

# Benefits to **enhance** your lifestyle

Summary of Benefits 2012



**APWU**  
HEALTH PLAN



# The High Option

For over 50 years the High Option has been everything you would expect from a great health plan. As the pioneer in the APWU Health Plan, the High Option features low copays and deductibles, a comprehensive prescription drug plan, coverage for routine dental procedures and 100% coverage for all in-network preventive screenings, such as mammograms and blood cholesterol tests. The High Option, coupled with CIGNA's highly rated national PPO network, allows members to live a healthy and enhanced lifestyle.

## What's New for 2012

- Weight Management Program that offers 100% coverage for visits to a nutritionist/dietician in-network
- Added pharmacogenomic testing for the use of Plavix

## Highlights

- **FREE** Diabetes care
- **FREE** Hypertension care
- **FREE** In-network preventive care
- **FREE** Weight Management Program
- **FREE** Tobacco Cessation Program
- Routine Dental
- Hearing Aid Benefit
- Choice of doctors, no referrals
- No denial for pre-existing conditions

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).

HO High Option Premiums		
	Self Only (471)	Self and Family (472)
Non-Postal		
biweekly	\$58.90	\$133.18
monthly	\$127.62	\$288.56
Postal Category 1		
biweekly	\$38.87	\$87.90
Postal Category 2		
biweekly	\$36.52	\$82.57

Career APWU employees hired before May 23, 2011, will have the same rates as the Category 2 rates shown above. Special Guides to Benefits are published for American Postal Workers Union (APWU) employees (see RI 70-2A).



# Health Management Programs

The APWU Health Plan continues to add new benefits to our Health Management Programs. The programs have been very successful, and members are praising the financial incentives received by joining, as well as the difference the programs have made in their lives by helping them get healthy.

**Diabetes Management Program** offers zero out-of-pocket costs for:

- In-network medical office visits for diabetes management
- In-network lab tests related to diabetes management
- Generic drugs from Medco by Mail for diabetes
- Insulin from Medco by Mail
- Blood glucose test strips, lancets, syringes, pen needles and insulin pump supplies from Medco by Mail
- Insulin Pump and supplies purchased in-network

**Hypertension Management Program** offers zero out-of-pocket costs for:

- In-network medical office visits for hypertension management
- In-network lab tests related to hypertension management
- Generic drugs from Medco by Mail for hypertension

## **NEW Weight Management Program**

Tired of having those extra pounds? The APWU Health Plan wants you to enhance your life and help you lose weight and eat healthier. Members who enroll and actively participate in the program will receive:

Zero out-of-pocket costs for:


- Office visits to a registered Dietician/  
Nutritionist




The APWU Health Plan High  
Option features the CIGNA  
Healthcare provider network





Medical Benefits	In-network 	Out-of-network
Network Provider	Use any physician within the CIGNA network	Use any physician
Calendar Year Deductible	\$275 per individual \$550 per family	\$500 per individual \$1,000 per family
Annual Out-of-Pocket Maximum	\$4,000 per person and family	\$10,000 per person and family
Referral Needed	No	No
Care When You Are Well	You pay	You pay
Maternity Services	10%	30% of the Plan allowance
Well Child Care	Nothing (through age 12)	Difference between the Plan allowance and the billed amount
Childhood Immunizations	Nothing (through age 12)	Difference between the Plan allowance and the billed amount
Adult Routine Exams (every other year)	Nothing	30% of the Plan allowance*
Preventive Screenings and Immunizations for Adults	Nothing	30% of the Plan allowance*
Diagnostic Hearing Test (every 2 years)	10%	30% of the Plan allowance*
Hearing Aids (every three years)	All charges in excess of \$1,500	All charges in excess of \$1,500
Care When You Are Sick	You pay	You pay
Diagnostic Tests or Imaging (X-ray, blood work, CT/PET scans, MRI)	10%	30% of the Plan allowance*
Office and Specialist Visits	\$18 copay, no deductible	30% of the Plan allowance*
Outpatient Surgery, Facility Fee, Lab Visits and Surgeon Fee	10%	30% of the Plan allowance*
Accidental Injury	Nothing	Difference between the Plan allowance and the billed amount
Urgent Care	\$40 copay	30% of the Plan allowance*
Emergency Room	10%	30% of the Plan allowance*
Inpatient Facility Fee	10%	30% of the Plan allowance* plus \$300 per admission
Inpatient Physician Surgery Fee	10%	30% of the Plan allowance*
	*If there is a difference between Plan allowance and billed amount, member is responsible for the difference	

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Prescription Drug Benefit	In-network You Pay <i>medco</i> <sup>®</sup>	Out-of-network You Pay
Retail Prescription Drugs (for up to a 30 day supply)	No deductible \$8 copay for generic drugs 25% for brand name \$200 maximum per RX	No deductible 50% (\$8 minimum coinsurance)
Mail Order Prescription Drugs (for up to a 90 day supply)	No deductible \$15 copay for generic drugs 25% for brand name \$600 maximum per RX	N/A
Mental Health Substance Abuse	In-network You pay  VALUEOPTIONS <sup>®</sup>	Out-of-Network You pay
Office Visit and Outpatient Treatment	\$18 (no deductible)	30% of the Plan allowance*
Diagnostics	10% of the Plan allowance	30% of the Plan allowance*
Inpatient Service	10% of the Plan allowance	30% of the Plan allowance*
Outpatient Service	10% of the Plan allowance	30% of the Plan allowance*
Dental Benefits	You pay	
Office Visits (2 per year) Restorative care (fillings) Simple Extractions Office visits include examinations prophylaxis (cleanings), X-rays of all types and fluoride treatment	30% of the Plan allowance* (no deductible)	
	*If there is a difference between Plan allowance and billed amount, member is responsible for the difference	

# The Consumer Driven Option

The Consumer Driven Option is APWU Health Plan's solution for inexpensive and comprehensive care. By making our members the primary decision-maker regarding the health care they receive and pay for, we limit the amount of over-usage that occurs and pass the savings on to the member. With a Personal Care Account (PCA) the member is given money up front to use for medical costs. Once the PCA is exhausted, members have access to coinsurance with an out-of-pocket maximum to protect against the unexpected. If there is money left over in the PCA, it will rollover to the next year, reducing the deductible (PCA has a maximum total allowed balance of \$5,000 for self, \$10,000 for self and family). Eligible routine and preventive care is covered in-network at no cost to you, so there is no need to worry about using your PCA. This is a different model of healthcare that, when used properly, can save you money.

## What's New for 2012

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## Highlights

- **FREE** Diabetes care
- **FREE** Tobacco Cessation Program
- **FREE** In-network preventive care
- Hearing Aid Benefit
- Choice of doctors, no referrals
- No denial for pre-existing conditions
- Healthy Back Program
- Healthy Pregnancy Program

CDO Premiums <small>Consumer Driven Option</small>		
	Self Only (474)	Self and Family (475)
Non-Postal		
biweekly	\$41.18	\$92.64
monthly	\$89.23	\$200.72
Postal Category 1		
biweekly	\$27.18	\$61.14
Postal Category 2		
biweekly	\$25.53	\$57.44
CDHP Preferred Rate		
biweekly	\$8.24	\$18.53
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# Health Management Programs

The Health Management Programs have been very successful. Members are praising the financial incentives received by joining, as well as the difference the program has made in their lives by helping them get healthy.

**Diabetes Management Program** offers zero out-of-pocket costs for:

- In-network medical office visits for diabetes management
- In-network lab tests related to diabetes management
- Generic drugs from Medco by Mail for diabetes
- Insulin from Medco by Mail
- Blood glucose test strips, lancets, syringes, pen needles and insulin pump supplies from Medco by Mail
- Insulin Pump and supplies purchased in-network

## Healthy Pregnancy Program

Through the program, a care coordinator will help you determine if you have any risks that could arise during your pregnancy. The program can also help you learn and practice healthy pregnancy habits and protect the well-being of your baby.

## Healthy Back Program

The Healthy Back Program is a specialized program providing individuals with lower back pain the personal support and information needed to learn effective ways to manage back pain. You'll receive support and information from a specially trained Health Coach who can help answer questions about treatment options as well as help you work with your doctor more effectively. The Healthy Back Program can help you take a more active role in your health.



The Consumer Driven Option is administered by UnitedHealthcare

Preventive Care	Zero out-of-pocket costs for in-network preventive care and screenings	
Adults/Children	In-network preventive care and screenings, such as mammograms, yearly check-ups and child and adult immunizations are covered at 100% by the Health Plan. No PCA dollars used.	
Personal Care Account (PCA)	Members of the Consumer Driven Option are given a lump sum of money every year which will pay for all medical costs at 100% until exhausted.	
Self	\$1,200	
Self and Family	\$2,400	
Deductible	When the PCA is exhausted, member must meet a Deductible.	
Self	\$600	
Self and Family	\$1,200	
Coinsurance	Once the deductible is met, members pay coinsurance for in- or out-of-network medical services and prescription drugs.	
	In-network (you pay)	Out-of-network (you pay)
Medical Services	15%	40%
Prescription Drugs (Retail or Mail Order)	25%	N/A
Out-of-pocket Maximum	Because the unexpected happens, the Consumer Driven Option has a built-in out-of-pocket maximum, which when reached allows the rest of your annual healthcare costs to be paid at 100% (excluding prescription drugs).	
	In-network	Out-of-network
Self	\$3,000	\$9,000
Self and Family	\$4,500	\$9,000
PCA Rollover	At the end of the year any funds left over in the PCA will roll over, adding to the next year's PCA and reducing next year's deductible. (Maximum account balance allowed in PCA is \$5,000 for self, \$10,000 for self and family)	



# Consumer Driven Option: When Your PCA is Exhausted

Medical Benefits

PPO



UnitedHealthcare®

Non-PPO

Provider Choice

Use any physician within the network

Use any physician

Staying within the PPO network will give you greater savings and will allow your PCA to go further.

Care When You Are Well  
(after PCA is exhausted)

You Pay

You Pay

Maternity Services

15%

40% of the Plan allowance

Well Child Care

Nothing (through age 18)  
PCA does not need to be exhausted

40% of the Plan allowance

Childhood Immunizations

Nothing (through age 18)  
PCA does not need to be exhausted

40% of the Plan allowance

Adult Routine Exams

Nothing  
PCA does not need to be exhausted

40% of the Plan allowance

Preventive Screenings for Adults

Nothing  
PCA does not need to be exhausted

40% of the Plan allowance

Diagnostic Hearing Test  
(every 2 years)

15%

40% of the Plan allowance

Hearing Aids

All charges in excess of \$1,500

All charges in excess of \$1,500

Care When You Are Sick  
(after PCA is exhausted)

You Pay

You Pay

Office and Specialist Visits

15%

40% of the Plan allowance

Outpatient Surgery Facility Fee, Lab Visits and Surgeon Fee

15%

40% of the Plan allowance

Accidental Injury, Emergency Room, Urgent Care

15%

15% of the Plan allowance

Inpatient Facility Fee

15%

40% of the Plan allowance

Inpatient Physician Visits Surgery Fee

15%

40% of the Plan allowance

Prescription Drug Benefit  
(after PCA is exhausted)

In-network  
You Pay

*medco*®

Out-of-network  
You Pay

Retail Prescription  
(for up to a 30 Day Supply)

25% coinsurance  
\$200 maximum per prescription

100%

Mail Order Prescription Drugs  
(for up to a 90 day supply)

25% coinsurance  
\$600 maximum per prescription

N/A



# 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:

## 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 professional.

## Online Access to Claims and Records

High Option members have exclusive access to eHealthRecord, an online tool to view claims, year-to-date information, detailed drug history and much more. Consumer Driven Option Members have access to UHC's online tools at: [www.welcometouhc.com/apwu](http://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 health care decisions in partnership with your doctor.

## FSA FEDS

Put more money in your pocket! Get the Fed-friendly tax break on your health care and dependent care expenses. Enroll in FSAFEDS during Open Season, November 14 through December 12, 2011 at: [www.FSAFEDS.com](http://www.FSAFEDS.com).



# Non-FEHB Benefits

As a member of the APWU Health Plan, you have the opportunity to take advantage of a variety of services negotiated for you to help you live an enhanced lifestyle. While these are not part of the FEHB program they are still great enhancements for members of the APWU Health Plan.

## American Hearing Benefits

**The American Hearing Benefits Program** is an optional program with no additional premium. It supplements the benefits of your APWU Health Plan coverage by providing free hearing screenings and a discount on hearing aid devices. It is available to all members and their immediate family. To activate this benefit, you must contact American Hearing Benefits (AHB) at 1-866-925-1287.

[www.americanhearingbenefits.com](http://www.americanhearingbenefits.com)

## Voluntary Benefits Dental Plan

**The Voluntary Benefits Dental Plan** is an optional program with an additional premium that supplements the dental benefits in your APWU Health Plan coverage. As a participant of the APWU Health Plan, when you enroll in the Voluntary Benefits Dental Plan you will receive a 7.5% reduction in their stated premiums. To enroll please call the Voluntary Benefits Plan office at:

(800) 422-4492 (203) 754-4410 (TDD)

[www.VoluntaryBenefitsPlan.com](http://www.VoluntaryBenefitsPlan.com)

## Medco's Online Store

- Only retail store to offer safety check of your prescriptions and over-the-counter medications
- Lower prices (on average) than retail drugstores
- Convenience of online shopping and home delivery
- Flat rate shipping of \$0.99
- My Rewards Dollars – receive a 5% in-store credit for future purchases when buying eligible items
- Over 27,000 health and beauty products to select from

[www.medcohealthstore.com](http://www.medcohealthstore.com)

## Conversion Plan Health Insurance

When coverage as an employee or family member ends with any Plan in the Federal Employees Health Benefits Program (FEHB), or when Temporary Continuation of Coverage (TCC) ends (except by cancellation or non-payment of premium), you may be eligible to convert to the APWU Health Plan Conversion Plan. Call 1-800-222-2798 or online at:

[www.apwuhp.com/upload/Conversion\\_Plan](http://www.apwuhp.com/upload/Conversion_Plan)





HEALTH PLAN

### APWU Health Plan

799 Cromwell Park Drive  
Suites K-Z  
Glen Burnie, MD 21061  
(800) 222-2798  
apwuhp.com



## How to Enroll

If you are already a member of the APWU Health Plan, you do not need to do anything. You will automatically remain a member in 2012.

### If you want to join the APWU Health Plan as a member:

#### Postal Service Employees:

Postal 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.

#### Non-postal employees/annuitants:

Enter the appropriate APWU Health Plan enrollment code on the FEHB Health Benefits Election Form (SF 2809). This form is available from your employing office. The form is also available at our website as well as the OPM website:

<http://www.apwuhp.com/enroll.php>  
[www.opm.gov/forms/pdf\\_fill/sf2809.pdf](http://www.opm.gov/forms/pdf_fill/sf2809.pdf)

Electronic and telephonic enrollment is available in some agencies and for most annuitants.



HEALTH PLAN

#### Contact us about the Consumer Driven Option

(800) 718-1299  
[welcometouhc.com/apwu](http://welcometouhc.com/apwu)

799 Cromwell Park Drive  
Suites K-Z  
Glen Burnie, MD 21061  
(800) 222-2798  
apwuhp.com

#### Contact us about the High Option

(800) PIC-APWU  
(800) 622-2511 (TDD)  
apwuhp.com

Cliff Guffey  
President

William J. Kaczor, Jr.  
Director



The Consumer Driven Option is administered by UnitedHealthcare



The APWU Health Plan High Option features the CIGNA Healthcare provider network

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You can view our brochure online at:

[www.apwuhp.com/visitors.php](http://www.apwuhp.com/visitors.php)

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 e-mail through the website, [www.apwuhp.com](http://www.apwuhp.com), or by calling (800) 222-APWU (2798).