

OPM.GOV

Presented by

Sharon Morehead

APWU HEALTH PLAN

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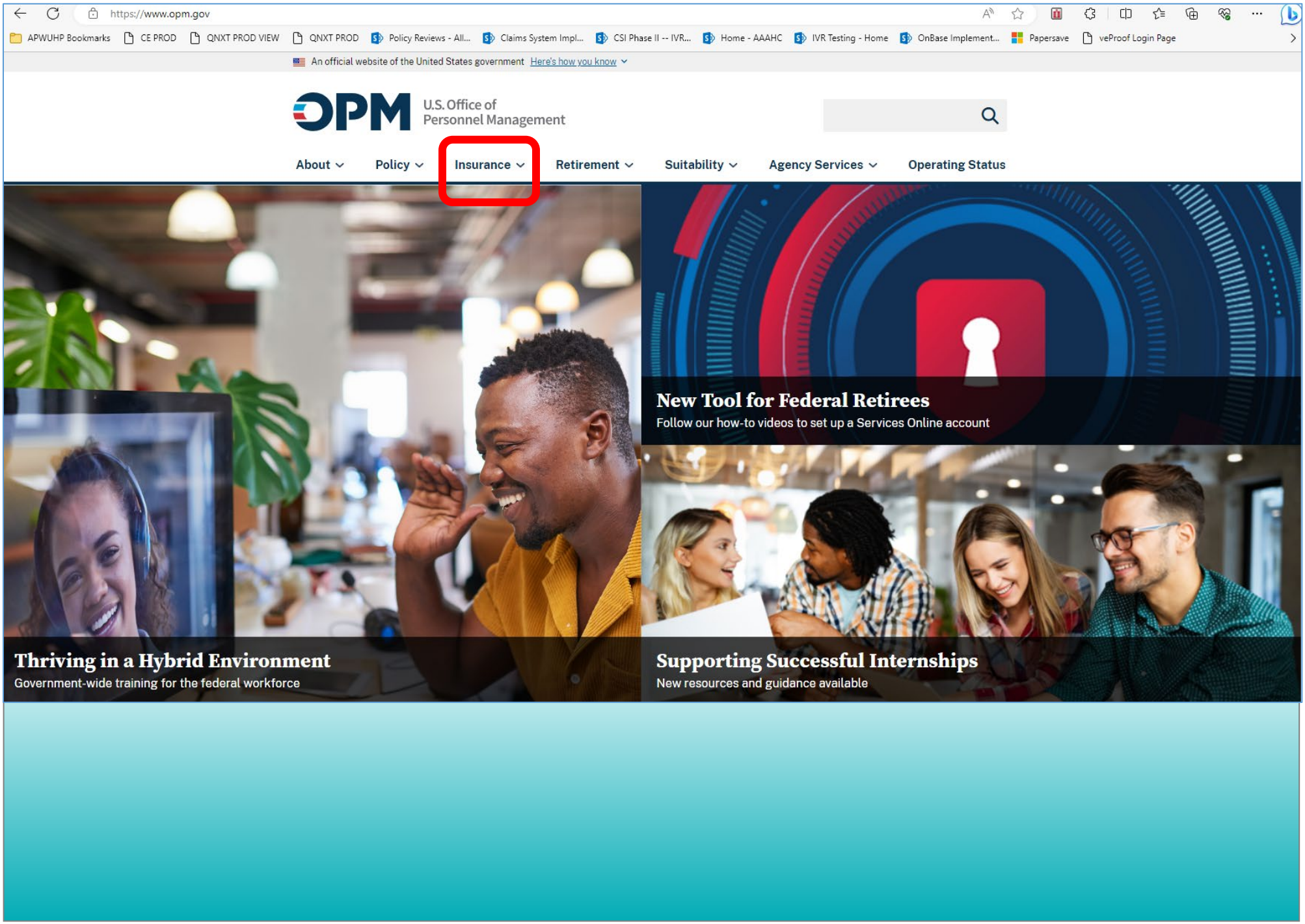
https://www.opm.gov
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Follow our how-to videos to set up a Services Online account
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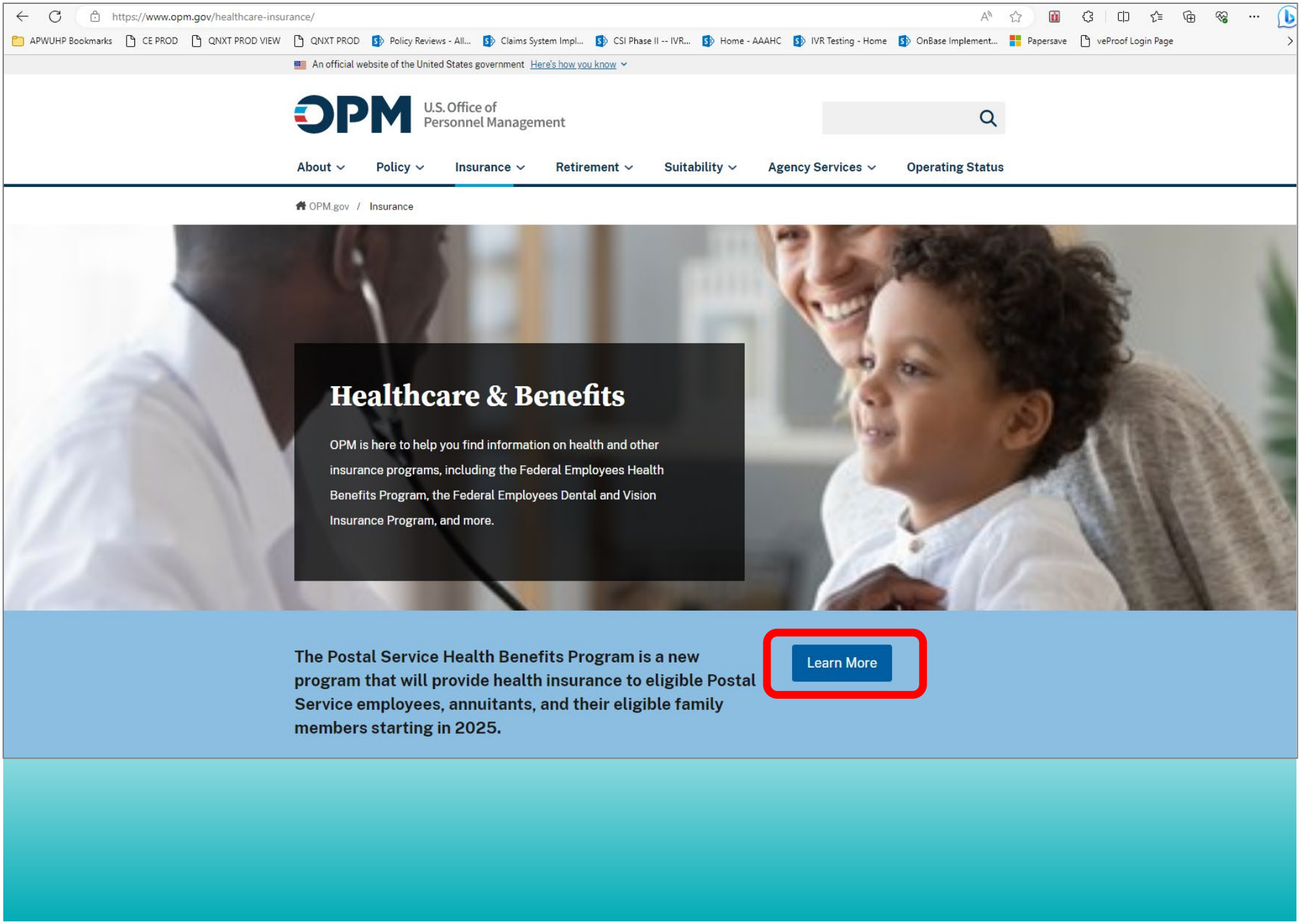
Government-wide training for the federal workforce
Supporting Successful Internships
New resources and guidance available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CSI Phase II -- IVR...
Home - AAAHC
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Healthcare & Benefits
OPM is here to help you find information on health and other insurance programs, including the Federal Employees Health Benefits Program, the Federal Employees Dental and Vision Insurance Program, and more.
The Postal Service Health Benefits Program is a new program that will provide health insurance to eligible Postal Service employees, annuitants, and their eligible family members starting in 2025.
Learn More

In this section

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Dental & Vision
FEDVIP Plan Comparison Tool
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Postal Service Health Benefits (PSHB) Program FAQs

The Postal Service Health Benefits (PSHB) Program is a new, separate program within the Federal Employees Health Benefits (FEHB) Program, administered by the Office of Personnel Management (OPM) which will provide health insurance to eligible Postal Service employees, Postal Service annuitants, and their eligible family members starting in 2025. The PSHB Program coverage will replace Federal Employees Health Benefit (FEHB) Program coverage for these groups.

USPS has issued fact sheets on the PSHB program – one for current Postal employees, and one for Postal annuitants. Visiting these links will bring you to a USPS-owned website.



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New! FEHB and FEDVIP 2023 Plan Benefit Information Public Use Files.

PUF files provide access to FEHB and FEDVIP Plan, Rate and Benefit Information. Learn more.

The Federal Employees Health Benefits (FEHB) Program

The FEHB Program can help you and your family meet your health care needs. Federal employees, retirees and their survivors enjoy the widest selection of health plans in the country. You can choose from among Consumer-Driven and High Deductible plans that offer catastrophic risk protection with higher deductibles, health savings/reimbursable accounts and lower premiums, or Fee-for-Service (FFS) plans, and their Preferred Provider Organizations (PPO), or Health Maintenance Organizations (HMO) if you live (or sometimes if you work) within the area serviced by the plan.

Use this site to compare the costs, benefits, and features of different plans. We chose the different benefit categories based on enrollee requests, differences among plans, and simplicity. However, we urge you to consider the total benefit package, in addition to service and cost, and provider availability when choosing a health plan.

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FEHB Plan Comparison Tool

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PLAN INFORMATION

FEHB Plan Information for 2023

FEHB Plan Information for 2023

Choosing a state below will take you to a list of all plans available in that state, as well as links to the plan brochures, changes for each plan from the previous year, information on plan patient safety programs, and links to the plan provider directories.

Go to States List

RELATED LINKS

- Overseas Coverage
- FEHB Program is Going Green
- Plan Accreditation
- Compare Health Plans
- Consumer's Checkbook Comparison Tool
- Enroll in a Health Plan
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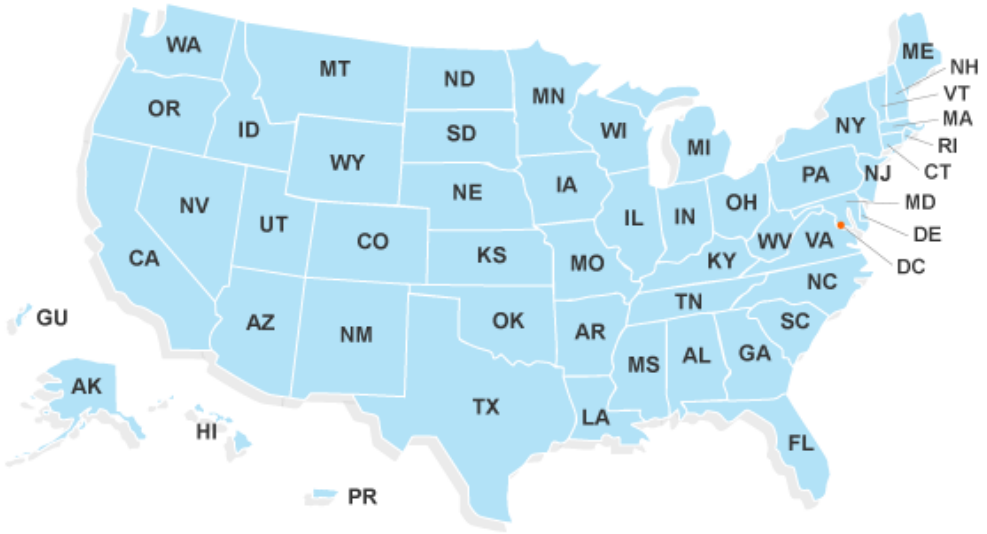
- 2022 Brochures



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- The Affordable Care Act

Healthcare

COMPARE 2023 PLANS

The information contained in this comparison tool is not the official statement of benefits.
Before making your final enrollment decision, always refer to the individual FEHB brochures. Each plan's FEHB brochure is the official statement of benefits. If you decide to enroll, change health plans or plan options, or change enrollment type, please visit the Enroll page for information on submitting a change.

Search by one of the following:

Items marked with an * are required.

Enter your home or work zip code. To enroll, you must live or work in a plan's geographic service area.

5-Digit Zip Code*

21046

☐ I live overseas or outside the Continental United States. (Selecting this option will set the zip code to 99999)

The current Plan selection below is disabled until you enter a Zip Code, Enrollee Type, and Pay Frequency.
Pay Frequency depends on the Enrollee Type and may be restricted depending on Enrollee Type selected.

FEHB-eligible career USPS Employees should use the Federal & U.S. Postal Service Enrollee Type for 2023.

Enrollee Type*

- ◉ Federal & U.S. Postal Service Employee
- ○ Federal Deposit Insurance Corporation Employee
- ○ Certain Temporary Employee
- ○ Tribal Employee (Monthly)
- ○ Annuitant (Monthly)
- ○ Former Spouse Enrollee (Monthly)
- ○ Temporary Continuation of Coverage Enrollee (TCC) (Monthly)
- ○ Workers Compensation Recipient (Every Four Weeks)

Pay Frequency* (May be restricted with certain Enrollee Types)

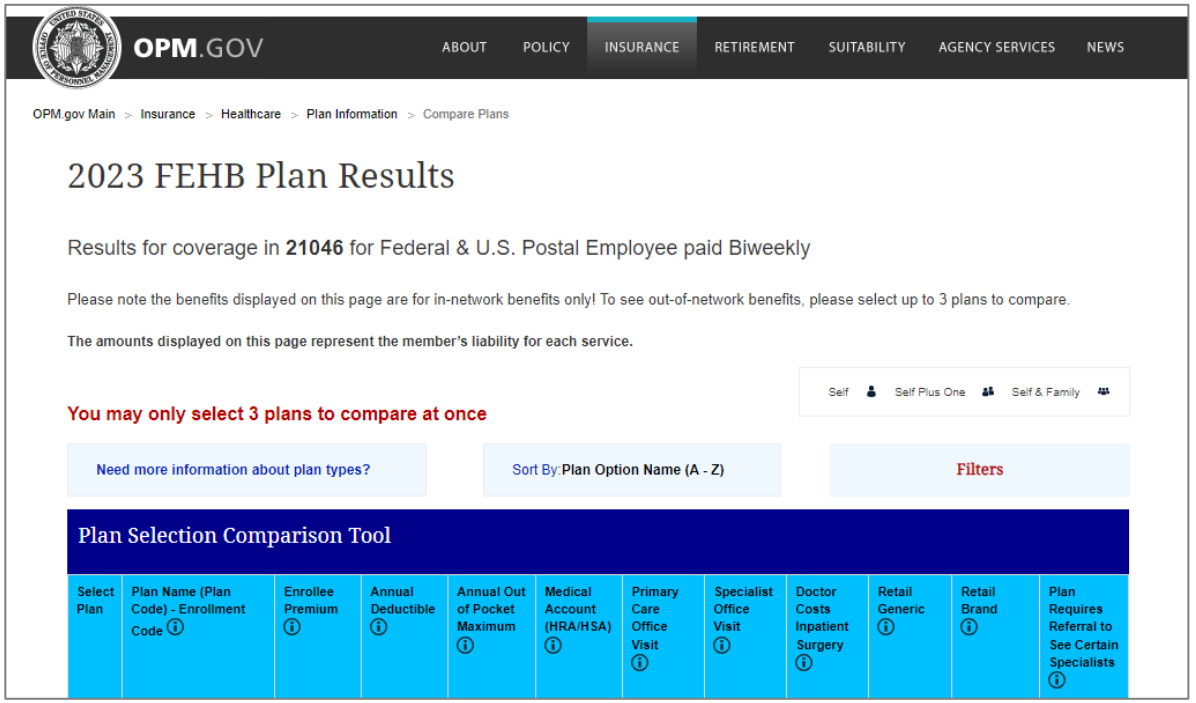
- ◉ Biweekly
- ○ Every Four Weeks
- ○ Semi-Monthly
- ○ Monthly

Your Current Plan (if applicable)

(This option is disabled until all required options are selected.)

APWU Health Plan - 47 - High

Search



Select Plan	Plan Name (Plan Code) - Enrollment Code	Enrollee Premium	Annual Deductible	Annual Out of Pocket Maximum	Medical Account (HRA/HSA)	Primary Care Office Visit	Specialist Office Visit	Doctor Costs Inpatient Surgery	Retail Generic	Retail Brand	Plan Requires Referral to See Certain Specialists
☑	*This plan in 2023* APWU Health Plan - High (47) - 471	$121	$450	$6500	N/A	$25	$25	15%	Tier 1: $10 Tier 2: 25% $200 max Tier 3: 45% $300 max	Tier 1: $10 Tier 2: 25% $200 max Tier 3: 45% $300 max	No
	This plan in 2023 APWU Health Plan - High (47) - 473	$238.95	$800	$13000	$0 N/A	$25	$25	15%	Tier 1: $10 Tier 2: 25% $200 max Tier 3: 45% $300 max	Tier 1: $10 Tier 2: 25% $200 max Tier 3: 45% $300 max	No
	This plan in 2023 APWU Health Plan - High (47) - 472	$302.26	$800	$13000	$0 N/A	$25	$25	15%	Tier 1: $10 Tier 2: 25% $200 max Tier 3: 45% $300 max	Tier 1: $10 Tier 2: 25% $200 max Tier 3: 45% $300 max	No
☑	Blue Cross and Blue Shield Service Benefit Plan - Basic (11) - 111	$86.67	None	$6500	N/A	$30	$40	$200	Tier 1: $15	Tier 2: $60 Tier 3: 60% $90 Min	No
	Blue Cross and Blue Shield Service Benefit Plan - Basic (11) - 113	$217.9	None	$13000	$0 N/A	$30	$40	$200	Tier 1: $15	Tier 2: $60 Tier 3: 60% $90 Min	No
	Blue Cross and Blue Shield Service Benefit Plan - Basic (11) - 112	$237.91	None	$13000	$0 N/A	$30	$40	$200	Tier 1: $15	Tier 2: $60 Tier 3: 60% $90 Min	No

Scroll down and check the boxes to choose Plans you wish to compare.

☑	CareFirst BlueChoice - Standard (2G) - 2G4	$212.56	None	$5000	N/A	$0	$40	20%	$0	Tier 2: $50 Tier 3: $75	No
	CareFirst BlueChoice - Standard (2G) - 2G6	$384.05	None	$10000	$0 N/A	$0	$40	20%	$0	Tier 2: $50 Tier 3: $75	No
	CareFirst BlueChoice - Standard (2G) - 2G5	$510.72	None	$10000	$0 N/A	$0	$40	20%	$0	Tier 2: $50 Tier 3: $75	No
☑	GEHA Benefit Plan - High (31) - 311	$105.74	$350	$5000	N/A	$20	$20	10%	$10	25% $150 max Or 40% $200 max	No
	GEHA Benefit Plan - High (31) - 313	$243.49	$700	$10000	$0 N/A	$20	$20	10%	$10	25% $150 max Or 40% $200 max	No
	GEHA Benefit Plan - High (31) - 312	$304.39	$700	$10000	$0 N/A	$20	$20	10%	$10	25% $150 max Or 40% $200 max	No
☑	GEHA Benefit Plan - Standard (31) - 314	$68.77	$350	$6500	N/A	$20	$35	15%	$10	50% $200 max Or 50% $300 max	No
	GEHA Benefit Plan - Standard (31) - 316	$147.87	$700	$13000	$0 N/A	$20	$35	15%	$10	50% $200 max Or 50% $300 max	No
	GEHA Benefit Plan - Standard (31) - 315	$180.92	$700	$13000	$0 N/A	$20	$35	15%	$10	50% $200 max Or 50% $300 max	No

Print | Compare Plans | Clear Selected | New Search

2023 FEHB Plan Comparison Details

The information contained in this comparison tool is not the official statement of benefits. Before making your final enrollment decision, always refer to the individual FEHB brochure which is the official statement of benefits. **The amounts shown below indicate what you will pay for each class of service.** When you see a plus sign (+), it means you must pay the stated coinsurance AND any difference between your Plan's allowance and the provider's billed amount. When a "yes" appears indicating that there is coverage for a specific service, you must check the plan brochure for your cost share. NOTE: HDHP plans require that the combined medical and pharmacy deductible be met before traditional coverage begins. traditional coverage begins.

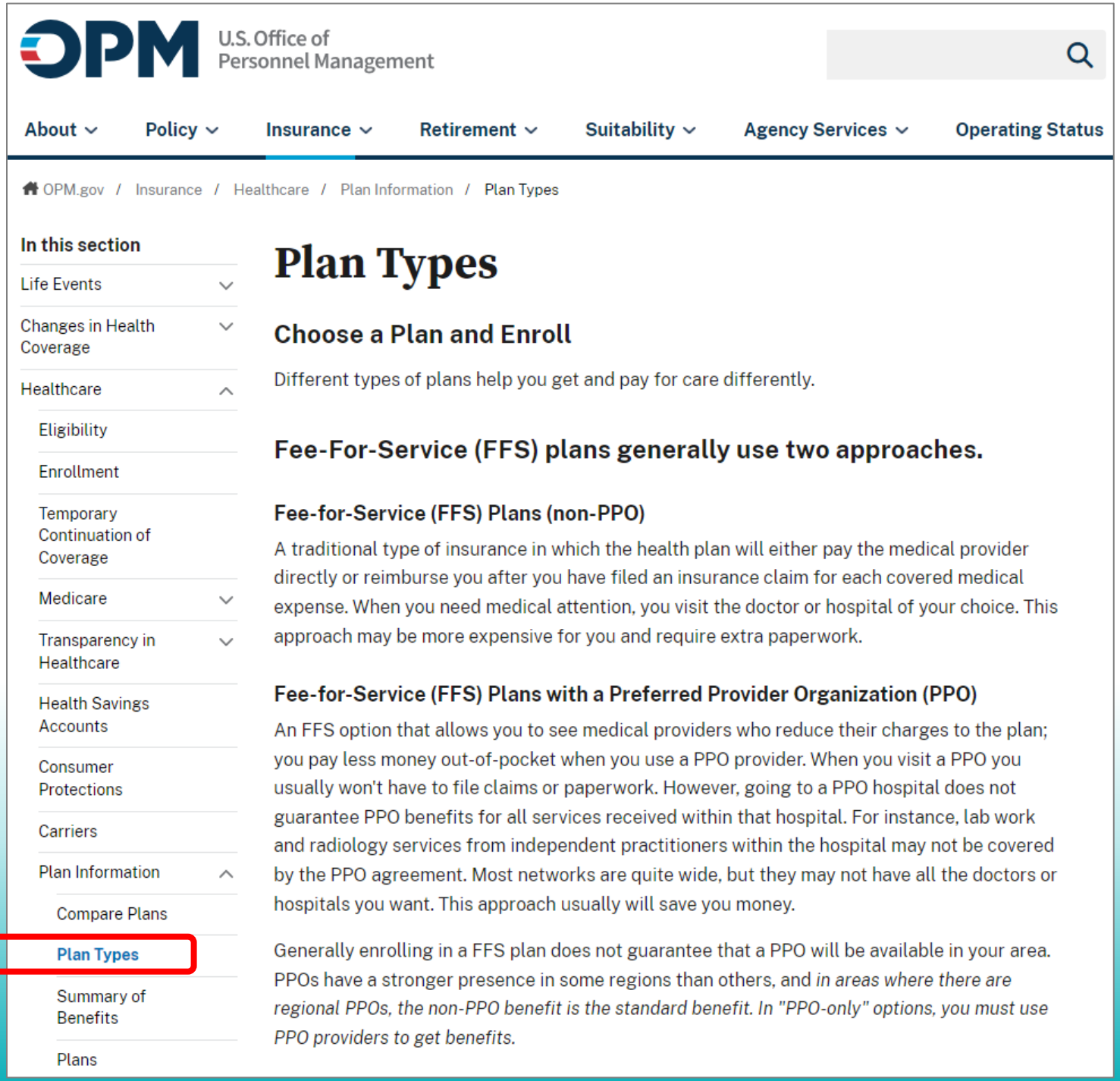
Costs & Network

Disclaimer: In some cases, the enrollee share of premiums for the Self Plus One enrollment type will be higher than for the Self and Family enrollment type. Enrollees who wish to cover one eligible family member are free to elect either the Self and Family or Self Plus One enrollment type. Check premiums on our website at www.opm.gov/fehbpremiums.

Self | Self Plus One | Self & Family

Plan Selection Comparison Tool

Plans	APWU Health Plan (High)	Blue Cross and Blue Shield Service Benefit Plan (Standard)	GEHA Benefit Plan (High)
Plan Links	[Website], Brochure Link , [Summary of Benefits], [Provider Directory], [RX Pricing Tool]	[Website], Brochure Link , [Summary of Benefits], [Provider Directory], [RX Pricing Tool]	[Website], Brochure Link , [Summary of Benefits], [Provider Directory], [RX Pricing Tool]
General Information - State	Maryland	Maryland	Maryland
General Information - Enrollment Code - Self	471	104	311
General Information - Enrollment Code - Self & Family	472	105	312
General Information - Enrollment Code - Self Plus One	473	106	313



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Plan Types

Choose a Plan and Enroll

Different types of plans help you get and pay for care differently.

Fee-For-Service (FFS) plans generally use two approaches.

Fee-for-Service (FFS) Plans (non-PPO)

A traditional type of insurance in which the health plan will either pay the medical provider directly or reimburse you after you have filed an insurance claim for each covered medical expense. When you need medical attention, you visit the doctor or hospital of your choice. This approach may be more expensive for you and require extra paperwork.

Fee-for-Service (FFS) Plans with a Preferred Provider Organization (PPO)

An FFS option that allows you to see medical providers who reduce their charges to the plan; you pay less money out-of-pocket when you use a PPO provider. When you visit a PPO you usually won't have to file claims or paperwork. However, going to a PPO hospital does not guarantee PPO benefits for all services received within that hospital. For instance, lab work and radiology services from independent practitioners within the hospital may not be covered by the PPO agreement. Most networks are quite wide, but they may not have all the doctors or hospitals you want. This approach usually will save you money.

Generally enrolling in a FFS plan does not guarantee that a PPO will be available in your area. PPOs have a stronger presence in some regions than others, and *in areas where there are regional PPOs, the non-PPO benefit is the standard benefit. In "PPO-only" options, you must use PPO providers to get benefits.*

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Summary of Benefits

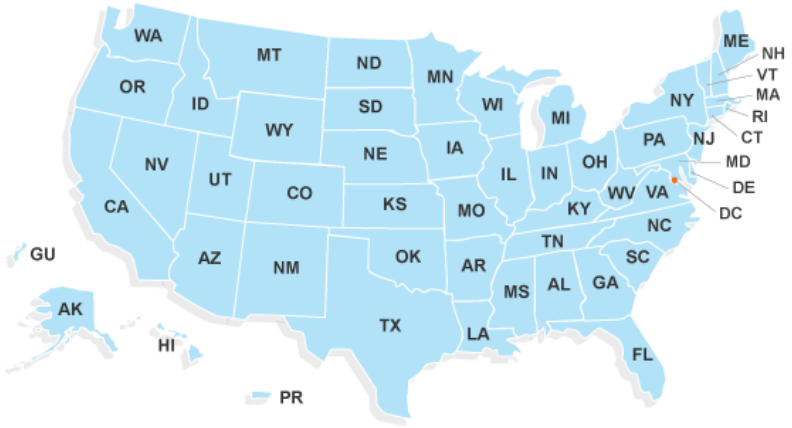
2023 | 2022 | 2021 | 2020 | 2019 | 2018 | 2017 | 2016 | 2015 | 2014 | 2013

2023

FEHB Summary of Benefits for 2023

Choosing a state below will take you to a list of all plans available in that state, as well as links to the plan summary of benefits.

Go to Alphabetical List of States



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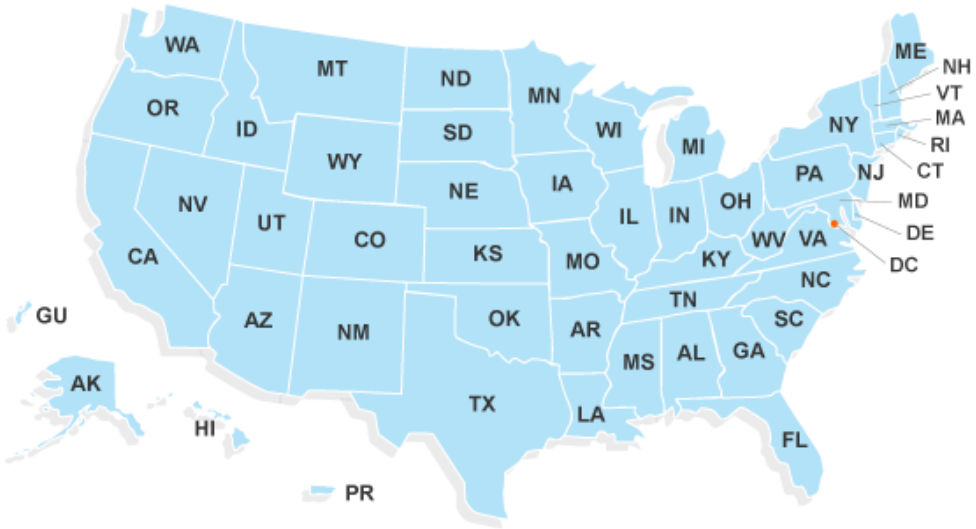

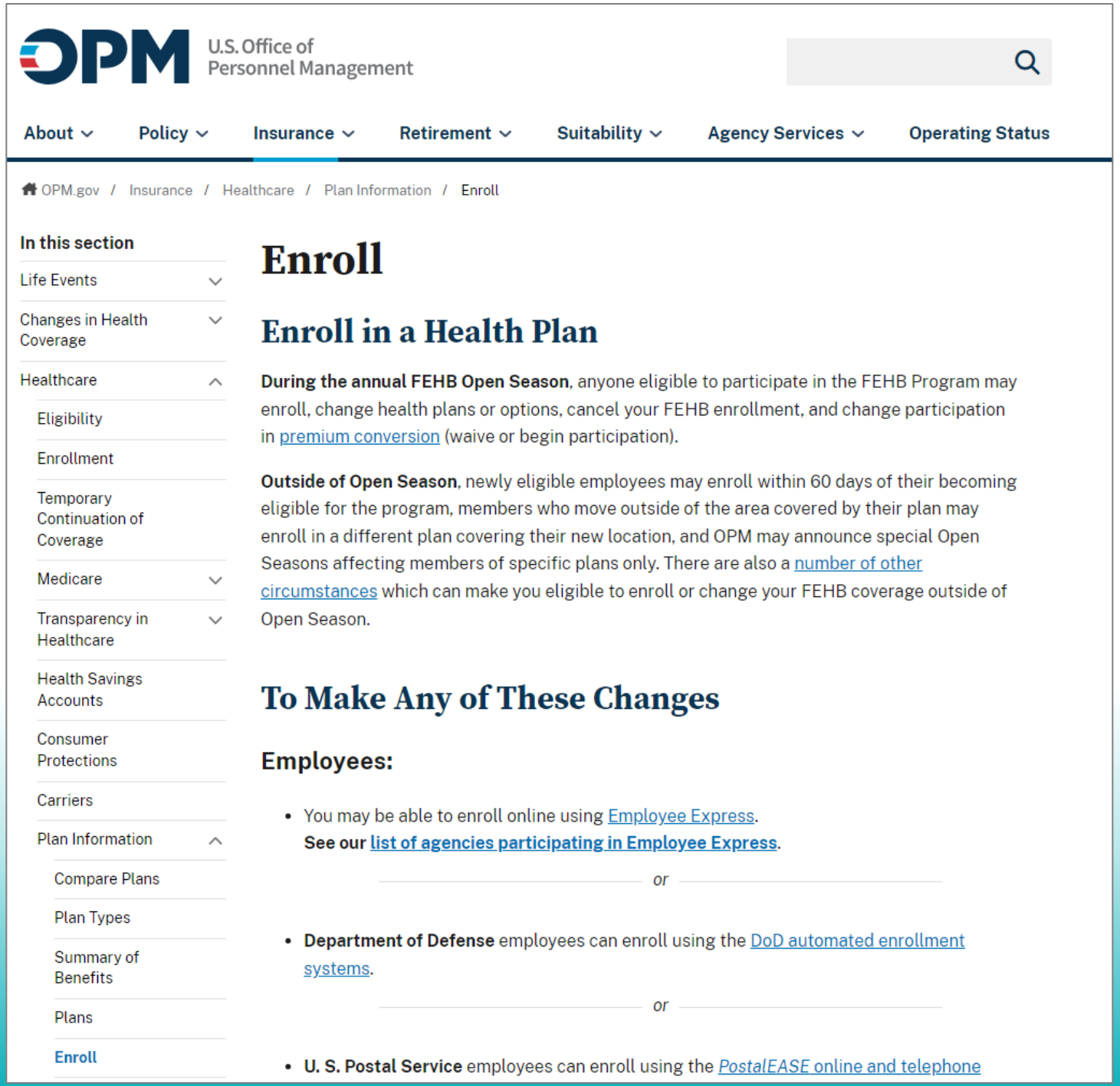

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Enroll

Enroll in a Health Plan

During the annual FEHB Open Season, anyone eligible to participate in the FEHB Program may enroll, change health plans or options, cancel your FEHB enrollment, and change participation in premium conversion (waive or begin participation).

Outside of Open Season, newly eligible employees may enroll within 60 days of their becoming eligible for the program, members who move outside of the area covered by their plan may enroll in a different plan covering their new location, and OPM may announce special Open Seasons affecting members of specific plans only. There are also a number of other circumstances which can make you eligible to enroll or change your FEHB coverage outside of Open Season.

To Make Any of These Changes

Employees:

- You may be able to enroll online using Employee Express.
  See our list of agencies participating in Employee Express.

or

- **Department of Defense** employees can enroll using the DoD automated enrollment systems.

or

- **U. S. Postal Service** employees can enroll using the *PostalEASE* online and telephone

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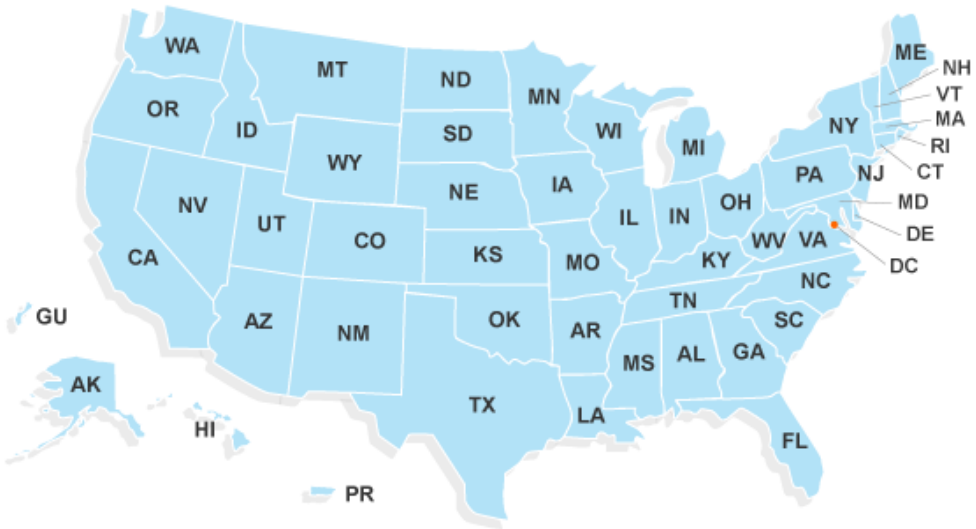

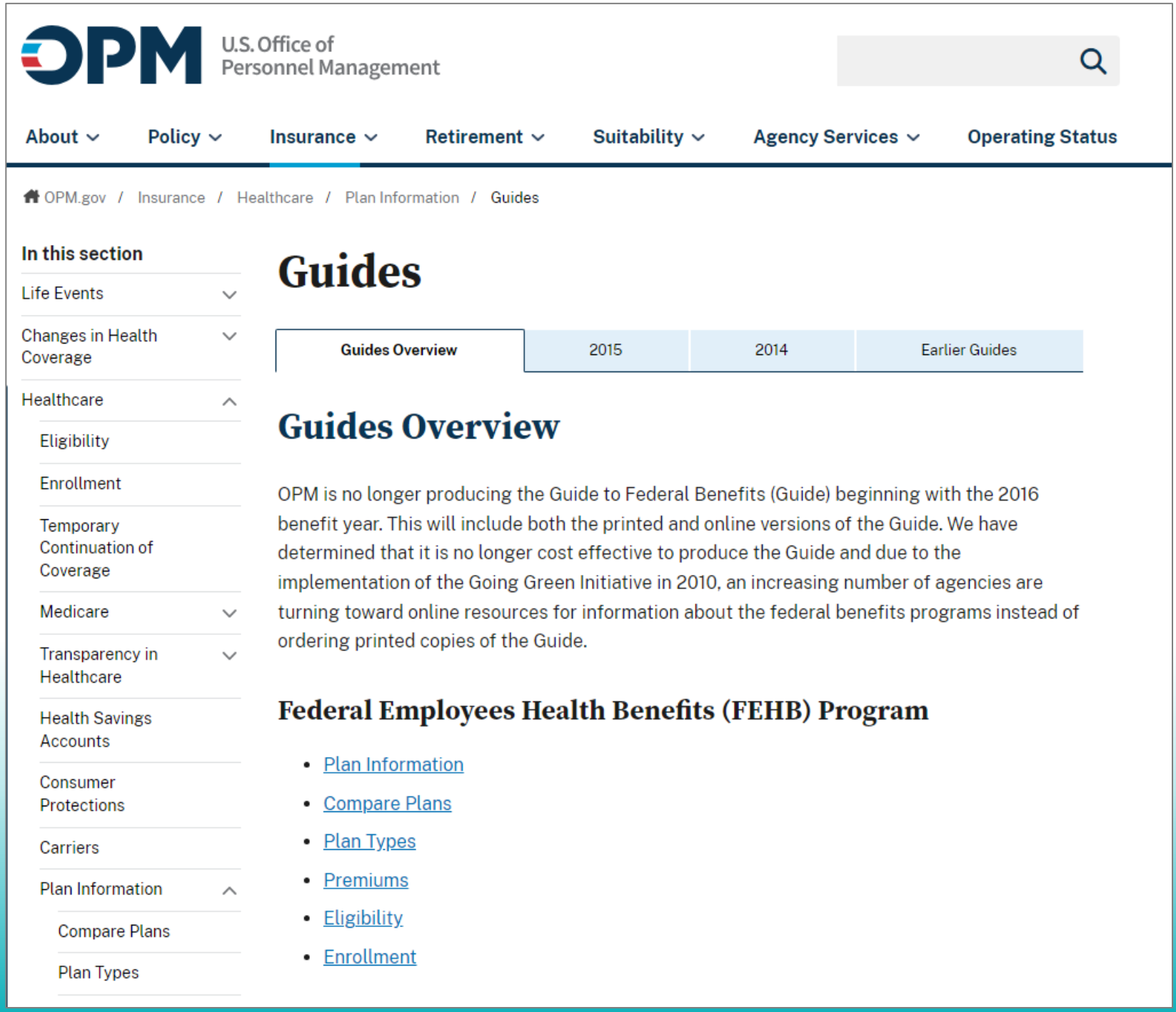

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Guides

Guides Overview | 2015 | 2014 | Earlier Guides

Guides Overview

OPM is no longer producing the Guide to Federal Benefits (Guide) beginning with the 2016 benefit year. This will include both the printed and online versions of the Guide. We have determined that it is no longer cost effective to produce the Guide and due to the implementation of the Going Green Initiative in 2010, an increasing number of agencies are turning toward online resources for information about the federal benefits programs instead of ordering printed copies of the Guide.

Federal Employees Health Benefits (FEHB) Program

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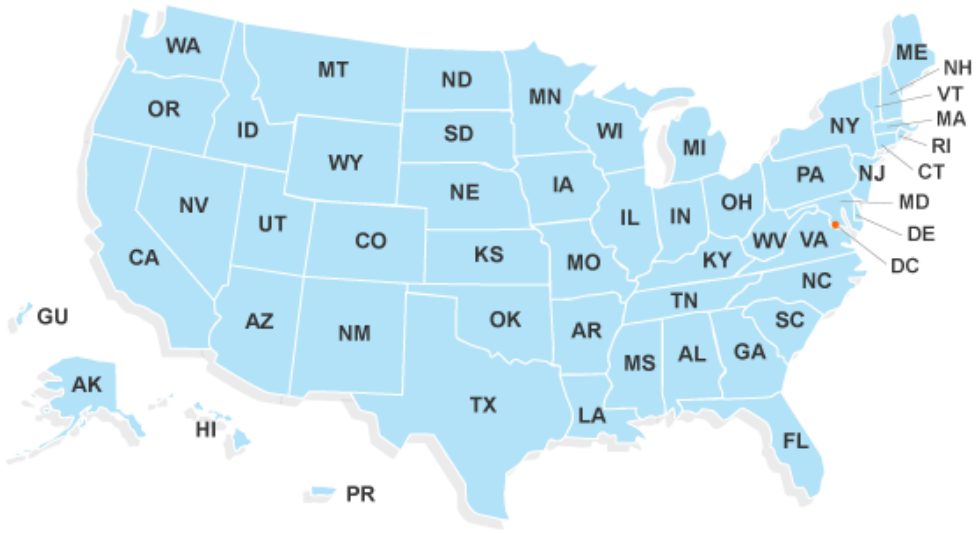

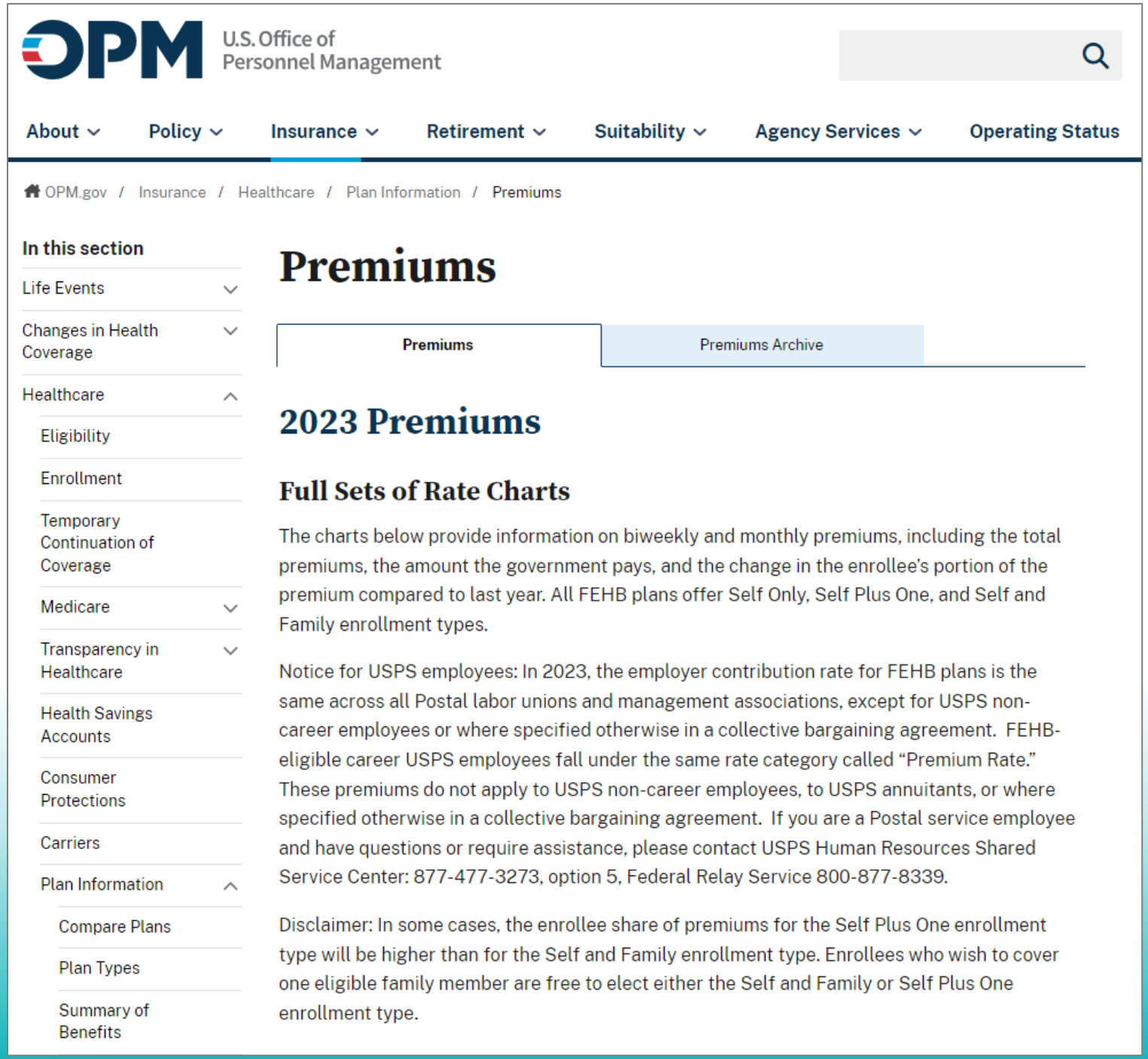

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Premiums

Premiums | Premiums Archive

2023 Premiums

Full Sets of Rate Charts

The charts below provide information on biweekly and monthly premiums, including the total premiums, the amount the government pays, and the change in the enrollee's portion of the premium compared to last year. All FEHB plans offer Self Only, Self Plus One, and Self and Family enrollment types.

Notice for USPS employees: In 2023, the employer contribution rate for FEHB plans is the same across all Postal labor unions and management associations, except for USPS non-career employees or where specified otherwise in a collective bargaining agreement. FEHB-eligible career USPS employees fall under the same rate category called "Premium Rate." These premiums do not apply to USPS non-career employees, to USPS annuitants, or where specified otherwise in a collective bargaining agreement. If you are a Postal service employee and have questions or require assistance, please contact USPS Human Resources Shared Service Center: 877-477-3273, option 5, Federal Relay Service 800-877-8339.

Disclaimer: In some cases, the enrollee share of premiums for the Self Plus One enrollment type will be higher than for the Self and Family enrollment type. Enrollees who wish to cover one eligible family member are free to elect either the Self and Family or Self Plus One enrollment type.

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Healthcare

PLAN INFORMATION

FEHB Plan Information for 2023

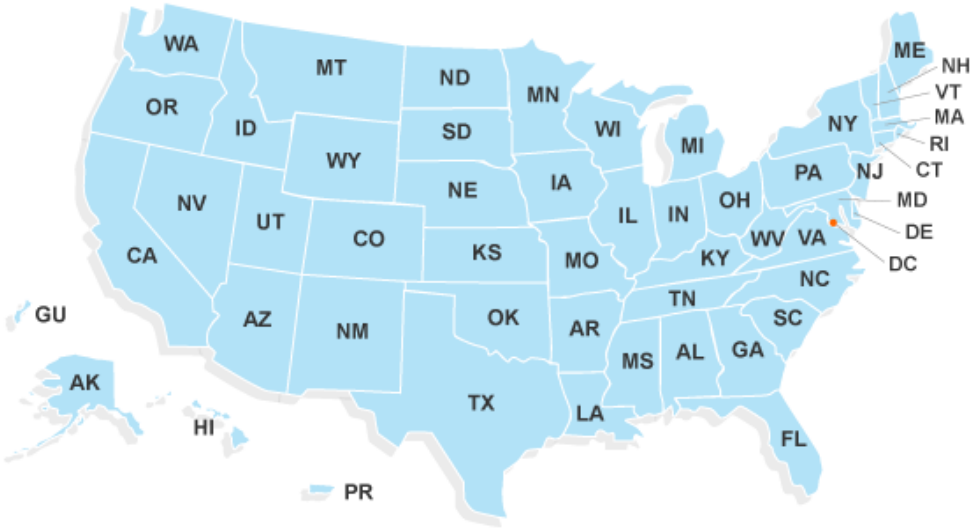
FEHB Plan Information for 2023

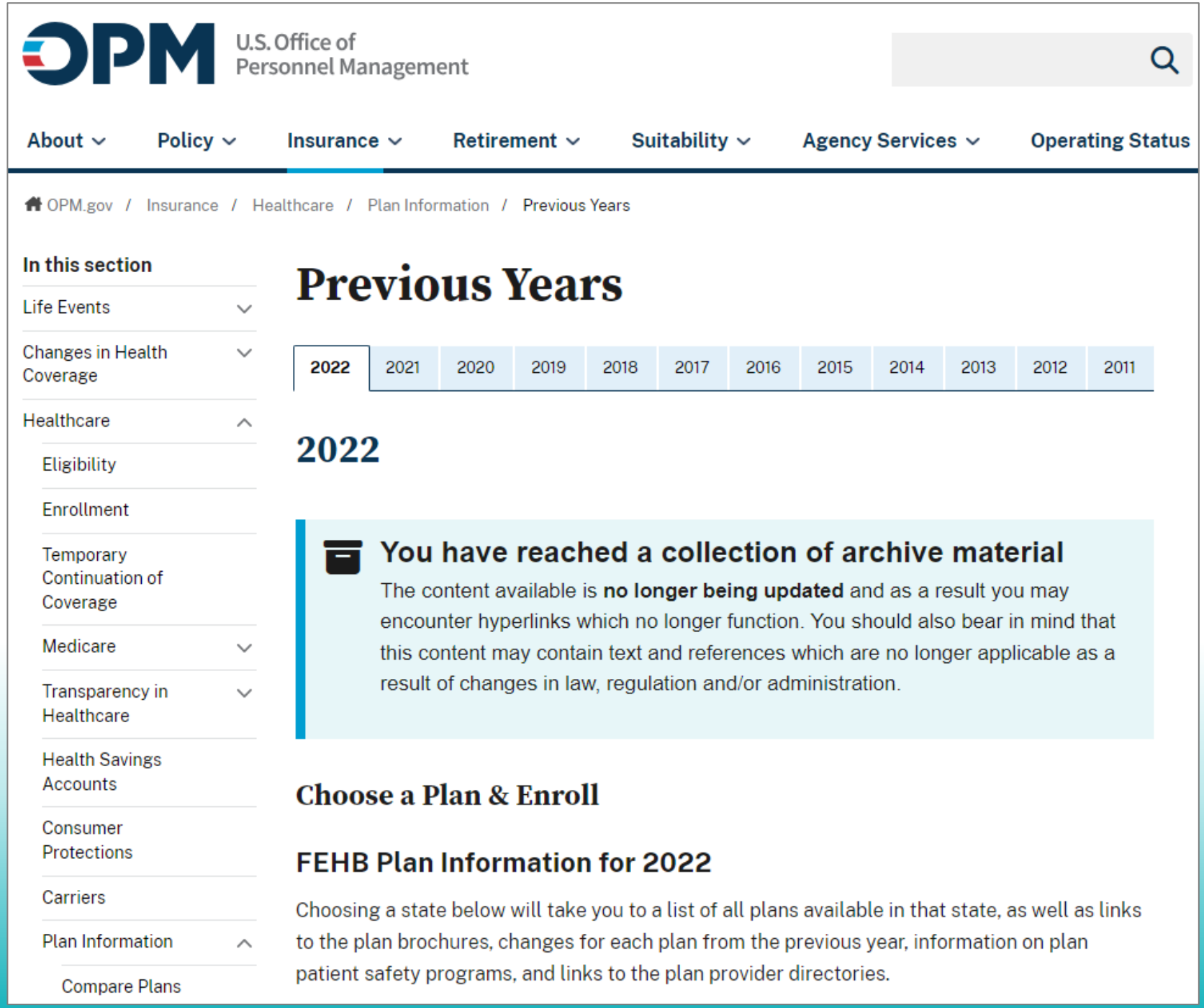
Choosing a state below will take you to a list of all plans available in that state, as well as links to the plan brochures, changes for each plan from the previous year, information on plan patient safety programs, and links to the plan provider directories.

Go to States List

RELATED LINKS

- Overseas Coverage
- FEHB Program is Going Green
- Plan Accreditation
- Compare Health Plans
- Consumer's Checkbook Comparison Tool
- Enroll in a Health Plan
- Plan Types
- 2022 Brochures





U.S. Office of Personnel Management

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Previous Years

2022 | 2021 | 2020 | 2019 | 2018 | 2017 | 2016 | 2015 | 2014 | 2013 | 2012 | 2011

2022

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The content available is **no longer being updated** and as a result you may encounter hyperlinks which no longer function. You should also bear in mind that this content may contain text and references which are no longer applicable as a result of changes in law, regulation and/or administration.

Choose a Plan & Enroll

FEHB Plan Information for 2022

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IN THIS SECTION

- Open Season
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Healthcare

PLAN INFORMATION

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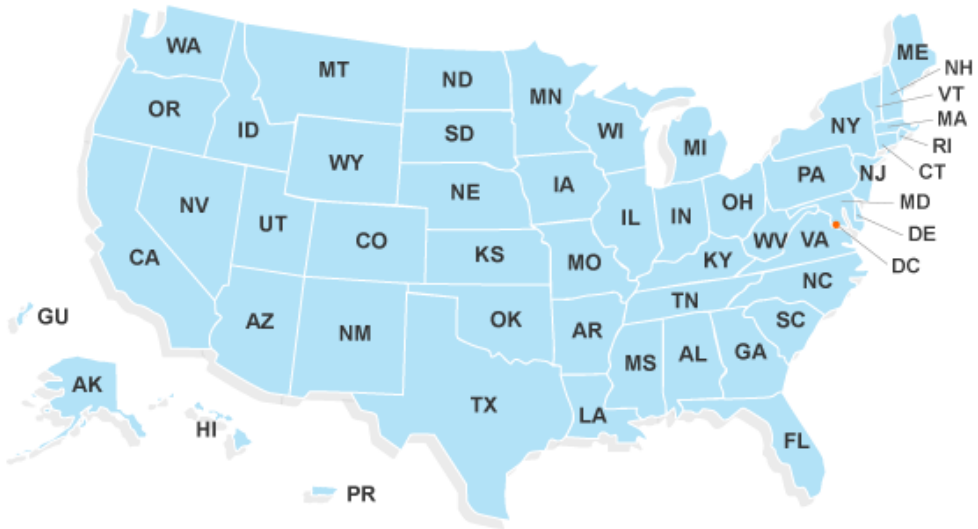

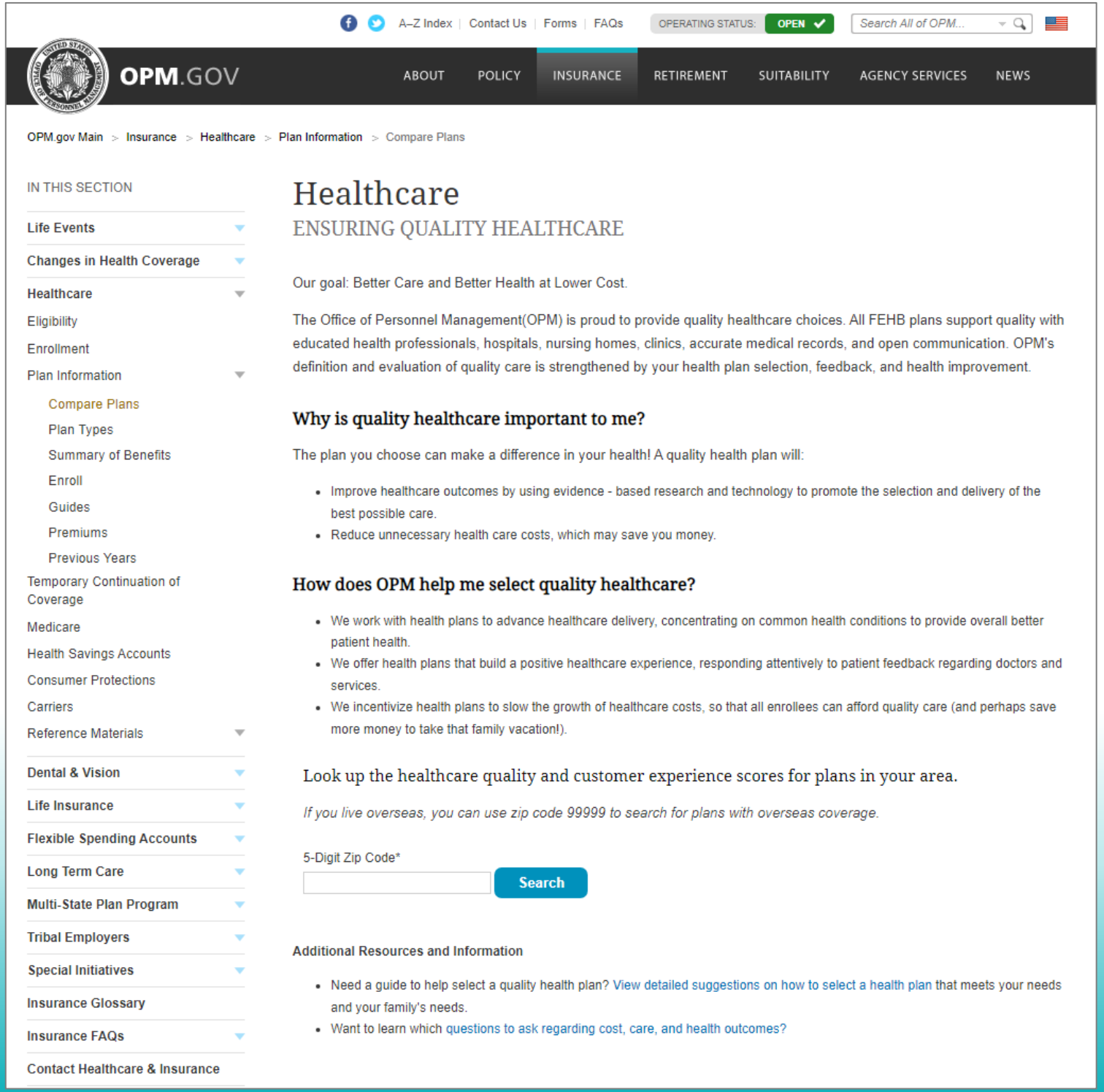

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Healthcare

ENSURING QUALITY HEALTHCARE

Our goal: Better Care and Better Health at Lower Cost.

The Office of Personnel Management(OPM) is proud to provide quality healthcare choices. All FEHB plans support quality with educated health professionals, hospitals, nursing homes, clinics, accurate medical records, and open communication. OPM's definition and evaluation of quality care is strengthened by your health plan selection, feedback, and health improvement.

Why is quality healthcare important to me?

The plan you choose can make a difference in your health! A quality health plan will:

- Improve healthcare outcomes by using evidence - based research and technology to promote the selection and delivery of the best possible care.
- Reduce unnecessary health care costs, which may save you money.

How does OPM help me select quality healthcare?

- We work with health plans to advance healthcare delivery, concentrating on common health conditions to provide overall better patient health.
- We offer health plans that build a positive healthcare experience, responding attentively to patient feedback regarding doctors and services.
- We incentivize health plans to slow the growth of healthcare costs, so that all enrollees can afford quality care (and perhaps save more money to take that family vacation!).

Look up the healthcare quality and customer experience scores for plans in your area.

If you live overseas, you can use zip code 99999 to search for plans with overseas coverage.

5-Digit Zip Code*

Search

Additional Resources and Information

- Need a guide to help select a quality health plan? View detailed suggestions on how to select a health plan that meets your needs and your family's needs.
- Want to learn which questions to ask regarding cost, care, and health outcomes?