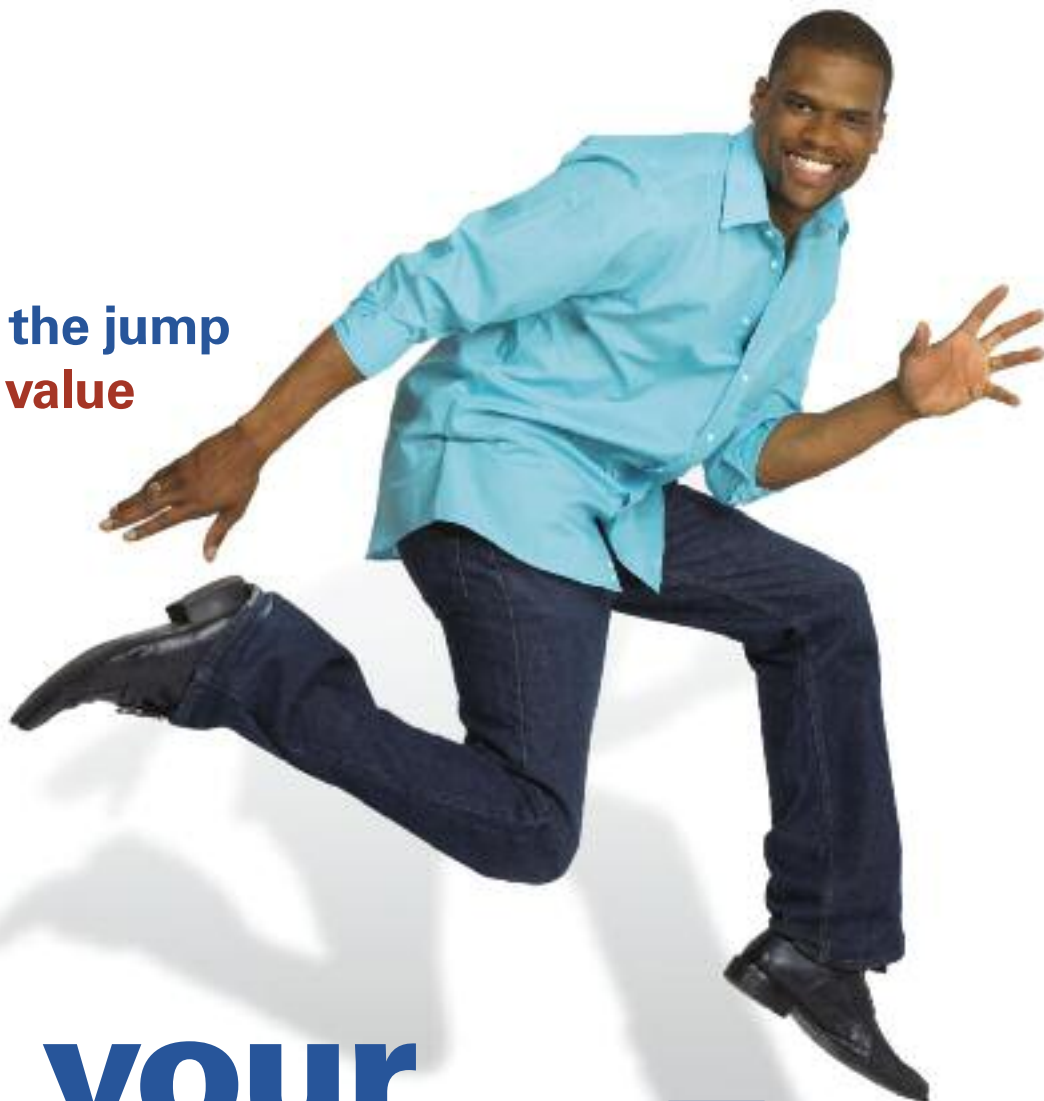


Open to ALL Federal and Postal employees

MHBPSM

MAIL HANDLERS BENEFIT PLAN

Still haven't made the jump
to the **exceptional value**
of MHBP?



**make your
move!**

- Nationwide PPO coverage
- 100% coverage for preventive care
- Generic drugs just \$10
- Optional dental and vision plans

All this and more when you switch to MHBP this Open Season!



Move to the right plan for you.

MHBP has been providing health benefits to federal and postal employees for over 45 years — moving thousands to experience the MHBP value. Now it is your turn. Find your MHBP match and MOVE on over.

- **Value Plan**

Save money on your premiums while getting valuable health coverage. With one of the lowest rates in the FEHBP, this money-saving PPO plan offers you super-low premiums, great benefits and more.

- **Standard Option**

Get comprehensive health coverage and predictable copays with the Standard Option. This plan's low out-of-pocket costs let you take the guesswork out of your health care expenses.

- **Consumer Option**

Get more control of your health care spending with our high-deductible health plan that includes a health savings account (HSA). This PPO plan puts up to \$1,690 tax-free into your HSA, pays 100% of your preventive care and provides top-notch coverage after your deductible is met.

- **Supplemental Dental Plan***

Get affordable, comprehensive coverage including oral exams, cleanings, X-rays, fillings, root canals, oral surgery and much more.

- **Supplemental Vision Plan***

With premiums starting at just \$8.60 a month, this super-affordable vision plan gives you fantastic nationwide coverage for eye exams, frames and lenses, contacts, laser vision correction discounts and more.

Membership Extras*

MHBP members can maintain their health with substantial savings off retail prices for services including:

- Discounts on LASIK laser vision correction with U.S. Laser Network and QualSight®
- Savings of up to 40% on eye exams and eyewear with EyeMed®
- Discounted hearing exams and 25% savings on hearing aids with HearPO
- Healthy living benefits from GlobalFit™ to help you get fit, lose weight and feel your best

NEW FOR 2010, MHBP members can save 20% on everyday CVS/pharmacy brand health-related items that are health care flexible spending account (HCFSA)-eligible when they present their CVS Caremark ExtraCare® Health Card.

*These benefits are neither offered nor guaranteed under the FEHB program, but are made available to all MHBP enrollees and their covered family members. You cannot file a FEHB disputed claim about them. The fees you pay for these services do not count toward the FEHB deductibles or out-of-pocket maximums.

Benefits and value designed to **move** you...

It's time to say "move over" to higher-priced, more restrictive health plans, and move into the freedom of choice and savings you'll find in the MHBP Value Plan. With this nationwide PPO plan, you won't have to sacrifice quality benefits or your choice of doctors to take advantage of the low rates and great benefits!

Preventive care PPO benefits to keep you moving

With Value Plan, it's easy to stay healthy and on the move with full coverage and no deductible for PPO preventive care.

- 100% for annual physical exams and preventive screenings
- 100% for routine immunizations
- 100% for well-child care

No deductible applies to any of these services.

More valuable PPO coverage to keep you going

- 100% coverage for maternity care
- 100% coverage for lab tests with Quest Diagnostics®
- \$25 copay for care received at Convenient Care centers (i.e., clinics in drugstores)
- \$30 copay for primary care doctor office visits
- \$10 copay for generic prescriptions

No deductible applies to any of these services

Wait, there's more...

- Comprehensive coverage for specialist visits, hospitalizations and emergency care
- PPO level benefits when living, traveling or working overseas
- Benefits for covered care provided by a non-PPO provider

Get moving to MHBP Value Plan!

Contact MHBP today.

1.800.410.7778 www.mhbp.com



More plans to **move** you

MHBP Standard Option boasts extensive benefits that cover basic preventive care such as annual physicals and screenings, as well as provide comprehensive coverage for other medical care and hospitalizations. Best of all, Standard Option helps you manage your health care expenses with predictable low copays.

Predictable out-of-pocket costs that help you budget when you use PPO providers:

- \$10 copay for care received at Convenient Care centers (i.e., clinics in drugstores)
- \$20 adult office visit copay (\$10 for dependents under age 22)
- \$10 copay for generic prescriptions
- \$15 copay for chiropractic visits (up to a \$2,500 maximum, includes alternative and rehabilitative therapies combined)

MHBP Consumer Option is our high-deductible health plan with a health savings account (HSA) that returns some of your premium dollars back to you while covering your preventive care 100% and providing comprehensive coverage after your annual deductible is met. Up to \$1,690 could be coming your way if you are ready to take charge of your health care and enroll in Consumer Option. Learn more about Consumer Option when you visit our website, call us or read the official Plan brochure on the attached CD.

Move with ease and confidence.

All MHBP plans include:

- Access to one of the nation's largest PPO networks
- Freedom to use non-network providers
- PPO benefits for covered care received overseas
- Referral-free access to specialists
- No enrolling with a primary care doctor
- No claims to file when you use PPO providers
- Online tools and resources to help you manage your health care
- Friendly and knowledgeable customer service anytime—24 hours a day, seven days a week



Contact MHBP today.

1.800.410.7778.

www.mhbp.com

*Both plans offer non-PPO benefits
(see official Plan brochure)*

Compare your choices.

Value Plan's affordable premium and great benefits are very compelling, but so is the cost predictability of Standard Option. Only you can decide which one moves you. Review the summary of popular PPO benefits for each plan and **Make Your Move to MHBP for 2010**. Open Season ends Dec. 14.

2010 PPO Benefits

	Value Plan	Standard Option
	You Pay	You Pay
Calendar-Year Deductible	\$500 per person – Limited to \$1,000 per family	\$350 per person – Limited to \$700 per family
Adult Preventive Care: <i>(Annual physical exam, screenings, immunizations)</i>	Nothing (no deductible)	Nothing for screenings; \$10 copayment for immunizations; \$10 copayment for annual physical exam (no deductible)
Well-Child Care: <i>(Well-child visits, screenings, immunizations)</i>	Nothing (no deductible)	Nothing (no deductible)
Maternity Care	Nothing (no deductible)	Nothing (no deductible)
Primary Care Doctor's Visit <i>(General Practice, Family Practice, Internal Medicine and Pediatrician)</i>	\$30 copayment per office visit (no deductible)	\$20 copayment per office visit for adults, \$10 copayment for dependent children under age 22 (no deductible)
Non-Primary Care Doctor's Visits	20% of the Plan's allowance	\$20 copayment per office visit for adults, \$10 copayment for dependent children under age 22 (no deductible)
Convenient Care Center <i>(Such as MinuteClinics in CVS retail stores and Take Care Health centers at Walgreens)</i>	\$25 copayment per visit (no deductible)	\$10 copayment per visit (no deductible)
Lab, X-ray and Diagnostic Tests	Nothing for covered lab tests with the Lab Savings Program with Quest Diagnostics® (no deductible); otherwise 20% of the Plan's allowance	Nothing for covered lab tests with the Lab Savings Program with Quest Diagnostics® (no deductible); otherwise 10% of the Plan's allowance
Chiropractic Care	20% of the Plan's allowance and all charges after the Plan has paid the \$2,500 combined alternative, chiropractic and rehabilitative therapies maximum	\$15 copayment per office visit, and all charges after the Plan has paid the \$2,500 combined alternative, chiropractic and rehabilitative therapies maximum (no deductible)
Hospitalization	20% of the Plan's allowance	\$200 per-admission copayment; nothing for covered room & board and 15% of the Plan's allowance for hospital ancillary services (no deductible)
Outpatient Surgery	\$200 copayment per occurrence (no deductible)	10% of the Plan's allowance
Emergency Treatment	20% of the Plan's allowance	\$50 copayment at an urgent care center, \$150 copayment at a hospital emergency room. Hospital ER copayment waived if admitted. No deductible for accidental injury
Overseas Medical Expenses	PPO-level benefits for covered care received outside the United States	PPO-level benefits for covered care received outside the United States
Generic Prescription Drugs <i>In-network retail pharmacies (up to a 30-day supply)</i>	\$10 copayment	\$10 copayment
<i>Mail-order pharmacies (up to a 90-day supply)</i>	\$30 copayment	\$15 copayment

This is a summary of the Mail Handlers Benefit Plan. Before making a final decision, please read the 2010 official Plan brochure (RI71-007). All benefits are subject to the definitions, limitations and exclusions set forth in the 2010 official Plan brochure. A single annual \$42 MHBP associate membership fee makes all MHBP plans available to you. Please refer to the 2010 official Plan brochure for complete prescription drug benefits.

MHBP 2010 Rates

	Value Plan <small>biweekly</small>		Standard Option <small>biweekly</small>	
	Federal	Postal	Federal	Postal
Self Only	\$27.56	\$15.98	\$76.62	\$53.34
Self and Family	\$65.70	\$38.11	\$182.90	\$130.67

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

Enhance your 2010 coverage with MHBP Supplemental Vision Plan, Dental Plan or Both.



MHBP Supplemental Vision Plan 2010

Affordable PPO Vision coverage starts at just \$8.60 a month with nationwide coverage for eye exams, frames and lenses, contacts, laser vision correction discounts and more.

- Eye exams and lenses every 12 months for just a \$10 copay each
- Up to \$120 for frames (every 24 months) or contact lenses (every 12 months)

The MHBP Supplemental Vision Plan Monthly Rates*

Self Only	\$8.60
Self and Family	\$16.00



The MHBP Supplemental Dental Plan 2010

Dental PPO benefits start with preventive care (exam, cleaning, bitewing X-rays) which is covered 100% twice annually; Basic care (fillings, extractions, etc.) is covered 70% the first 12 months and 80% thereafter; Major care (root canals, crowns, etc.) starts the 13th month of enrollment and is covered 50%. And there's more, including Orthodontia, so call 1-800-254-0227 to learn more and enroll.

The MHBP Supplemental Dental Plan Monthly Rates*

State <i>Numbers refer to first 3 digits of enrollee's residential zip code.</i>	Single	Self Plus One	Self and Family
North Dakota	\$30.55	\$61.10	\$91.65
Alabama, Arkansas, Florida (except 330-334), Iowa, Illinois (except 600-608), Indiana, Kansas, Louisiana, Minnesota (except 550, 551, 553), Mississippi, Montana, North Carolina, Nebraska, New Mexico, Oklahoma, South Carolina, South Dakota, Tennessee, Virginia (except 220-223), Vermont, West Virginia, Wisconsin, Wyoming	\$33.58	\$67.16	\$100.74
Colorado (except 800-806)	\$34.32	\$68.64	\$102.96
Kentucky, Maryland, Missouri, Ohio, Pennsylvania	\$35.54	\$71.08	\$106.62
Georgia (except 300-303), Maine, Utah	\$36.34	\$72.68	\$109.02
Florida (330-334), Idaho, Michigan (except 480-483), New Hampshire, Texas (except 750-753, 760-762, 773-775)	\$37.77	\$75.54	\$113.31
Colorado (800-806)	\$38.13	\$76.26	\$114.39
Arizona, Illinois (600-608), Minnesota (550, 551, 553), NY (except 100-104, 110-119), Oregon, Rhode Island	\$39.84	\$79.68	\$119.52
District of Columbia	\$40.37	\$80.74	\$121.11
Delaware, Georgia (300-303), Hawaii, Massachusetts, Michigan (480-483), Nevada, Texas (750-753, 760-762, 773-775)	\$41.95	\$83.90	\$125.85
California (except 900-904, 913-916, 940-941, 943-951), Virginia (220-223), Washington (except 980-985)	\$44.05	\$88.10	\$132.15
New Jersey	\$46.15	\$92.30	\$138.45
California (900-904, 913-916, 940-941, 943-951), Connecticut, New York (100-104, 110-119), Washington (980-985)	\$48.26	\$96.52	\$144.78
Alaska	\$54.54	\$109.08	\$163.62

* After the first year, premiums are subject to change with 60 days' notice. A single annual \$42 MHBP associate membership fee makes both the dental and vision plans available to you.

make your move to MHBP!



Enroll in the Plan of your choice before December 14:

Value Plan:

Use enrollment code 414 for Self only or 415 for Self and Family.

Standard Option:

Use enrollment code 454 for Self Only or 455 for Self and Family.

Consumer Option:

Use enrollment code 481 for Self Only or 482 for Self and Family.

See www.mhbp.com for details on our high-deductible health plan paired with a Health Savings Account.

And don't forget our Supplemental Plans!

Dental and/or Vision: Call 1-800-254-0227 or enroll online at www.mhbp.com. You can enroll in both plans year-round.

Here's how to make your move:

Federal Employees

• Online Enrollment via Employee Express:

Go to www.EmployeeExpress.gov and sign in with your Social Security number and Personal Identification Number (PIN).

• Traditional Enrollment Form:

Request a Health Benefits Election Form (2809) from your human resources office or download the form online at www.OPM.gov/forms/pdf_fill/sf2809.pdf.

Postal Employees

Go to PostalEASE on the Intranet (from the blue page) or at an Employee Self-Service Kiosk. Or call PostalEASE at 1-877-477-3273.

Annuitants

- Go to www.OPM.gov to enroll via Open Season Online.
- Call 1-800-332-9798 to enroll via Open Season Express.
- Email retire@opm.gov to enroll online.



1.800.410.7778
www.mhbp.com

This is a summary of the Mail Handlers Benefit Plan. Before making a final decision, please read the 2010 official Plan brochure (R171-007). All benefits are subject to the definitions, limitations and exclusions set forth in the 2010 official Plan brochure. A single annual \$42 MHBP associate membership fee makes all MHBP plans available to you.

© 2009 Coventry Health Care, Inc. All rights reserved. All other names and (registered) trademarks are the property of their respective owners.

FHGBR085