open Season Page - www.apwuhp.com



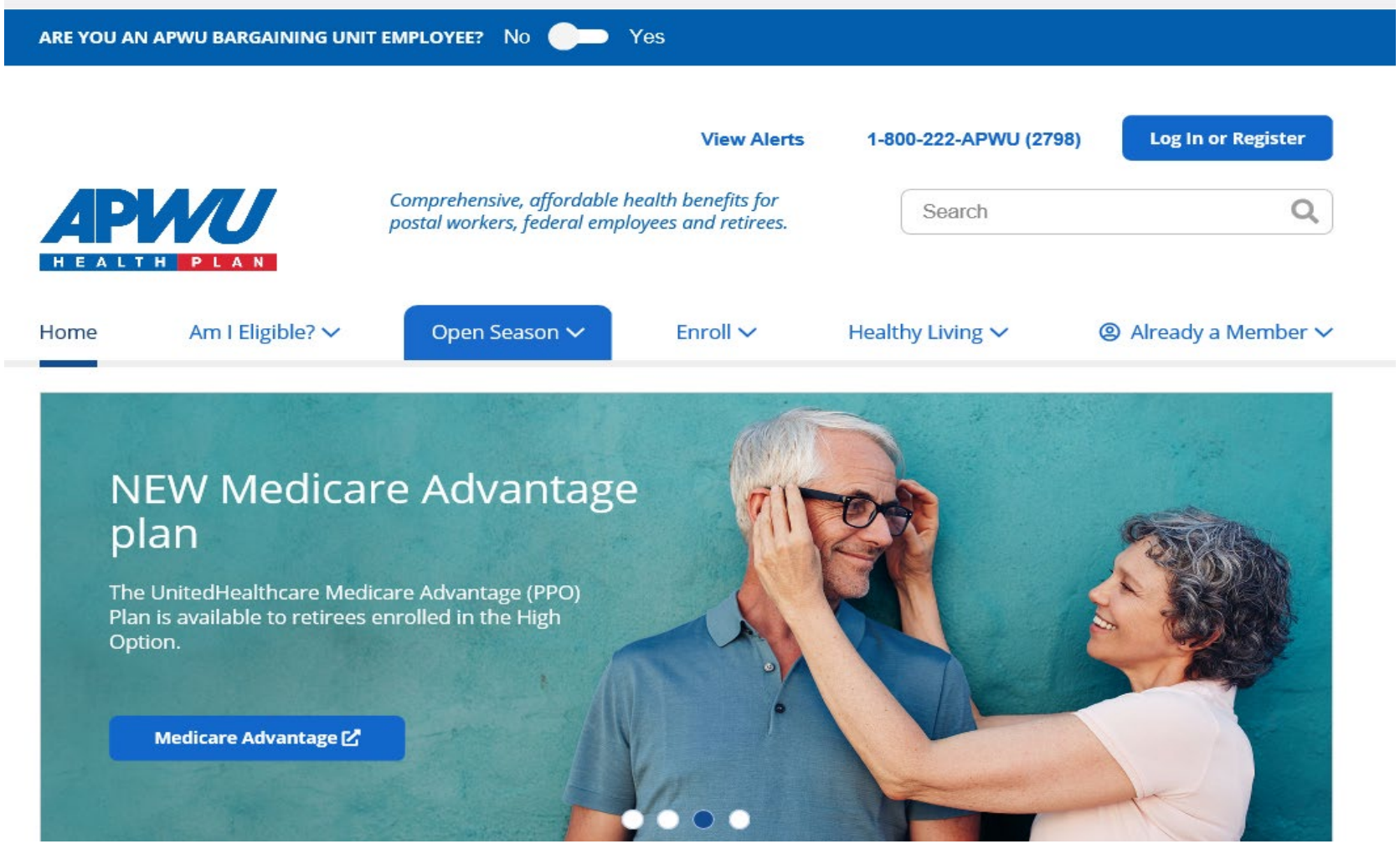
Open Season - Enroll



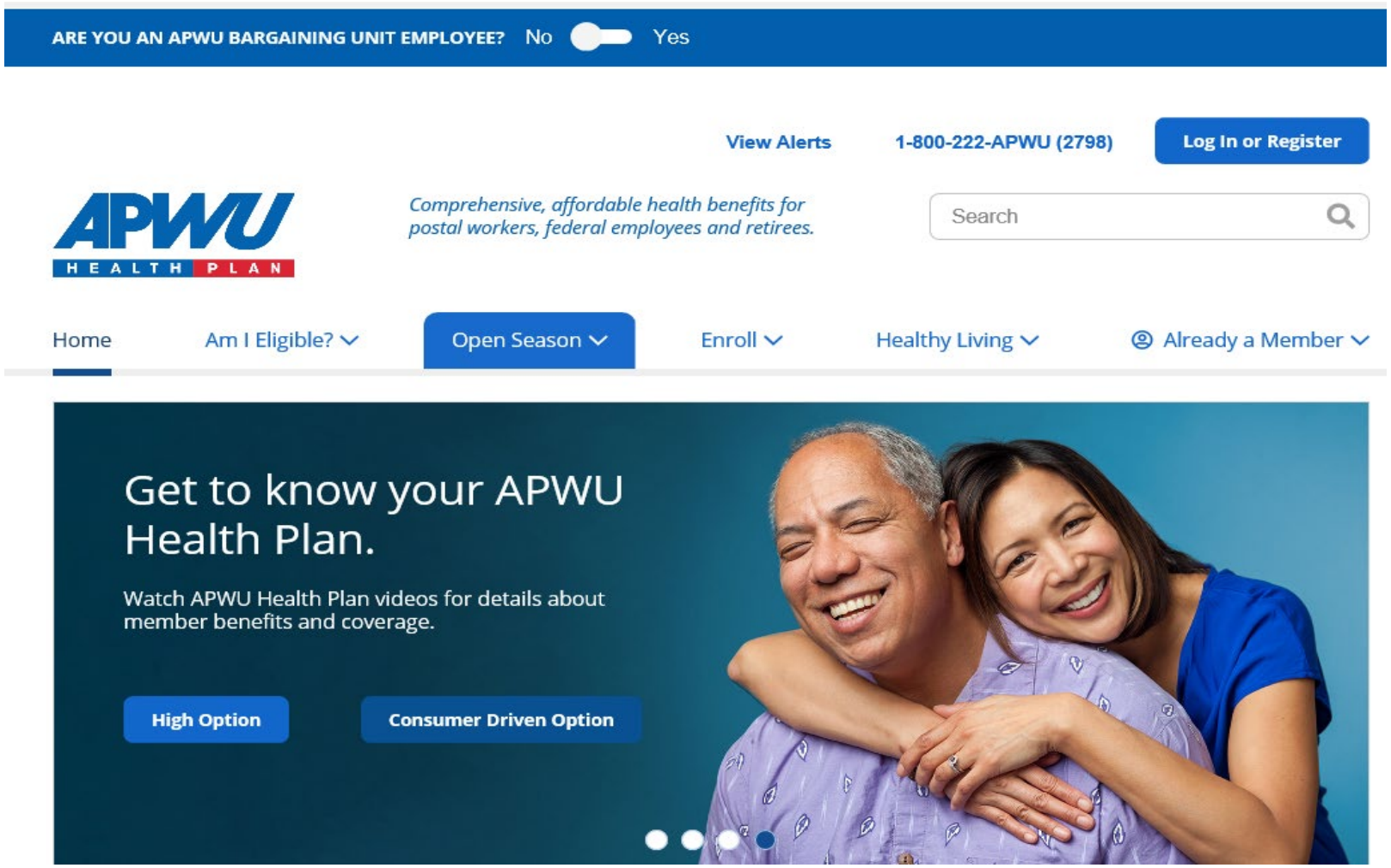
Open Season – What's New



Open Season – Medicare Advantage



Open Season - Videos



35th Annual Open Season Seminar

TOGETHER.
BETTER HEALTH.®

Questions for Closing Session

Email any questions to: **closingsessionquestions@apwuhp.com**.

You will receive an email following our Seminar with a link to fill out your class evaluations online.

THANK YOU!

