TOGETHER.
BETTER HEALTH.

HONORED TO SERVE YOU.

Comprehensive benefits at an affordable price.

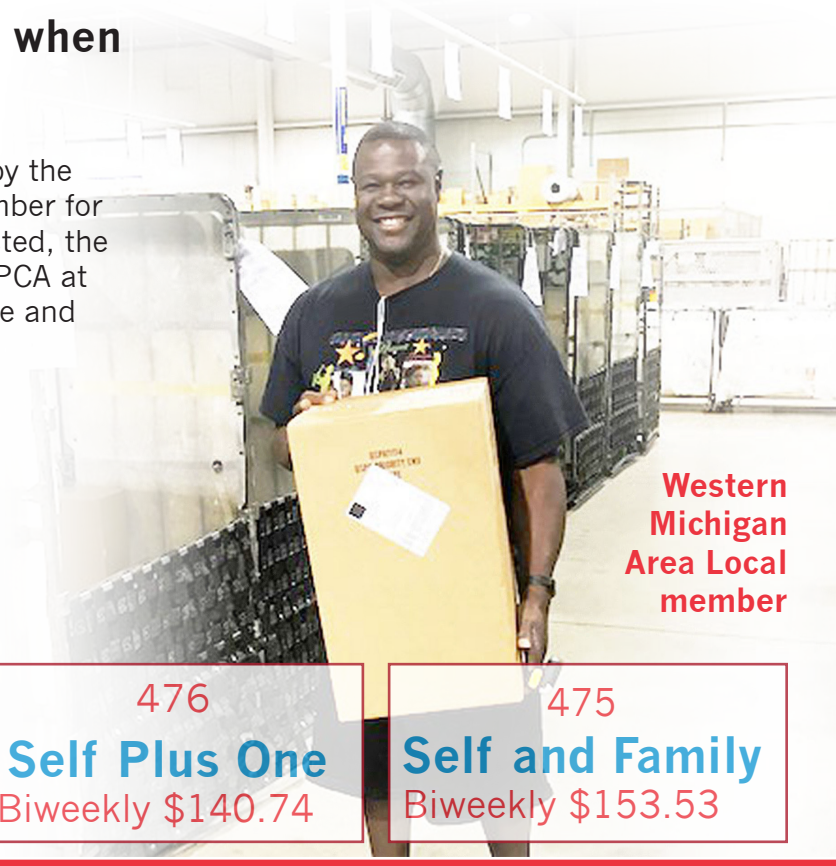
- Nationwide network - more than 1 million providers
- No referrals needed
- Affordable premiums Minimal rate increase

Consumer Driven Option 2018

Available to all Postal Support Employees with one year of service

You pay nothing for these services when you choose a network doctor.

- A Personal Care Account (PCA), which is funded by the Health Plan each January and is used by the member for covered medical services. Until the PCA is exhausted, the member is covered at 100%. The Plan funds the PCA at $1,200 for Self Only and $2,400 for Self Plus One and Self and Family
- Preventive care and screenings.
- Maternity care.
- Tobacco Cessation Program.



Western Michigan Area Local member

2018 Rates

474	476	475
Self Only	**Self Plus One**	**Self and Family**
Biweekly $63.97	Biweekly $140.74	Biweekly $153.53

APWU HEALTH PLAN

John L. Marcotte
APWU Health Plan Director
799 Cromwell Park Drive, Suites K-Z, Glen Burnie, MD 21061
(800) 222-2798 | www.apwuhp.com

ENROLL NOW

Postal Support Employees (PSE) are non-career postal employees. For the first time, as part of the 2010 Collective Bargaining Agreement, the APWU has negotiated for non-career employees to have access to the Federal Employees Health Benefits (FEHB) Program.

As a Postal Support Employee, you can enroll in the APWU Consumer Driven Option Plan and the United States Postal Service pays 75% of the premium. With other plans, you would be responsible for paying 100% of the premium.

Postal Support Employees can enroll through the PostalEASE telephone system and/or website. By telephone, call PostalEASE at (877) 477-3273, Option 5. By internet, access the LiteBlue page at https://liteblue.usps.gov. You must have your Employee Identification Number and USPS Pin# in order to access the PostalEASE systems. Visit www.apwuhp.com and click on "Enroll" for more enrollment details on Postal Support Employees.

Two times to enroll

- **Enroll within 60 days of completing your 360-day initial appointment**
- **Enroll during Open Season**

Enrollment codes

Self Only 474
Self Plus One 476
Self and Family 475

www.apwuhp.com/enroll/how-to-enroll/postal-support-employees/

Dental, vision and hearing benefits add up to even more.

Smile, routine dental care is covered.

Office visits, exams, cleanings, X-rays, fluoride treatment, fillings and simple extractions

Pay for your dental care at the time of service and use your Personal Care Account* to cover the charges up to $400 per Self Only or $800 per Self Plus One and Self and Family.

Get ready for savings on glasses and frames.

Pay for your vision needs at the time of service and use your Personal Care Account* to cover the charges up to $400 per Self Only or $800 per Self Plus One and Self and Family.

And there's good news for your ears.

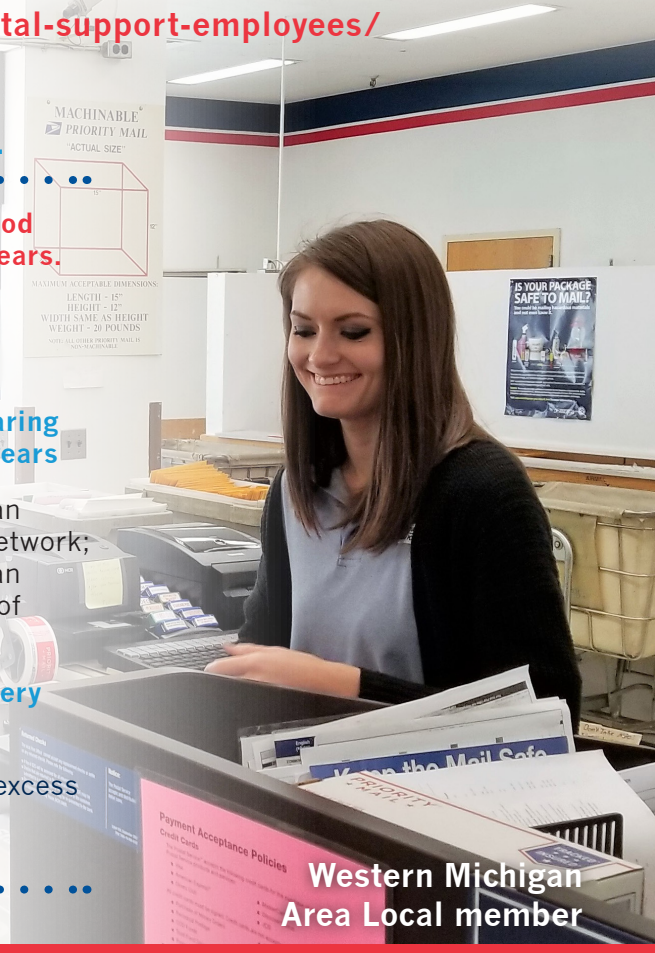
Diagnostic hearing tests every 2 years

15% of the plan allowance in network; 40% of the plan allowance out of network

Hearing aid every 3 years

All charges in excess of $1,500

The amount $400/$800 is for both dental and vision combined



Western Michigan Area Local member

Health Risk Assessment

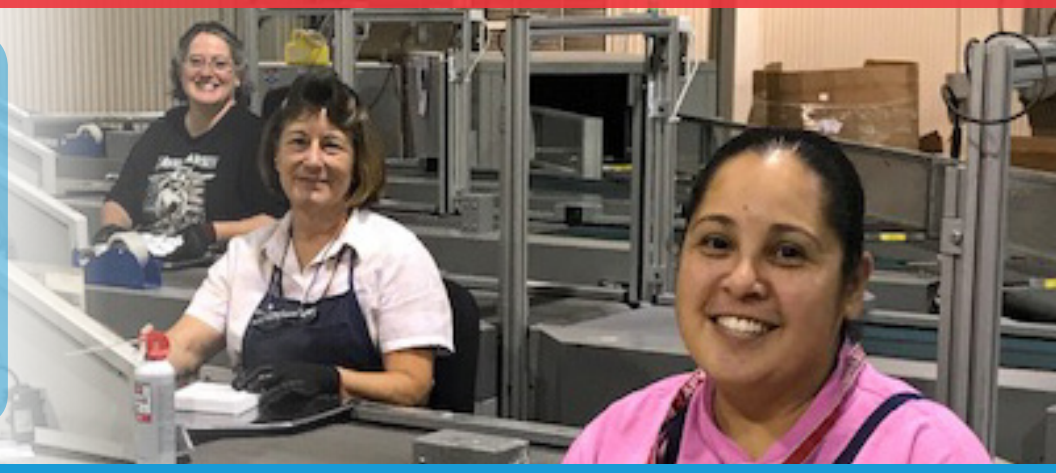
Complete a Health Risk Assessment (HRA) for added savings. Consumer Driven Option members earn $50 added to your Personal Care Account per member, spouse and each covered dependent age 18 or older. You can receive personalized recommendations through Rally® to help you move more, eat better and feel great.

OVERALL PLAN FEATURES		
Personal Care Account (PCA) The PCA is funded by the Health Plan each January and is used by the member for covered medical services. Until the PCA is exhausted, the member is covered at 100%. Self Self Plus One Self Plus 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.
Deductible When the PCA is exhausted, you must meet a deductible. Self Self Plus One Self Plus Family	 $800* $1,600* $1,600*	**Coinsurance** Once the deductible is met, you pay coinsurance for in- or out of network services and prescription drugs.
Out-of-pocket maximum Both medical and prescription drugs. Self Self Plus One and Self and Family	 $5,000 in-network, $10,200 out of network**** $10,000 in-network, $13,700 out of network****	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).
	IN-NETWORK YOU PAY	**OUT OF NETWORK YOU PAY**
Preventive care Well-child care, immunizations, well-woman care, adult routine exams, preventive screenings	$0 – No PCA used	May use PCA while funds are available
Medical visits Office, virtual and specialist visits	15% of allowance	40% of allowance***
Maternity Complete maternity care, including prenatal, delivery, post-natal and initial exam of newborn covered under family enrollment.	$0 – No PCA used	40% of allowance***
Hospital/facility care Diagnostic tests or imaging Outpatient surgery Inpatient Cancer Centers of Excellence	 15% 15% 15% 10%	 40% of allowance*** 40% of allowance*** 40% of allowance*** N/A
Emergency care Accidental injury Urgent care Emergency room Ambulance	 15% 15% 15% 15%	 15%*** 15%*** 15%*** 15%***
Retail prescription drugs – 30-day supply Generic Preferred brand name Non-preferred brand name	 25%, max. $200 per RX 25%, max. $200 per RX 40%, max. $200 per RX	 All charges
Mail order prescription drugs – up to 90-day supply Generic Preferred brand name Non-preferred brand name	 25%, max. $400 per RX for 60-day supply, max. $600 for 90-day supply 25%, max. $400 per RX for 60-day supply, max. $600 for 90-day supply 40%, max. $400 per RX for 60-day supply, max. $600 for 90-day supply	 N/A
Hearing services Diagnostic hearing tests Hearing aid	 15% every 2 years All charges in excess of $1,500 (every 3 years)	 40% of allowance*** All charges in excess of $1,500 (every 3 years)
Mental health/substance abuse Office visit Outpatient treatment Diagnostics, inpatient and outpatient services	 15% 15% 15%	 40% of allowance*** 40% of allowance*** 40% of allowance***

UnitedHealthcare®

The Consumer Driven Option is administered by UnitedHealthcare.

Contact us about the Consumer Driven Option
(800) 718-1299
www.welcometouhc.com/apwu



Western Michigan Area Local members

Member Services

As a member of the APWU Health Plan you will have a variety of exclusive resources at your disposal. The following services can be accessed from our website at www.apwuhp.com.

Personal Health Record
An online health tool that automatically transfers medical information from claims and organizes it in a single secure online location that you can share with your healthcare professionals.

Online Access to Claims and Records
Consumer Driven Option members have access to UHC's online tools at www.welcometouhc.com/apwu.

Nurse Advisory Line
Our professionals provide advice and information 24/7 to help you make informed decisions about your health.

Hospital Quality Guide
Check online hospital ratings to find the best hospitals anywhere in the country.

Treatment Cost Estimator
Find cost estimates of the most common medical conditions, tests and procedures.

Online Health Library
Research information for conditions, diseases and other lifestyle issues. Empower yourself and make educated healthcare decisions in partnership with your doctor.

FSA FEDS
Put more money in your pocket! Get the Fed-friendly tax break on your healthcare and dependent care expenses. Enroll in FSAFEDS during Open Season at www.FSAFEDS.com.

APW-ABA (American Postal Workers Accidental Benefits Association)
The APW-ABA has joined with Unum, Sun Life and USI–Affinity to provide additional benefits for APWU members, associate members, retirees and spouses. These benefits are now available to Postal Support Employees (PSE). In addition to the APW-ABA's Value, Advantage and Plus Programs that members are currently eligible for, you will now have access to affordable permanent whole life insurance and additional expanded accident insurance. Call APW-ABA at (800) 526-2890 or visit them online at www.apw-aba.org.

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)