## 2020 Rate Information for QualChoice

To compare your FEHB health plan options please go to <u>www.opm.gov/fehbcompare.</u>

To review premium rates for all FEHB health plan options please go to <u>www.opm.gov/FEHBpremiums</u> or <u>www.opm.gov/</u><u>Tribalpremium</u>.

Non-Postal rates apply to most non-Postal employees. If you are in a special enrollment category, contact the agency that maintains your health benefits enrollment.

## Postal ratesapply to certain United States Postal Service employees as follows:

- **Postal Category 1 rates** apply to career bargaining unit employees who are represented by the following agreements: APWU, IT/AS, NALC, NPMHU, and NRLCA.
- If you are a career bargaining unit employee represented by the agreement with NPPN, you will find your premium rates on <a href="https://liteblue.usps.gov/fehb">https://liteblue.usps.gov/fehb</a>.
- **Postal Category 2 rates** apply to career bargaining unit employees who are represented by the following agreement: PPOA.

## Non-Postal rates apply to all career non-bargaining unit Postal Service employees. Postal rates do not apply to noncareer Postal employees, Postal retirees, and associate members of any Postal employee organizations who are not career Postal employees.

If you are a Postal Service employee and have questions or require assistance, please contact:

USPS Human Resources Shared Service Center: 877-477-3273, option 5, Federal Relay Service 800-877-8339.

Premiums for Tribal employees are shown under the monthly non-Postal column. The amount shown under employee contribution is the maximum you will pay. Your Tribal employer may choose to contribute a higher portion of your premium. Please contact your Tribal Benefits Officer for exact rates.

		Non-Postal Premium				Postal Premium	
		Biweekly		Monthly		Biweekly	
Type of Enrollment	Enrollment Code	Gov't Share	Your Share	Gov't Share	Your Share	Category 1 Your Share	Category 2 Your Share
Arkansas							
High Option Self Only	DH1	\$235.77	\$111.40	\$510.84	\$241.36	\$108.12	\$98.30
High Option Self Plus One	DH3	\$504.12	\$170.27	\$1,092.26	\$368.92	\$163.27	\$142.26
High Option Self and Family	DH2	\$546.47	\$359.05	\$1,184.02	\$777.94	\$351.46	\$328.70
Standard Option Self Only	DH4	\$203.28	\$67.76	\$440.44	\$146.81	\$65.05	\$56.24
Standard Option Self Plus One	DH6	\$394.88	\$131.63	\$855.58	\$285.19	\$126.36	\$109.25
Standard Option Self and Family	DH5	\$530.22	\$176.74	\$1,148.81	\$382.94	\$169.67	\$146.69