The NALC Health Benefit Plan





Report ABR Report

Fredric V. Rolando, President ■ Brian Hellman, Director 20547 Waverly Court Ashburn, VA 20149 - 703.729.4677





Board of Trustees



Lawrence D. Brown, Jr., Chairman



Michael J. Gill

Director's Report

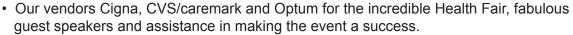


NALC HBP 2017 Seminar

I would like to thank everyone who attended the 2017 NALC Health Benefit Plan Seminar in Florida. The seminar was packed with information that was presented in a short amount of time. We saw a lot of new faces in addition to our veteran HBR's. We hope you enjoyed the new format of integrating our guest speakers throughout the classroom training. I appreciate you taking the time to come to the seminar and your dedication to helping the members at your individual branches.

A Special Thank You to the following:

- Fredric Rolando, NALC President, for attending and speaking at the Seminar.
- Larry Brown and Mike Gill, Trustees, for attending the Seminar. (Thanks for helping to stand guard during breaks!)
- Wayne White, Past Region 9 NBA, for the Opening Prayer.
- Deborah Ferencak USPS Customer Relations Coordinator, for all the help with the onsite Post Office.

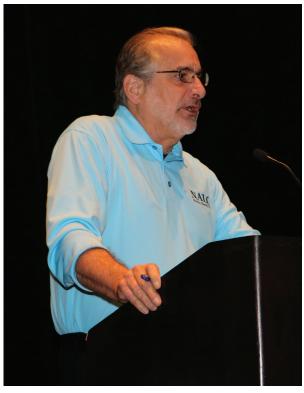


We appreciate everyone's help and support with the Seminar.





Seminar Highlights



Left: President Rolando; Right: Brian Hellman, Director; Below: Mike Gill and Larry Brown, Trustees







Newsletter Winner Vicki Piotter, Br. 916

Award Recipients



The following HBR's received awards but missed the deadline to be printed in the Seminar Info booklet:

40 Year HBR

Mary Houman – Br. 4268 - 10 Years Felipe Guzman – Br. 2130 - 10 Years Juan Vilches - Br. 233 - 10 Years Richard Shafer - Br. 489 - 20 Years Lyal Hanson - Br. 4319 - 40 Years Stephen Trucco - Br. 213 - 40 Years

Branch Printout Request

Below is the Branch Printout Request. Please follow the instructions carefully. In order for you to receive your reimbursement, you must complete the Branch Printout Request or call the Plan at 1-888-636-NALC (6252) and ask for the Executive Office to obtain a copy of your Branch membership list. The deadline is April 30, 2018.

NOTE: Please remember to complete the Branch Printout Request below to receive a copy of your branch roster that needs to be included when submitting your Branch Reimbursement Certificate.

NALC Health Benefit Plan Branch Printout Request
Branch #
Name:
Title:
Address:
I request a Branch printout for the Branch Reimbursement Certificate (January 2018).

NALC Health Benefit Plan	888-636-NALC	
Recorded Benefit Information	888-636-NALC	
Prescription Drug Program	800-933-NALC	
CVS/caremark Specialty Pharmacy	800-237-2767	
PPO Network Providers	877-220-NALC	
Precertification	877-220-NALC	
Fraud Hot Line	888-636-NALC	
Mental Health / Substance Abuse	877-468-1016	
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Branch Reimbursement

NALC HEALTH BENEFIT PLAN 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, 2018*. Each request must be accompanied by a branch reimbursement certificate and a roster of branch members enrolled on December 31, 2017. **Copies of branch rosters must be ordered by completing the Branch Printout Request, or by calling the Health Benefit Plan 1-888-636-NALC (6252), 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, 2017, under Chapter 89, Title 5, United States Code-Health Insurance, effective July 9, 1960.

The request should NOT include:

- Enrollees terminated in our plan prior to December 31, 2017
- 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 703-729-4677 1-888-636-NALC (6252) Fredric V. Rolando, President

Brian Hellman, Director

Michael J. Gill

Board of Trustees Lawrence D. Brown, Jr., Chairman

Randall L. Keller

Branch Reimbursement CERTIFICATE

REIMBURSEMENT WILL NOT BE CONSIDERED UNLESS THIS CERTIFICATE IS COMPLETED IN FULL. EVERY BLANK MUST BE FILLED IN. PLEASE PRINT.

	DEADLINE:	April 30, 2018		
Branch Number	Branch Se	ecretary		
Branch Address				
City			State	Zip
Branch Phone #	Br	anch E-mail		
of the NALC Health Ber contacting hospital auth and similar material rela	endar year 2017, the above-refe nefit Plan. I further certify that e norities and physicians to familia ating to the Plan; and (b) assisti m for submission to the Plan.	expenses were inc arize them with our	urred for the Plan and to	following reasons: (a) distribute claim forms
under the Plans on Dec	number of members shown bel cember 31, 2017, and does not converted members, or any annu	include any enrollr	ment termina	ated before December
the NALC Health Benef	Branch is willing to accept (1) s fit Plan High Option , CDHP Op s incurred, whichever amount is	tion or Value Option	,	
(ASK TO SPEAK TO S	R BRANCH ROSTER BY CON OMEONE IN THE EXECUTIVE HE PLANS ON DECEMBER 31	OFFICE) FOR YO		,
Number of members	s@ \$0.75 =\$			
2. Amount of expenses	incurred for the calendar year	2017 = \$		
Date Submitted N	lame	 Title (must	be Branch I	President or Secretary)

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

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January 2018

