

# Postal Worker

**Our Purpose ... Your Health**  
**APWU HEALTH PLAN**  
**Open Season Nov. 9 - Dec. 14**

# Our Purpose ...Your Health

At APWU Health Plan our purpose is to be there for your healthcare needs. Whether it's for a routine screening or a complicated procedure, we will make sure you receive the proper care and the coverage that you and your family deserve. With two comprehensive health plans, you have the choice to pick the plan that fits your unique lifestyle.

This year, the APWU Health Plan is pleased to announce both enhancements to benefits, and programs that were designed with you and your health in mind. You told us what you wanted, and we worked hard to make it a reality.



*Open Season Is Nov. 9 - Dec. 14*



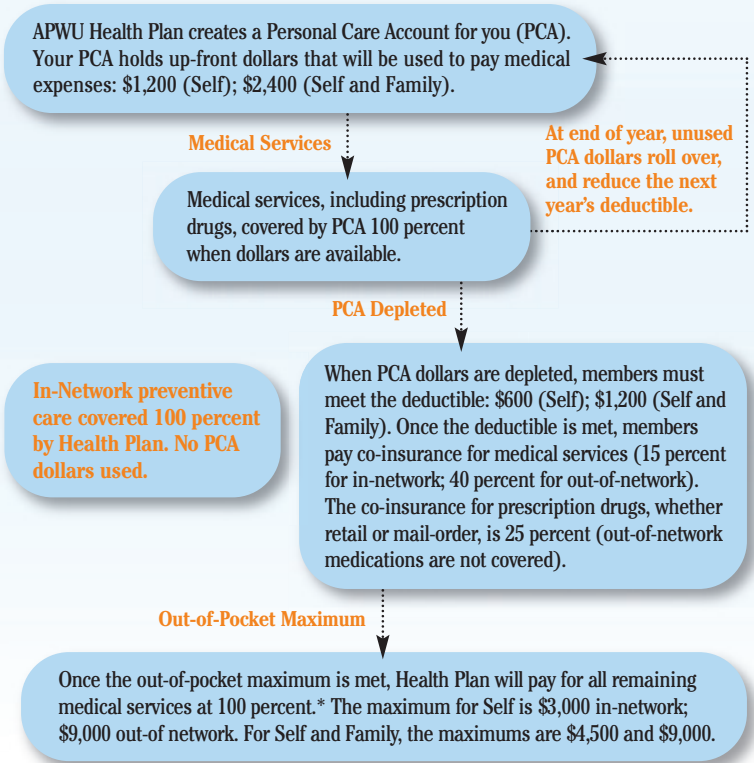
## Consumer Driven Option

The versatile Consumer Driven Option adds more value with a Diabetes Management Program. Along with the flexibility of a Personal Care Account, free in-network preventive care, and a low APWU-bargained premium, APWU Health Plan primary members enrolled in the Consumer Driven Option's diabetes program and who participate as required may be eligible for generic diabetes drugs, insulin and test strips payable at 100 percent. Members may also be eligible for in-network medical office visits for diabetes management payable at 100 percent.

Other changes to the Consumer Driven Option include:

- Emergency-room physicians in PPO hospitals will be paid as in-network;
- The Plan will pay 90 percent of services at any Transplant Center of Excellence;
- The Plan will pay 90 percent of services at any Cancer Center of Excellence;
- Coverage for testing to optimize certain prescription drug therapies (e.g., Warfarin and Tamoxifen);
- Enhancements to the out-of-network mental health benefit; and
- Eligibility for \$100 annually toward smoking cessation programs.

## How It Works



\* Does not include prescription drugs.

## 2010 CONSUMER DRIVEN OPTION PREMIUMS

	Self Only Plan 474	Self & Family Plan 475
<b>Active APWU Members</b>		
You Pay Biweekly	\$7.77	\$17.48
<b>Non-Members of APWU</b>		
They Pay Biweekly	\$22.53	\$50.69
<b>Retirees</b>		
You Pay Monthly	\$84.17	\$189.37





## High Option

For 2010, APWU Health Plan's renowned High Option has a variety of new features, most notably an enhanced dental feature and two chronic-illness management programs.

In response to requests and to better serve our members' needs, APWU Health Plan is implementing a Diabetes Management Program and a Hypertension Management Program. APWU Health Plan primary members who participate in the Diabetes Management Program may be eligible for a "zero-dollar" co-pay for mail-in generic drugs, insulin and test strips. Members in the Hypertension Management

Program may be eligible for mail-in generic drugs. Program members may also be eligible for a "zero-dollar" co-pay for in-network diabetes and hypertension-related office visits and lab tests.

The High Option's dental benefit has been enhanced to cover routine procedures at 70 percent of the plan allowance.

Other changes to the High Option include:

- Free in-network health screenings;
- Emergency-room physicians in PPO hospitals will be paid as in-network
- Coverage for testing to optimize certain prescription drug therapies (e.g., Warfarin and Tamoxifen);
- Enhancements to the out-of-network mental health benefit; and
- Eligibility for \$100 annually towards smoking-cessation programs.

### 2010 HIGH OPTION PREMIUMS

	Self Only Plan 471	Self & Family Plan 472
<b>Active Postal Members</b>		
You Pay Biweekly	\$29.84	\$67.47
<b>Retirees</b>		
You Pay Monthly	\$111.46	\$252.04

## Why APWU Health Plan

APWU Health Plan is dedicated to providing exceptional member service and making our purpose your health. We are confident that 2010 will be a banner year for APWU Health Plan, and are primed to offer our members innovative new benefits and enhancements designed to help you live life well.

Are you all-union all the time? It's a fact that being a part of the union's health plan is beneficial for both the union and its members. The union is responsible for looking after

your best interests; the health plan is no different. APWU members who enroll in the Consumer Driven Option are presented with a premium that is affordable; in fact it is one of the lowest in the federal system. This rate was bargained for you by your union. The High Option offers great comprehensive benefits at half the cost of other comparable plans. APWU members and APWU Health Plan can work together to ensure the vitality of the union for years to come.

## 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 2010.

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

### Postal Service Employees:

Complete a Health Benefits Registration form (SF 2809) by calling PostalEASE at (877) 477-3273. (follow prompts) You must have a Personal Identification Number (PIN) in order to enroll. You can also enroll on the PostalEASE Employee Web on the intranet (from the blue pages) if you have access. For questions about enrolling, contact your local personnel office.

### 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:

[apwuhp.com/standardplan/enroll.html](http://apwuhp.com/standardplan/enroll.html)  
[opm.gov/forms/pdf\\_fill/sf2809.pdf](http://opm.gov/forms/pdf_fill/sf2809.pdf)

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



## Medical Benefits

	PPO	Non-PPO
Provider Choice	Use any physician within the 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

### 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 (Up to age 22)	Difference between the Plan allowance and the billed amount
Adult Routine Exams (every other year)	\$18 copay, no deductible	N/A
Preventive Screenings for Adults	Nothing	30% of the Plan allowance
Diagnostic Hearing Test (every 2 years)	10%	30% 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

	You Pay	You Pay
Office and Specialist Visits	\$18 copay, no deductible	30% of the Plan allowance
Outpatient Surgery, Hospital Care, and Lab Visits	10%	30% of the Plan allowance
Accidental Injury	Nothing	Difference between the Plan allowance and the billed amount
Inpatient Hospital Care	10%	30% of the Plan allowance
Inpatient Surgery	10%	30% of the Plan allowance

## Prescription Drug Benefit

	Network	Non-Network
	You Pay	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	Out-of-Network
	You Pay	You Pay
Mental Health Substance Abuse (Prior approval required)	<b>Inpatient-</b> 10%, no deductible <b>Outpatient-</b> \$18 copay per visit, no deductible	<b>Inpatient-</b> 30% of charges and \$300 per admission <b>Outpatient-</b> \$500 self/\$1000 family calendar year deductible and 30% of our allowance

## Dental Benefits

	You Pay
Office Visits, Restorative Care (fillings), Simple Extractions. (Office visits include examinations, prophylaxis (cleanings), X-rays of all types and fluoride treatment.)	30% of the plan allowance and the difference between our allowance and the billed amount (no deductible)




# Our Purpose...Your Health.

Take Your Pick From Two Great Options



## Consumer Driven Option


 <p>Self Only (474)</p>	Postal Premium	
	Biweekly CDHP Preferred Rate	Monthly Annuitant Retirees
	\$7.77	\$84.17
Self and Family (475)	\$17.48	\$189.37

Contact us about the  
**Consumer Driven Option**  
(800) 718-1299  
myuhc.com  
User ID: APWUCDO  
Password: CDOINFO

The Consumer Driven  
Option is administered by  
UnitedHealthcare



## High Option

 <p>Self Only (471)</p>	Postal Premium	
	Biweekly	Monthly Annuitant Retirees
	\$29.84	\$111.46
Self and Family (472)	\$67.47	\$252.04

Contact us about the  
**High Option**  
(800) PIC-APWU  
(800) 622-2511 (TDD)  
apwuhp.com

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



799 Cromwell Park Drive Suites K-Z  
Glen Burnie, MD 21061  
(800) 292-2798  
(800) 622-2511 (TDD)  
apwuhp.com

William Burrus, President



William J. Kaczor Jr., Director

The rates above do not apply to all employees. If you are in a special enrollment category, please refer to your 2010 Guide to Federal Benefits or contact the agency that maintains your health benefits enrollment.