



*2018 Arkansas Federal Employees and Annuitants
Benefits Overview*

Choose Your Plan

2018 Arkansas Federal Employees and Annuitants



Benefits	You Pay	
	High Option	Standard Option
Annual Deductible	\$500 Self Only / \$1,000 Self Plus One and Self and Family	None
Medical Services Provided by Physicians		
Diagnostic and treatment services provided in the office	Office visit copayment: \$20 primary care; \$35 specialist	Office visit copayment: \$20 primary care; \$40 specialist
Service Provided by a Hospital		
Inpatient	\$100 copayment per day up to a maximum of \$500 per admission	\$200 copayment per day up to a maximum of \$1,000 per admission
Outpatient	\$100 copayment	\$200 copayment
Emergency Benefits		
Medical emergency	<ul style="list-style-type: none"> \$150 copayment Ambulance Services: Ground: \$100 copayment per trip Air/Sea: \$150 copayment per trip 	<ul style="list-style-type: none"> \$150 copayment Ambulance Services: Ground: \$100 copayment per trip Air/Sea: \$150 copayment per trip
Protection against catastrophic costs (your catastrophic protection out-of-pocket maximum)	Nothing after \$5,000 for self/\$10,000 for Self Plus One and Self and Family per contract per year. Out-of-Network: \$13,200 for Self, \$26,400 for Self Plus One and Self and Family.	Nothing after \$5,500 for self/\$11,000 for Self Plus One and Self and Family per contract per year.
Prescription Drugs		
Retail pharmacy	\$10 Tier I – \$40 Tier II – \$60 Tier III	\$10 Tier I – \$40 Tier II – \$60 Tier III
Self-administered specialty drugs	\$100 per prescription filled Tier IV	\$100 per prescription filled Tier IV
Mail order	\$0 Tier I – \$120 Tier II – \$180 Tier III	\$15 Tier I – \$120 Tier II – \$180 Tier III

This is a brief description of the features of the QualChoice multi-option plan underwritten by QCA Health Plan, Inc. Before making a final decision, please read the Plan's Federal brochure R173-860. All benefits are subject to the definitions, limitations, and exclusions set forth in the Federal brochure.

2018 Bi-Weekly Rates		Code	Non-Postal	Postal	
				Category 1	Category 2
High Option	Self Only	DH1	\$109.33	\$102.96	\$96.60
	Self Plus One	DH3	\$166.71	\$153.07	\$139.43
	Self and Family	DH	\$361.55	\$347.06	\$332.57
Standard Option	Self Only	DH4	\$66.01	\$60.07	\$54.79
	Self Plus One	DH6	\$128.23	\$116.69	\$106.43
	Self and Family	DH5	\$172.18	\$156.68	\$142.91

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to your special FEHB Guide or contact the agency which maintains your health benefits enrollment.



No PCP Referral
required for specialists



Local Support
to Answer your questions



Nationwide Network
for unforeseen illness or accidents
while traveling



Health and Wellness Support
for chronic and other health conditions



Statewide Network
for physician, hospital and pharmacy

QCARE Health & Wellness Programs

Diabetes Management

Personalized support, education, counseling and advocacy to help our members learn to live better with diabetes. Includes complimentary glucometer for participating members.

Heart Health

The support needed to help our members reach their optimal healthcare goals and follow the treatment plan established by their physician. Includes complimentary blood pressure monitor.

Cancer Management

Personalized and compassionate care to help members understand their cancer diagnosis and how to be an active participant in their treatment.

Special Additions Maternity Management

A Special Additions registered nurse serves as an advisor and maternal/newborn specialist for our moms-to-be.

QuicRewards Savings Program

Through this exclusive QualChoice program, members receive great savings from a number of leading health-related companies, such as Jenny Craig. These programs are offered to our members as a complement to their health plans and at discounts not generally available to the public.

*This discount program is not an endorsement of any services, products or businesses. The member is responsible for selecting their own fitness or wellness vendors and products and should not rely on this discount program to select or recommend any vendor or product.**

**This is a non-FEHB benefit.*

Check QualChoice.com often for new programs, features and updates.

FREE for FEHB QualChoice Members

FEHB Vision Care Discount Program

QualChoice has partnered with Superior Vision to give our Federal Employee Health Benefits (FEHB) members access to special discounts. You'll receive 10%–30% savings on:

- Frames
- Lenses
- Lens upgrades
- Contact lenses

SUPERIOR VISION 
See yourself healthy.

Customer Service: 855.228.7790

**This is a non-FEHB benefit.*

Choose your 2018 plan today.

Open Season changes must be made between
November 13 and December 11, 2017.

1. Choose a 2018 medical plan: Standard Option or High Option.
2. Determine your status: Self Only, Self Plus One, or Self and Family.
3. Confirm your enrollment code below. Codes are specific to QualChoice.

Plan Options	Self Only Code	Self Plus One Code	Self and Family Code
High Option	DH1	DH3	DH2
Standard Option	DH4	DH6	DH5

4. Download an SF 2809 form at www.opm.gov/forms.
5. Complete the form with the information required.
6. Provide a copy to your benefits or human resources office.

Annuitants: For enrollment information, visit the U.S. Office of Personnel Management at opm.gov/healthcare-insurance/healthcare/plan-information/enroll.

View your QualChoice Federal Employees Health Benefits online anytime by logging in at QualChoice.com or opm.gov/insure. For a printed copy of your plan brochure, use our QuicQuestions messaging system to send a request — or call Customer Service at 501.228.7111 or 800.235.7111.

