

## 2021 Rate Information for QualChoice

To compare your FEHB health plan options please go to [www.opm.gov/fehbcompare](http://www.opm.gov/fehbcompare).

To review premium rates for all FEHB health plan options please go to [www.opm.gov/FEHBpremiums](http://www.opm.gov/FEHBpremiums) or [www.opm.gov/Tribalpremium](http://www.opm.gov/Tribalpremium).

**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 rates apply 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 agreement: NALC.
- **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 and career bargaining unit employees who are represented by the following agreements: APWU, IT/AS, NPMHU, NPPN and NRLCA. Postal rates do not apply to non-career 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.

Type of Enrollment	Enrollment Code	Non-Postal Premium					
		Biweekly		Monthly			
		Gov't Share	Your Share	Gov't Share	Your Share	Gov't Share	Your Share
Type of Enrollment	Enrollment Code	Non-Postal Premium				Postal Premium	
		Biweekly		Monthly		Biweekly	
		Gov't Share	Your Share	Gov't Share	Your Share	Category 1 Your Share	Category 2 Your Share

### Arkansas

High Option Self Only	DH1	\$241.58	\$112.54	\$523.42	\$243.84	\$109.18	\$99.12
High Option Self Plus One	DH3	\$515.92	\$171.97	\$1,117.82	\$372.61	\$165.09	\$142.74
High Option Self and Family	DH2	\$562.25	\$361.38	\$1,218.21	\$782.99	\$353.57	\$330.15
Standard Option Self Only	DH4	\$207.35	\$69.11	\$449.25	\$149.75	\$66.35	\$57.37
Standard Option Self Plus One	DH6	\$402.80	\$134.26	\$872.72	\$290.91	\$128.89	\$111.44
Standard Option Self and Family	DH5	\$540.84	\$180.28	\$1,171.82	\$390.61	\$173.07	\$149.63