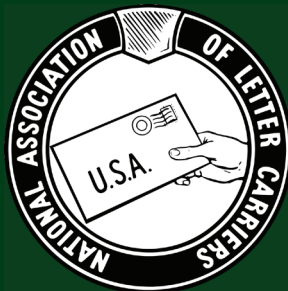


# The NALC Health Benefit Plan



HBR Report  
Jan/Feb 2024  
Vol. 24-1

*Happy  
New  
Year!*

**Brian L. Renfroe, President**  
**Stephanie M. Stewart, Director**

Board of Trustees:  
Lawrence D. Brown, Jr., Chairman  
Sandra D. Laemmel  
Charles P. Heege

# Director's Report



## Benefit Highlights 2024

Over the last few months, we have written a lot about the new SilverScript Prescription Drug Plan and the coverage provided for Medicare Eligible members. While this has been an extremely important topic, I would like to start the new year discussing the NALC Health Benefit Plan's other 2024 benefit package additions and expansions that were added specifically for our health benefit plan members.

Keep in mind, this is not an inclusive list of all benefits, but highlights our continued progress each year as we become better. It is my hope that not only will you learn more about these benefits but will share them with your branch members who may need additional care.

2024 - With this new benefit package, members will also have access to the following:

- Bend's Behavioral Health Coaching (High Option Members)
- Dermatology Services through the Telehealth Program (High Option Members)
- Hearing Aid Benefit Expansion - \*\*Specifically influenced by member feedback.
- Foot Orthotic Benefit Expansion - \*\* Specifically influenced by member feedback.
- A1C Testing
- Skin Cancer Screening - \*\*Specifically influenced by member feedback.
- Infertility Benefit Expansion
- Gender Affirmation
- And more

To learn more about these benefits or programs, please visit the Plan's website at [www.nalchbp.org](http://www.nalchbp.org). You can also reach one of our knowledgeable Customer Service Representatives at 888-636-6252.

## New for 2024 NALC HBP Telehealth - Dermatology

Did you know that the average wait time to see an in-person Dermatologist is 34 days. Using our new NALC HBP Telehealth Dermatology program, you can have a same day asynchronous visit while receiving your diagnosis and treatment plan within 72 hours, including prescribed medications if medically necessary. This program gives adults and children of any age an online program to help manage conditions such as acne, rosacea, or psoriasis.

For more information, please visit [www.nalchbptelehealth.org](http://www.nalchbptelehealth.org) or call 888-541-7706.



## New for 2024 Skin Cancer Screening

Skin cancer screenings can detect cancer at an early stage when the chance of a full recovery is at its highest. Since letter carriers are often in the sun, we added a new skin cancer screening benefit for 2024. For High Option, if an In-Network provider is used, the Plan will pay 85% of the Cigna contracted Plan allowance (after calendar year deductible). For CDHP, if an In-Network provider is used, the Plan will pay 80% of the Cigna contracted Plan allowance (after calendar year deductible).

## New for 2024 Behavioral Health Coaching Program

Bend Health Coaching empowers families to feel better today and thrive tomorrow. Bend offers support for mental health, behavioral health, and substance use for kids and teens ages 1-17. With a family-first approach to care, parents and caregivers are engaged in the care plan. Bend offers:

- Appointments in days
- Live video sessions from home or school
- Immersive learning content to reinforce concepts and skills
- Coordination with your pediatrician



NALC Health Benefit Plan members with dependents ages 1-17 enrolled on the Plan are eligible for coaching at no cost to you. Learn more or sign up at [www.bendhealth.com/NALCHBP](http://www.bendhealth.com/NALCHBP).

## Expanded in 2024 Foot Orthotics

With letter carriers in mind, we have expanded our custom functional foot orthotic benefit to two pairs annually. For High Option, if an In-Network provider is used, the Plan will pay 85% of the Plan allowance without a maximum plan payment amount (after calendar year deductible). For CDHP, if an In-Network provider is used, the Plan will pay 80% of the Plan allowance without a maximum plan payment amount (after calendar year deductible).

Custom foot orthotics can help do the following by distributing weight evenly and properly:

- Improve balance
- Improve movement
- Reduce back and knee pain
- Relieve heel pain and arch pressure
- Reduce muscle fatigue
- Create better motion control



## Preventive Care

Start the new year by making healthy choices. Getting recommended screenings is one of the most important things you can do for your health. Preventive care helps prevent health problems or finds them before they become serious. If an In-Network provider is used for a covered routine service, the Plan pays 100% and members have no copayment or coinsurance. Talk to your doctor about maintaining or catching up on recommended screenings.

## CVS Caremark's Adopt-A-Member Pharmacy Program

Are you struggling to understand your prescriptions? The Adopt-A-Member Pharmacy program is here to help with a team of experts who deal with persistent and/or complicated prescription benefit issues. Through outreach, members will learn about the pharmacy benefits of their plan which will ultimately help them become self-sufficient. The Adopt-A-Member staff will assist members in finding prescription drugs, get in touch with pharmacies to speed up fills, and provide them with updates on the status of their requests. If longer term assistance is necessary, members may be enrolled for up to six months, the team helps members become independent. The program includes outreach to doctors, pharmacies, and the prior authorization department to address any member issues. For more information please contact the NALC Health Benefit Plan at 888-636-NALC (6252).





# Who is Your HBR?

Only complete this form if the information has changed in the last year.

## Who is Your HBR?

We would like to update our Health Benefit Representative (HBR) files. Please report any information that has changed for your branch to the:

NALC Health Benefit Plan  
20547 Waverly Ct  
Ashburn, VA 20149

and

NALC Headquarters  
100 Indiana Ave, NW  
Washington, DC 20001

Branch # \_\_\_\_\_

Branch President's Name: \_\_\_\_\_

Branch Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Branch Phone: \_\_\_\_\_ Branch Fax: \_\_\_\_\_

Branch Email: \_\_\_\_\_

Branch website: \_\_\_\_\_

NALC Region: \_\_\_\_\_ Work Status (Active/Retired): \_\_\_\_\_

HBR's Name: \_\_\_\_\_

Member ID #: N32 \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ (This begins with N32+6 numbers)  
(\* The member ID # is required to verify coverage in the NALC Health Benefit Plan. See the Constitution of the NALC Health Benefit Plan Article 4, Section 3.)

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home E-mail: \_\_\_\_\_

Date you filled the position of HBR: \_\_\_\_\_

Are you replacing the current HBR? \_\_\_\_\_

If yes, provide the name of the former HBR: \_\_\_\_\_

Would you like information mailed to your branch or your home? \_\_\_\_\_

Per the NALC Constitution (page 69) Article 4. Sec. 1. The officers of the branch shall include a Health Benefits Representative. Sec. 2. All officers shall be elected for a term of one, two or three years. Sec. 3. With the exception of the office of President, Branches may consolidate the offices of the Branch. However, if there are less than ten (10) active members, the office of the President may be combined with other offices.

\_\_\_\_\_  
Printed Name of the Branch President

\_\_\_\_\_  
Signature of the Branch President

\_\_\_\_\_  
Date

# Branch Reimbursement Instructions

By approval of the Board of Trustees, the Plan will accept requests for branch reimbursement *BEARING A POSTMARK NO LATER THAN APRIL 30, 2024*. Each request must be accompanied by a branch reimbursement certificate and a roster of branch members enrolled on December 31, 2023. **Copies of branch rosters must be ordered by completing the Branch Printout Request, or by calling the Health Benefit Plan 888-636-NALC (6252). If calling, ask to speak to someone in the Executive Office.**

Reimbursement will be either the amount of the expenses attested to on the certificate, or the amount computed at seventy-five (75) cents per eligible member, whichever total is lower. **All requests must include (a) the specific amount of expenses incurred; and (b) the number of members for whom reimbursement is requested.**

Reimbursement will be made only for the employees and annuitants enrolled on December 31, 2023, under Chapter 89, Title 5, United States Code-Health Insurance, effective July 9, 1960.

The request should NOT include:

- Enrollees terminated from the Plan prior to December 31, 2023
- Any type of converted member or dependent nongroup plan, or
- Policyholders under our old program (those who retired before July 1, 1960).

**Reimbursement will be made payable only to the Branch Secretary of record, and only if the certificate for reimbursement is signed by either the Branch President or Branch Secretary. The signature of the Branch Health Benefit Representative or Treasurer will NOT be acceptable.**

**Please send to: NALC Health Benefit Plan, Attn: Executive Office  
20547 Waverly Court, Ashburn, VA 20149**

---

## Branch Printout Request

In order to receive your reimbursement, you must first complete the Branch Printout Request or call the Plan at 888-636-NALC (6252) and ask for the Executive Office to obtain a copy of your Branch membership list. The Branch Reimbursement Certificate with the Branch Roster must be postmarked by April 30, 2024.

### NALC HBP Branch Printout Request

Branch # \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

I request a Branch printout for the Branch Reimbursement Certificate (January 2024).

**NALC Health Benefit Plan  
20547 Waverly Court, Ashburn, VA 20149**

*Brian L. Renfroe, President*

*Stephanie M. Stewart, Director*

**Board of Trustees**

*Sandra D. Laemmel*

*Lawrence D. Brown, Jr., Chairman*

*Charles P. Heege*

**Branch Reimbursement Certificate**

REIMBURSEMENT WILL NOT BE CONSIDERED UNLESS THIS CERTIFICATE IS COMPLETED IN FULL. EVERY BLANK MUST BE FILLED IN. PLEASE PRINT. MAIL THE COMPLETED FORM TO THE ADDRESS ABOVE.

**DEADLINE: April 30, 2024**

Branch Number \_\_\_\_\_ Branch Secretary \_\_\_\_\_

Branch Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Branch Phone # \_\_\_\_\_ Branch E-mail \_\_\_\_\_

I certify that for the calendar year 2023, the above-referenced Branch incurred expenses for and on behalf of the NALC Health Benefit Plan. I further certify that expenses were incurred for the following reasons: (a) contacting hospital authorities and physicians to familiarize them with our Plan and to distribute claim forms and similar material relating to the Plan; and (b) assisting enrollees in filing claims properly, and distributing necessary forms to them for submission to the Plan.

I further certify that the number of members shown below includes only employees and annuitants enrolled under the Plans on December 31, 2023, and does not include any enrollment terminated before December 31, 2023, any type of converted members, or any annuitant who retired prior to July 1, 1960.

As reimbursement, the Branch is willing to accept (1) seventy-five cents (\$0.75) for each member enrolled in the NALC Health Benefit Plan High Option, CDHP Option or Value Option on December 31, 2023, OR (2) the amount of expenses incurred, whichever amount is less.

PLEASE OBTAIN YOUR BRANCH ROSTER BY CONTACTING THE PLAN AT 888-636-NALC (6252) (ASK TO SPEAK TO SOMEONE IN THE EXECUTIVE OFFICE) FOR YOUR BRANCH MEMBERSHIP ENROLLED UNDER THE PLANS ON DECEMBER 31, 2023.

1. Number of members \_\_\_\_\_ @ \$0.75 =\$ \_\_\_\_\_

2. Amount of expenses incurred for the calendar year 2023 = \$ \_\_\_\_\_

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title (must be Branch President or Secretary)

## **Important Medicare Information**

Make sure to mark your calendars for a Special Enrollment Period (SEP) that will be offered to most Postal Service annuitants and their eligible family members.

Starting in April of 2024, individuals who are eligible for Medicare Part A and are not currently participating in Medicare Part B, will have a six-month opportunity to select Medicare Part B without incurring a late enrollment penalty. As part of the Postal Reform Act, the USPS will pay the late enrollment penalty.

Keep in mind, if you were previously eligible for Medicare Part B and chose not to enroll but now have experienced some regrets, this one-time SEP is significant to your health and finances.

**NALC Health Benefit Plan**  
**888-636-NALC**

**PPO Network Providers**  
**877-220-NALC**

**Mental Health / Substance Use Disorder**  
**877-468-1016**

**Prescription Drug Program**  
**800-933-NALC**

**CVS Specialty™ Pharmacy**  
**800-237-2767**

**Precertification**  
**877-220-NALC**

**Fraud Hot Line**  
**888-636-NALC**