APWU HEALTH PLAN
TOGETHER. BETTER HEALTH.

Marketing Plus



Presented by

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and

Kenneth Williams

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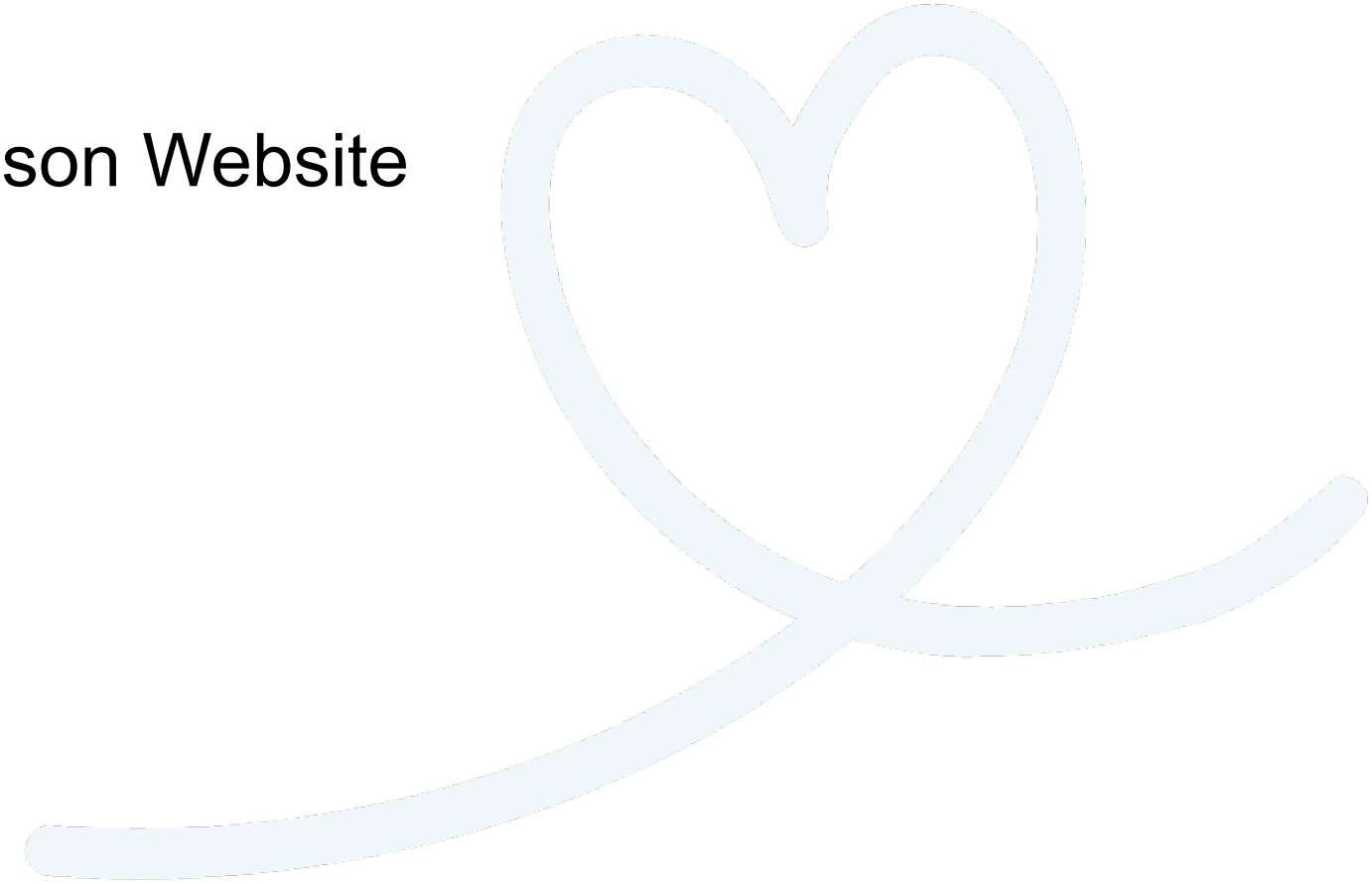
Today's Agenda – Marketing Materials

- Premiums
- Flyers
- Open Season Website



2022 Rate Information and Premiums



Rate Information – 2022 Brochure

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.

APWU rates apply to career Postal employees represented by APWU.

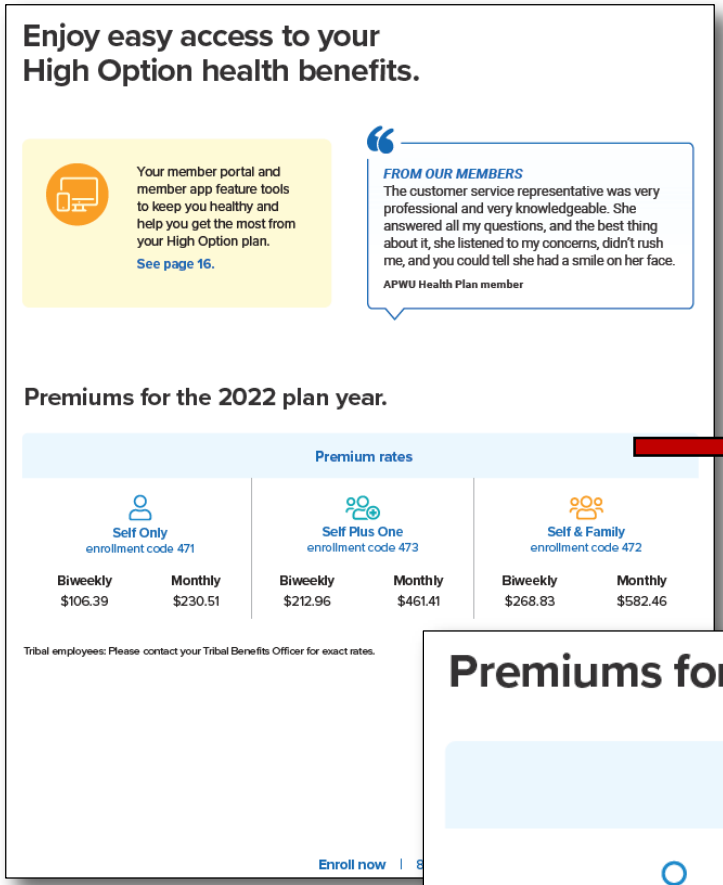
Premiums for Tribal employees are shown under the Monthly Premium Rate column. The amount shown under employee contribution is the maximum you will pay. Your Tribal employer may choose to contribute a higher portion of your premium. Please contact your Tribal Benefits Officer for exact rates.

(This information above is located on the back cover of the Brochure)

Premiums – 2022 Brochure

Type of Enrollment	Enrollment Code	Biweekly Gov't Share	Biweekly Your Share	Monthly Gov't Share	Monthly Your Share	Biweekly APWU Your Share
High Option Self Only	471	$244.86	$106.39	$530.53	$230.51	$106.39
High Option Self Plus One	473	$524.63	$212.96	$1,136.70	$461.41	$212.96
High Option Self and Family	472	$574.13	$268.83	$1,243.95	$582.46	$268.83
CDHP Option Self Only	474	$208.96	$69.65	$452.75	$150.91	$13.93
CDHP Option Self Plus One	476	$454.15	$151.38	$983.99	$327.99	$30.28
CDHP Option Self and Family	475	$495.44	$165.14	$1,073.45	$357.81	$33.03

High Option Premiums



Your member portal and member app feature tools to keep you healthy and help you get the most from your High Option plan.

See page 16.

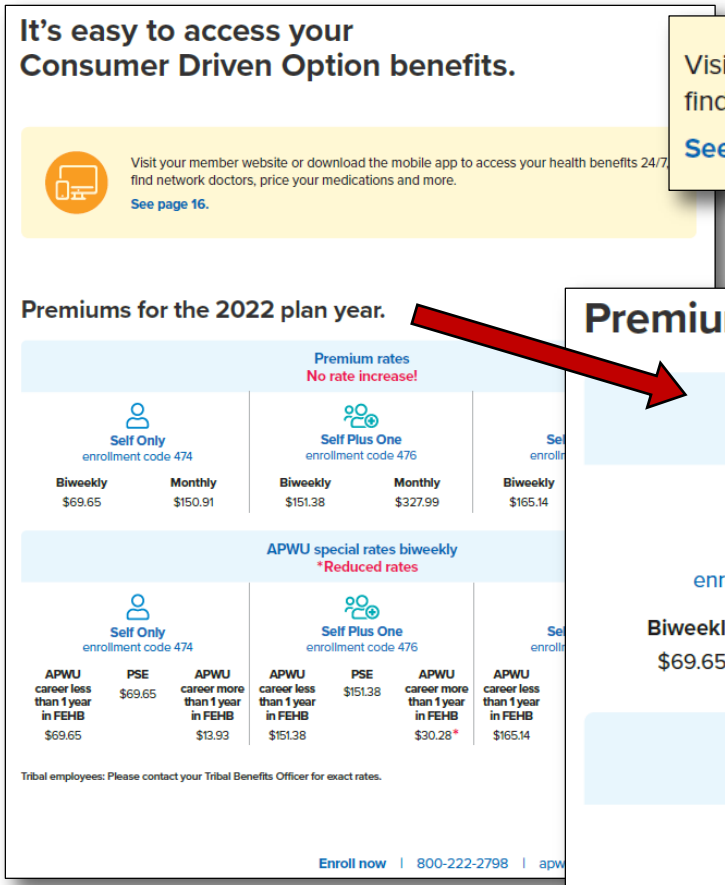
Premiums for the 2022 plan year.

Premium rates

Self Only enrollment code 471		Self Plus One enrollment code 473		Self & Family enrollment code 472	
Biweekly	**Monthly**	**Biweekly**	**Monthly**	**Biweekly**	**Monthly**
$106.39	$230.51	$212.96	$461.41	$268.83	$582.46

Tribal employees: Please contact your Tribal Benefits Officer for exact rates.

Consumer Driven Option Premiums



Visit your member website or download the mobile app to access your health benefits 24/7, find network doctors, price your medications and more.

See page 16.

Premiums for the 2022 plan year.

Premium rates
No rate increase!

Self Only, enrollment code 474		Self Plus One, enrollment code 476		Self & Family, enrollment code 475	
Biweekly	Monthly	Biweekly	Monthly	Biweekly	Monthly
$69.65	$150.91	$151.38	$327.99	$165.14	$357.81

APWU special rates biweekly
***Reduced rates**

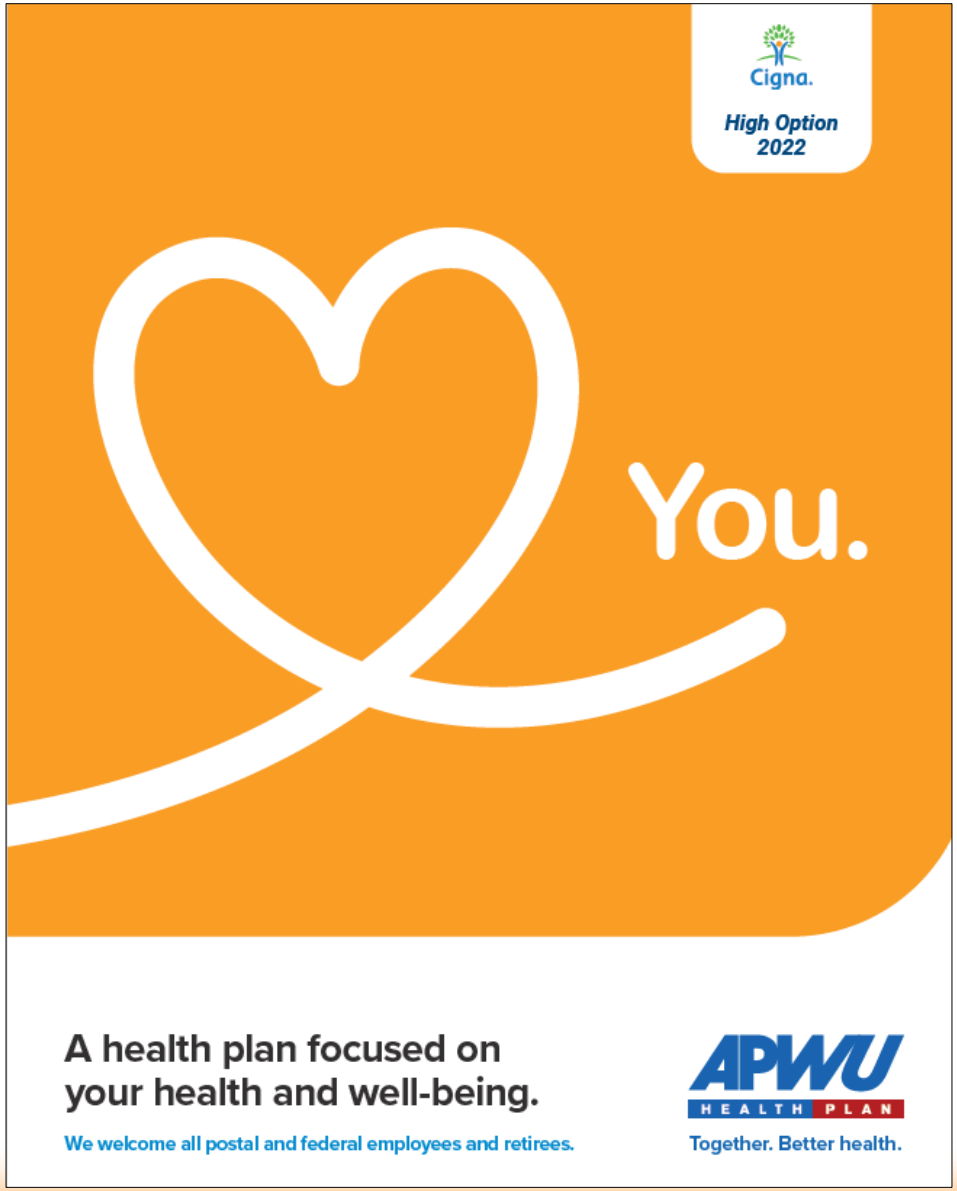
Self Only, enrollment code 474			Self Plus One, enrollment code 476			Self & Family, enrollment code 475		
APWU career less than 1 year in FEHB	PSE	APWU career more than 1 year in FEHB	APWU career less than 1 year in FEHB	PSE	APWU career more than 1 year in FEHB	APWU career less than 1 year in FEHB	PSE	APWU career more than 1 year in FEHB
$69.65	$69.65	$13.93	$151.38	$151.38	$30.28*	$165.14	$165.14	$33.03*

Tribal employees: Please contact your Tribal Benefits Officer for exact rates.

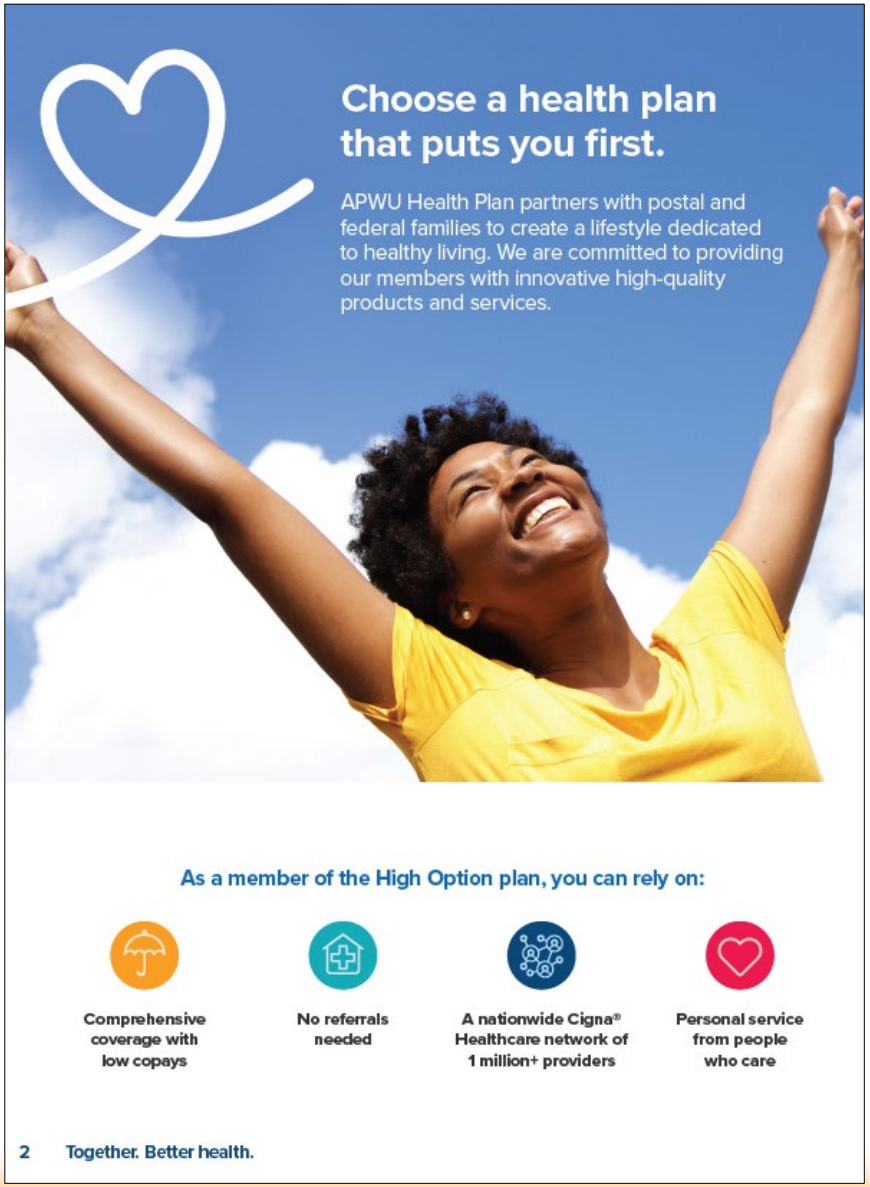
High Option and Consumer Driven Option Flyers



High Option Flyer - Cover



High Option Flyer – Pgs. 2-3





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 one million healthcare providers, with no need for referrals. Cigna negotiates rates with providers, which means you can save money when you use network doctors.

Cigna.

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.

New Cigna Care and Costs Directory

Find quality in-network health providers near you and estimate the costs of care before you go to the doctor.

After you enroll, to access the directory:

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

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 healthcare costs** by finding network providers and other cost-saving health support.

Medicare Advantage

Enroll in a Medicare Advantage plan that provides added benefits and reduced costs to High Option members.

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 valuable benefits and programs.

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

NurseLine[2]
Access a registered nurse 24/7.

UnitedHealthcare HouseCalls[3]
Get an annual in-home preventive care visit 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 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 healthcare 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

2022 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.)
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)	$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
Maternity		
Physician and hospital care	$0	n/a

Cigna Features the Cigna Healthcare provider network

2022 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.)
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 (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)	$1,500 allowance (must use UnitedHealthcare network)
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



Protect your health and well-being with 100% covered services.

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

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% coverage and preventive care

100% covered in-network

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. 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.

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.

COVID-19 vaccines are safe, effective and free.

Getting vaccinated is the best way to protect yourself from COVID-19. And the vaccine can help keep you from getting seriously ill if you get infected.

Visit **apwuhp.com** to learn how to get your COVID-19 vaccine.

High Option Flyer – Pgs. 10-11

Pharmacy

The plan covers prescriptions with no deductible and low copays.

EXPRESS SCRIPTS®

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 with the Express Scripts *Smart90*® program.

Making monthly trips to the pharmacy can be 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.

Get connected to savings.

Discover more ways to save money on your prescriptions:

- Access lower-cost drug options
- Find a network pharmacy near you
- Compare prices for short- and long-term medications

Create an online profile at **express-scripts.com** or download the **Express Scripts mobile app.**

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 and non-Insulin drugs to treat diabetes**
- **$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 2022 prescription drug coverage.

	In-network (PPO) you pay	Out-of-network you pay
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

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

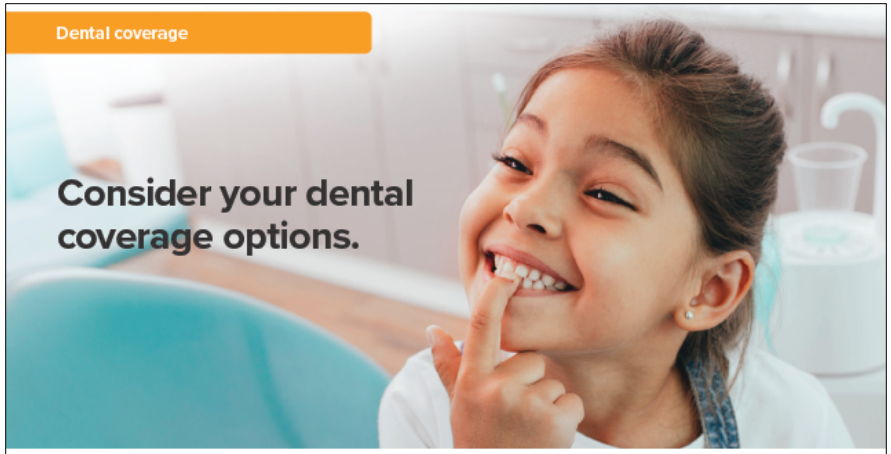
FROM OUR MEMBERS

I'm new to the APWU Health Plan. The customer service rep was wonderful—polite, positive, cheerful and friendly. She understood my questions, gave me plenty of time to ask them and didn't talk over me. It was an all-around really good experience.

APWU Health Plan member

High Option Flyer – Pgs. 12-13

Dental coverage



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**
- Or call **1-800-307-8615**

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)

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

Use any dentist you choose.

If you were a member of a dental plan that made you use a specific dentist, you may continue to use that dentist, but it's not required.

Who is eligible to enroll?

Postal workers: All APWU members in good standing, including active workers, PSEs who work at least 20 hours a week and retirees.

Federal workers: All federal employees are eligible—you don't have to be a postal worker. If you are eligible for FEHB, you can enroll in the dental plan. As part of your enrollment, you will be billed a $35 fee to become an associate member of the APWU.

Eligible dependents: These include lawful spouses or domestic partners and any unmarried dependent children you support up to age 26, subject to state variations.

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 well-being, 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

We're here for you 24/7.

Call **800-582-1314** anytime, any day, for immediate help. Behavioral clinicians are available to provide crisis support.

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

The copay for a virtual visit through Amwell is just $15.

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

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.

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.





Start your journey to better hearing.

Supplement your High Option plan benefits with Start Hearing. There's no additional premium, and you'll get a free hearing consultation and a discount on hearing aids.

Call **888-863-7222**
Visit **starthearing.com/partners/apwu**

START HEARING

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:

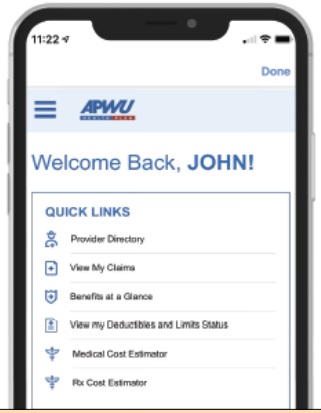
- Access deductibles, copays and maximums
- Check the provider network to find a doctor
- Print or request an ID card
- View or print claims and authorizations
- Review your personal health summary
- See benefit and eligibility information
- View and download the plan brochure
- Read industry-leading 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 through Amwell.

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.

Plan ahead for your virtual visit.

- Decide what device you'll use—desktop computer, laptop, smartphone or tablet.
- Make sure you have a reliable internet connection.
- Create an account on **amwell.com** ahead of time so you're ready for your visit.
- Choose a quiet, private place.
- Gather details about your medical history, including any medications you take.
- Write down important questions you have for the doctor.

Call 911 immediately or go to the nearest emergency room if you believe you are experiencing a medical emergency.



High Option Flyer – Pgs. 18-19

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 Advisor
Estimate the costs of care ahead of time.

Enroll today.

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

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.

Already a High Option member?

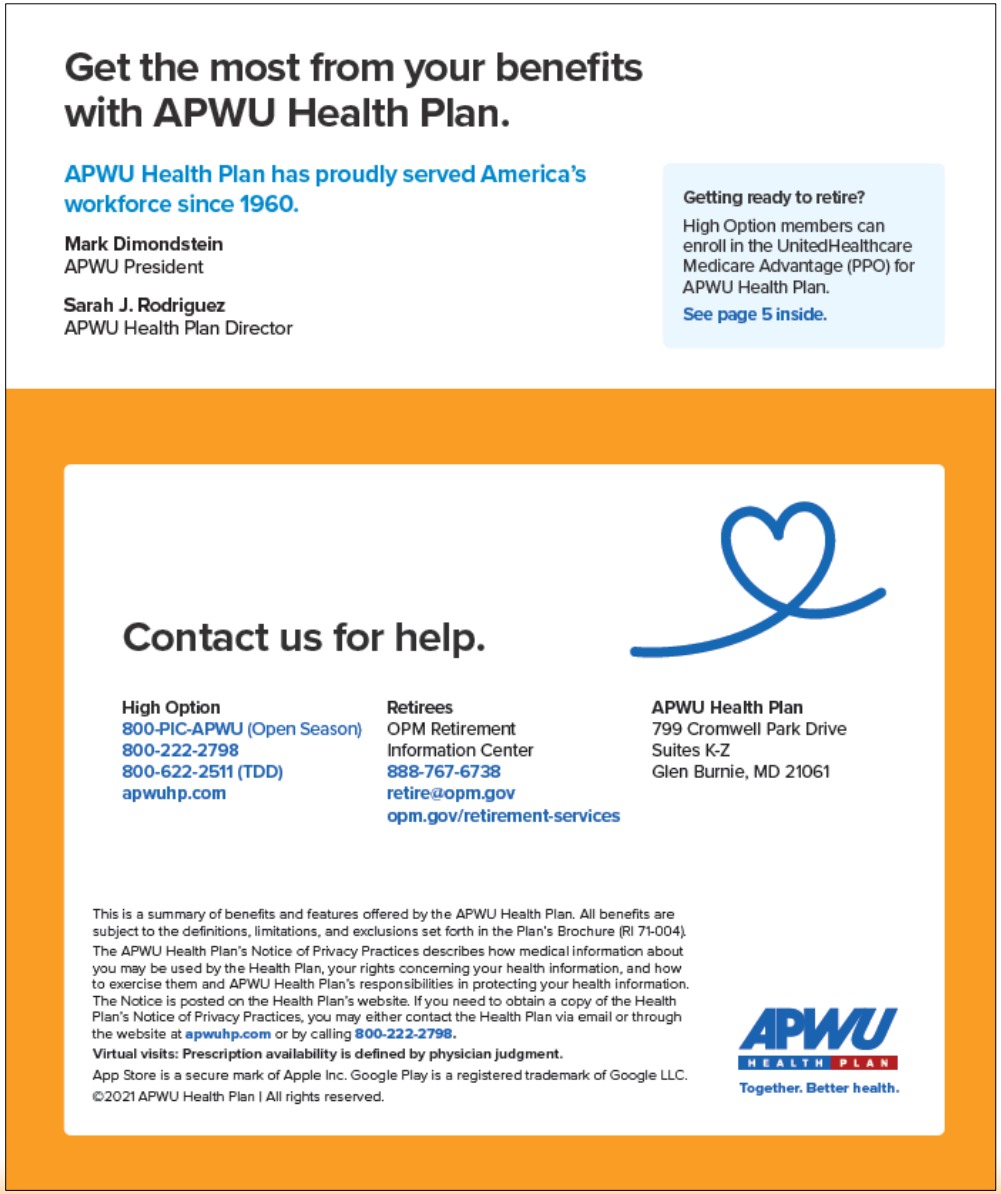
You will automatically be re-enrolled in the plan. However, moving to Self Plus One or Self and Family coverage requires you to change your enrollment.

FROM OUR MEMBERS

The customer service representative was very friendly, very helpful, and she was able to make it easy for me to understand what was going on with my claims.

APWU Health Plan member

High Option Flyer – Back Cover



Get the most from your benefits with APWU Health Plan.

APWU Health Plan has proudly served America's workforce since 1960.

Mark Dimondstein
APWU President

Sarah J. Rodriguez
APWU Health Plan Director

Getting ready to retire?
High Option members can enroll in the UnitedHealthcare Medicare Advantage (PPO) for APWU Health Plan.
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

APWU Health Plan
799 Cromwell Park Drive
Suites 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.

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

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APWU HEALTH PLAN
Together. Better health.

Consumer Driven Option Flyer - Cover



Consumer Driven Option Flyer – Pgs. 2-3



Live life to the fullest with a health plan that supports you every step of the way.

APWU Health Plan partners with postal and federal families to create a lifestyle dedicated to healthy living. We are committed to providing our members with innovative high-quality products and services.

The Consumer Driven Option is a proactive alternative to conventional healthcare that can save you money. The plan features:

- **Your own Personal Care Account (PCA) to pay for medical expenses**
- **Affordable premiums and comprehensive coverage**
- **Nationwide UnitedHealthcare network of 1 million+ providers**
- **No referrals needed**

It's easy to access your Consumer Driven Option benefits.

Visit your member website or download the mobile app to access your health benefits 24/7, find network doctors, price your medications and more.

See page 16.

Premiums for the 2022 plan year.

Premium rates
No rate increase!

Self Only (enrollment code 474)		Self Plus One (enrollment code 476)		Self & Family (enrollment code 475)	
Biweekly	**Monthly**	**Biweekly**	**Monthly**	**Biweekly**	**Monthly**
$69.65	$150.91	$151.38	$327.99	$165.14	$357.81

APWU special rates biweekly
***Reduced rates**

Self Only (enrollment code 474)			Self Plus One (enrollment code 476)			Self & Family (enrollment code 475)		
APWU career less than 1 year in FEHB	**PSE**	**APWU career more than 1 year in FEHB**	**APWU career less than 1 year in FEHB**	**PSE**	**APWU career more than 1 year in FEHB**	**APWU career less than 1 year in FEHB**	**PSE**	**APWU career more than 1 year in FEHB**
$69.65	$69.65	$13.93	$151.38	$151.38	$30.28*	$165.14	$165.14	$33.03*

Tribal employees: Please contact your Tribal Benefits Officer for exact rates.

Consumer Driven Option Flyer – Pgs. 4-5

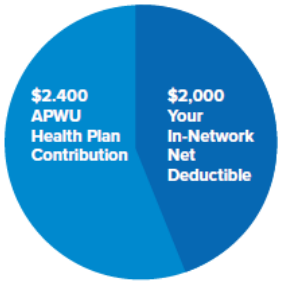
A Personal Care Account is an easy way to reduce your expenses.

The Consumer Driven Option provides a flexible alternative to conventional health plans. The Personal Care Account (PCA) helps cover your healthcare 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.

Your PCA covers 100% of all covered healthcare expenses.

The Consumer Driven Option features a PCA that covers your healthcare 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 (up to $400 for Self Only and $800 Self Plus One and Self and Family)**
- ✔ **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 to the next year, as long as you stay enrolled in this plan. The maximum amount allowed in your PCA balance in any given year is $5,000 Self Only enrollment and $10,000 Self Plus One and Self and Family enrollment.

How your PCA works

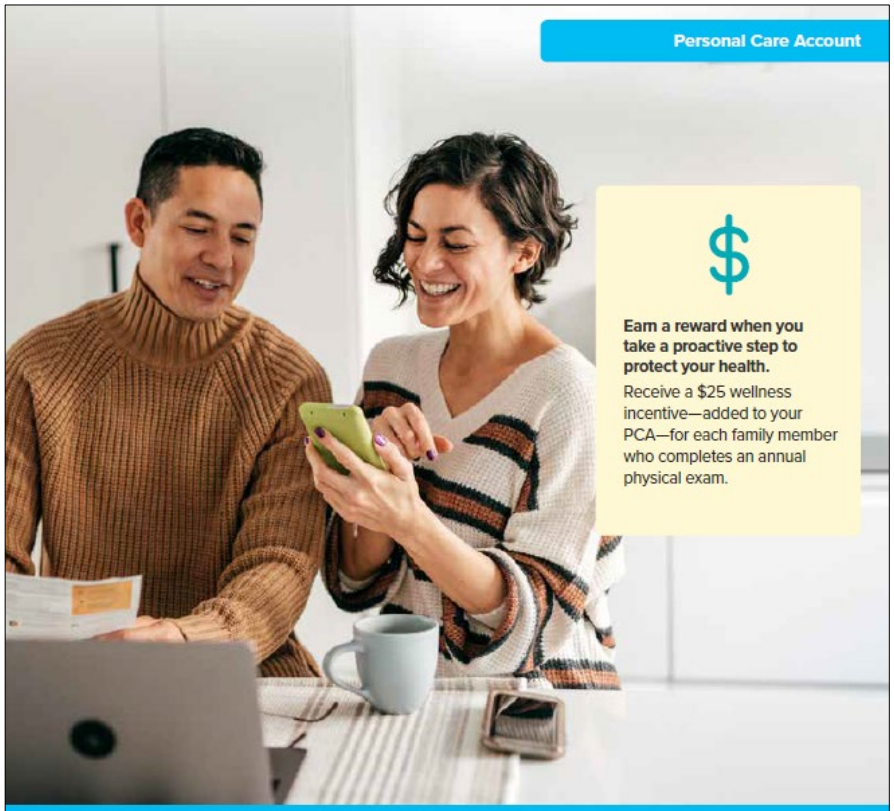
1. Your full PCA balance is available in January. Use your PCA for any eligible expenses.
2. If you use up your PCA funds, you need to satisfy your annual net deductible.
3. After you satisfy the annual plan deductible, you pay coinsurance—a percentage of the cost of covered healthcare—and the plan pays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

Consumer Driven Option Flyer – Pgs. 6-7

Personal Care Account

Find answers to your questions about your Personal Care Account (PCA).

Question	PCA
What is it?	It's a health reimbursement account to help you pay for covered healthcare 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. 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.
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.
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 healthcare 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 healthcare FSA and dependent care FSA.
If I receive COBRA benefits, do COBRA rights apply to it?	Yes.



Earn a reward when you take a proactive step to protect your health.
Receive a $25 wellness incentive—added to your PCA—for each family member who completes an annual physical exam.

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 coverage

Consumer Driven Option

A proactive alternative to conventional health plans

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	Self Plus One	Self and Family
$1,200	$2,400	$2,400



United Healthcare

UnitedHealthcare administers the Consumer Driven Option.

Consumer Driven Option coverage

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 for each family member who 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 healthcare service)
Maternity	
Complete maternity care, including prenatal, delivery, postnatal 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 Air ambulance	15% of plan allowance 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%

Consumer Driven Option Flyer – Pgs. 10-11

100% coverage and preventive care



Protect your health and well-being with 100% covered services.

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

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 healthcare 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.

United Healthcare

100% coverage and preventive care

100% covered in-network

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
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. 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.

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
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.

Receive a $25 wellness incentive—added to your PCA—for each family member who completes an annual physical exam.

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

COVID-19 vaccines are safe, effective and free.

Getting vaccinated is the best way to protect yourself from COVID-19. And the vaccine can help keep you from getting seriously ill if you get infected.

Visit **apwuhp.com** to learn how to get your COVID-19 vaccine.

Consumer Driven Option Flyer – Pgs. 12-13

Pharmacy

Your PCA covers the cost of prescription drugs.



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®

Receive a discount when you use the OptumRx® Home Delivery.

Consumer Driven Option 2022 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

Behavioral health, vision and hearing

Get back to being you with Behavioral Health Solutions.

To help you feel better and more in control of your emotional well-being, 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.

Protect your vision and hearing.

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

Start your journey to better hearing.

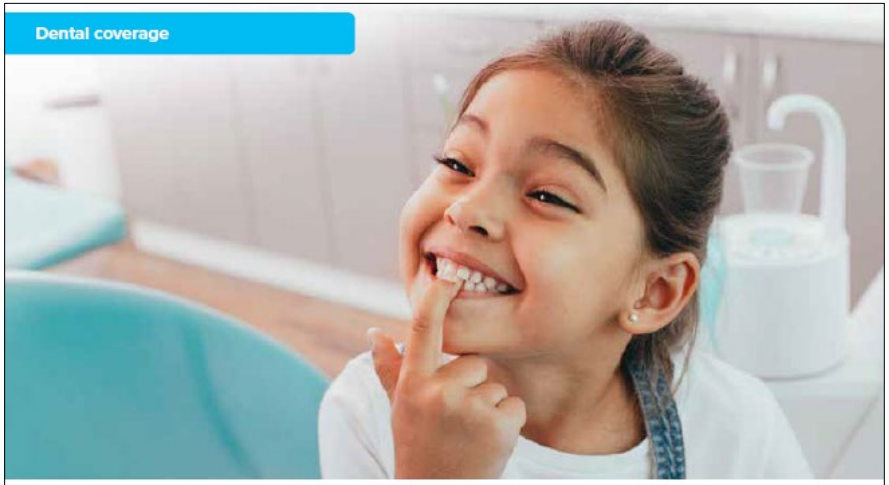
Supplement your Consumer Driven Option plan benefits with no additional premium and get a free hearing consultation and a discount on hearing aids.

START HEARING

Call **888-863-7222**
Visit **starthearing.com/partners/apwu**



Consumer Driven Option Flyer – Pgs. 14-15



Consider your dental coverage options.

1 **As a Consumer Driven Option member, you can pay for eligible dental expenses from your PCA (up to $400 for Self Only and $800 Self Plus One and Self and Family) 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**
- Or call **800-307-8615**

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)

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

Use any dentist you choose.

If you were a member of a dental plan that made you use a specific dentist, you may continue to use that dentist, but it's not required.

Who is eligible to enroll?

Postal workers: All APWU members in good standing, including active workers, PSEs who work at least 20 hours a week and retirees.

Federal workers: All federal employees are eligible—you don't have to be a postal worker. If you are eligible for FEHB, you can enroll in the dental plan. As part of your enrollment, you will be billed a $35 fee to become an associate member of the APWU.

Eligible dependents: These include lawful spouses or domestic partners and any unmarried dependent children you support up to age 26, subject to state variations.

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:

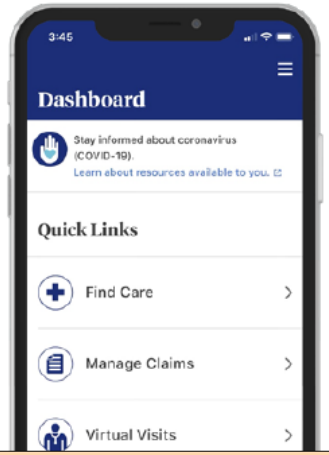
- **Find network doctors and healthcare providers**
- **Get estimates for treatments and procedures**
- **Find what services are covered**
- **Price your medications and explore lower cost options**
- **Print a temporary ID card**
- **View claims and PCA balances**
- **Find ways to get and stay healthier**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

Plan ahead for your Virtual Visit.

- Decide what device you'll use—desktop computer, laptop, smartphone or tablet.
- Make sure you have a reliable internet connection.
- Choose a quiet, private place.
- Gather details about your medical history, including any medications you take.
- Write down important questions you have for the doctor.

Call 911 immediately or go to the nearest emergency room if you believe you are experiencing a medical emergency.



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.

AbleTo

Access behavioral coaching and personalized therapy.

AbleTo provides virtual support for the depression, anxiety and stress that typically may accompany health issues, such as cardiac conditions, diabetes, chronic pain and cancer. AbleTo engages members in both behavioral coaching and personalized therapy, via phone or video, twice a week for up to 8 weeks.

The program:

- Identifies high-risk members early
- Connects one-on-one with members in need
- Personalizes care delivery
- Treats behavioral health using a holistic approach

AbleTo's virtual behavior therapy and coaching has demonstrated improvements across behavioral and medical outcomes.

Log in to **myuhc.com** to get started.

Consumer Driven Option Flyer – Pgs. 18-19

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**
- ✔ **Nutritional home delivery meal service**

After you enroll, to access member resources:

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

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.

NEW! Real Appeal®

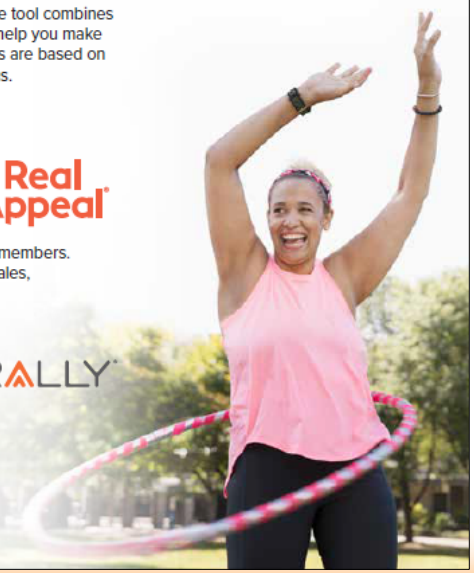
Real Appeal is a 52-week weight management program delivered by a virtual coach. Lose weight and feel great by taking small steps that provide lasting change. Stay focused on your goals with online group sessions led by coaches, while being part of a caring community of members. You'll receive a Success Kit with weight and food scales, exercise tools, food guides and more.

Real Appeal®

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.

RALLY®



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 **apwuhp.com/enroll** to download the form
- Visit **opm.gov/forms/pdf_fill/sf2809.pdf** to download the form
- Ask your agency if you can enroll online or by phone

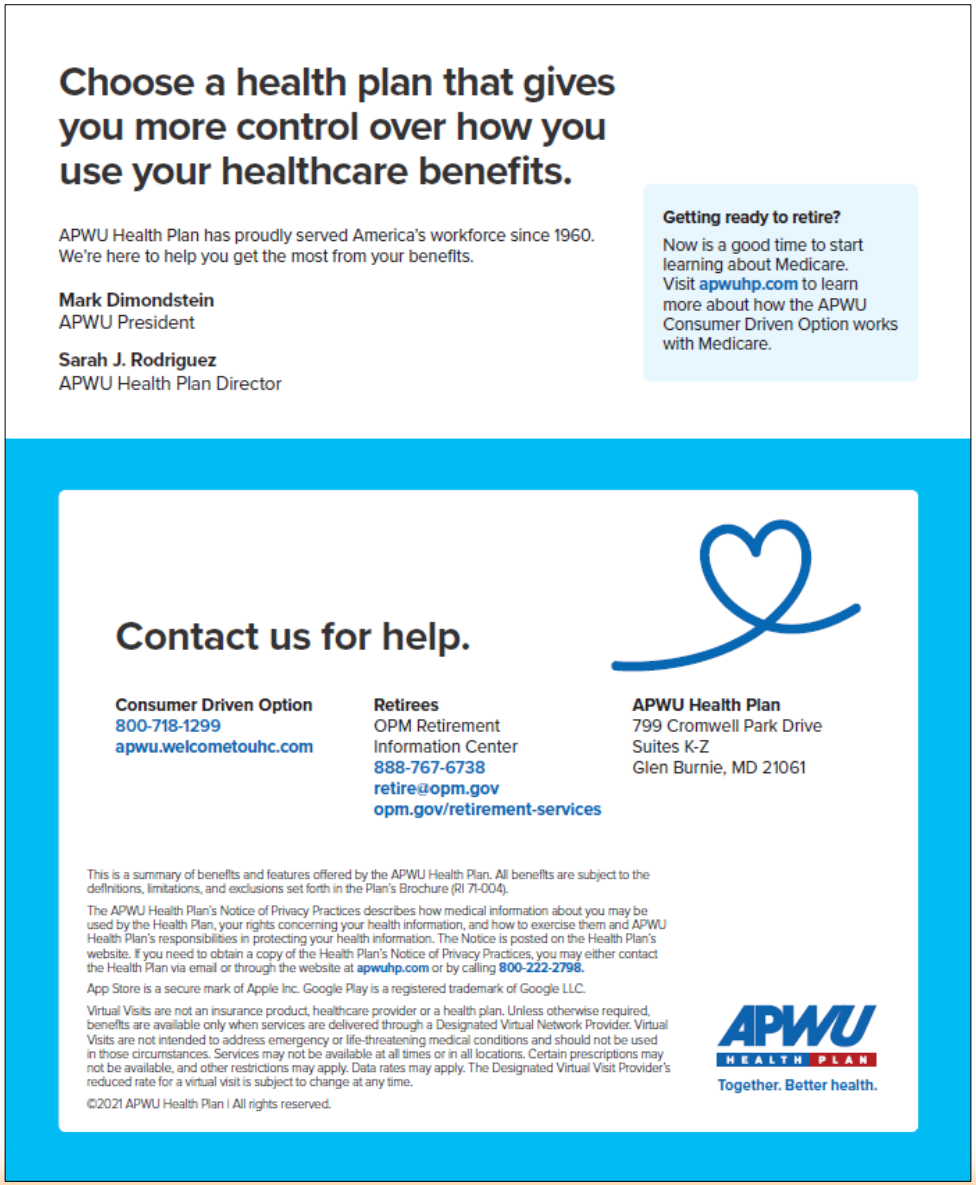
Already a Consumer Driven Option member?

You will automatically be re-enrolled 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



Choose a health plan that gives you more control over how you use your healthcare benefits.

APWU Health Plan has proudly served America's workforce since 1960. 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

APWU Health Plan
799 Cromwell Park Drive
Suites 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.**

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, healthcare 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.

Open Season Page www.apwuhp.com

APWU HEALTH PLAN

Comprehensive, affordable health benefits for postal workers, federal employees and retirees.

Search

Home | Am I Eligible? | Become a Member | Enroll | Healthy Living | Already a Member

SHOPPING FOR A PLAN? START HERE.

APWU Health Plan is a National Preferred Provider Organization (PPO) offering both a fee-for-service High Option Health Plan and a Consumer Driven Option Health Plan. We have been proudly serving America's workforce since 1960.

- Compare Plan Options
- See Premiums
- See Provider Networks
- See 2021 Federal Brochure
- Virtual Open Season Health Fairs
- Medicare Advantage

HIGH OPTION

- 2021 Benefits at a Glance
- Video: 2021 High Option
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  - Healthy Pregnancy
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CONVERSION OPTION

- 2021 Benefits at a Glance



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!

APWU HEALTH PLAN
TOGETHER. BETTER HEALTH.