



What's new in 2017 with your NAF Benefits

DoD NAF Open Enrollment: November 7 - December 2, 2016



Learn about updates to your health plan for 2017

As health care costs continue to rise, it's more important than ever to pay attention to changes in your health plan. This newsletter outlines those changes and provides ways to help you control your out-of-pocket costs. By educating yourself, you have the opportunity to avoid unnecessary medical expenses.

This year's Open Enrollment will take place **November 7 – December 2, 2016**. During this period, retirees should be aware of the following:

- Eligible retirees currently enrolled in medical coverage may switch their current coverage. Visit eBenefits (https://exchangebenefits.ehr.com) to see if another plan is available in your area.
- Any changes made during the enrollment period will be effective January 1, 2017.
- If you are not making any changes, you don't have to do anything. Your existing coverage will remain in effect for 2017. You may only make changes to your coverage elections during the year if you have a qualified family status change.

Visit the newly enhanced website **www.nafhealthplans.com/retiree** for more information about your health benefits.

Questions?

If you have questions about the eBenefits website or your benefit options, please contact the Exchange HQ Benefits office at **1-800-519-3381**, 0900 – 1500 hours Monday – Friday or email **benefits@aafes.com**.



What's new in 2017

By making changes and adding programs to your health plan each year, we are able to keep pace with ever-increasing costs while providing new benefits and services for your good health and convenience. Deductibles and coinsurance amounts for medical and dental will not change in 2017. Medical and prescription copays will also remain the same. However, there are four changes described below will take effect on January 1, 2017.

1. Four premium tiers

Until this year, there have been two premium tiers — individual and family. For 2017, this will change to four tiers, which will bring the DoD NAF plan in line with industry standard. The four tiers are as follows:

- Retiree only
- Retiree + child(ren)
- ★ Retiree + spouse*
- Retiree + family (retiree + spouse + children)

It is important to determine which tier you will fall into for 2017 since your 2017 premium contributions will depend on the tier that applies to you and covered dependents you choose during enrollment.

Tier	Medical	Medical & Dental
Retiree only	\$ 167.54	\$177.27
Retiree + child(ren)	\$323.36	\$342.15
Retiree + spouse	\$387.02	\$409.51
Retiree + family	\$512.69	\$542.48

2. Out-of-pocket maximum increases

This is the maximum amount you pay for your share of covered expenses in a calendar year. For the first time since 2006, the out-of-pocket maximums will increase in 2017, as shown below:

	2016		2017	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Individual	\$3,000	\$6,000	\$4,000	\$8,000
Family of 2	\$6,000	\$12,000	\$8,000	\$16,000
Family of 3 or more	\$9,000	\$18,000	\$12,000	\$24,000

Please note: For Traditional Choice plan members and members living overseas, the out-of-pocket maximum increase follows in-network amounts listed above.

For more information on the out-of-pocket maximums, visit **www.nafhealthplans.com>Medical Plans** and view the Product Guide and Summary of Benefits.

^{*}Same-Sex Domestic Partners and their children are no longer eligible effective January 1, 2017.

Visit www.nafhealthplans.com for information about this change.

3. The Maintenance Choice® Program*

Maintenance medicines are those used on a regular basis to treat or manage conditions such as asthma, diabetes, high blood pressure or high cholesterol. With Maintenance Choice, you can get a 90-day supply of maintenance medicines by using either Aetna Rx Home Delivery® mail-order pharmacy or a CVS pharmacy near you. After two fills at your local retail pharmacy, you will pay the full cost of the medicine if you choose to continue to receive a 30-day supply.

With Maintenance Choice, you will receive deeper discounts when you fill your maintenance medicines with a 90-day supply. Keep in mind that you will pay the same cost share for a 90-day supply of your medication as you would for a 60-day supply. It's like getting a month free! Plus, when you save, the plan saves. This helps keep plan costs (and your premium costs) in check.

To get started with the convenient Maintenance Choice Program, choose how you'd prefer to receive your maintenance prescriptions:

- ★ Visit a CVS pharmacy near you. Just show your prescription to receive your 90-day supply. To find a local CVS pharmacy, log in to www.aetna.com and click "Find a Doctor, Dentist or Facility" on the left menu of your home page. In the "Search by" field, click on "Pharmacies."
- ★ Use the mail service. With Aetna Rx Home Delivery, you can order a 90-day supply of your medication and have it delivered to any address you provide. To get started with the service, call 1-888-RX AETNA (1-888-792-3862).

Later this year, you will receive a letter with additional information about the program.

*The Maintenance Choice program is not available to members living overseas.

Be informed

You can check drug costs using the Price-A-Drugsm tool. Just log in to www.aetnanavigator.com>Aetna Pharmacy>Get Drug Prices.

You can view the Maintenance Medicine List and the Exclusions Drug List at www.nafhealthplans.com>Health Benefits>Pharmacy Programs.

4. The Exclusions Drug List

In 2017, your DoD NAF health plan is adding the Exclusions Drug List, which shows drugs that are no longer covered and a preferred alternative drug that is covered.

Later this year, you will receive a copy of the Exclusions Drug List, and a letter reminding you of this important pharmacy change. Check to see if any of your prescriptions are on the list. There may be less expensive options that are just as effective for your needs. When you choose or request lower-cost drugs, both you and your DoD NAF health plan save money.





Earn your Health Incentive Credits

The new Health Incentive Credit program that was introduced in 2016 will continue in 2017. Each year, DoD NAF employees, retirees and their covered dependents have the opportunity to earn Health Incentive Credits for taking healthy actions. Retirees with retiree-only coverage can earn up to \$250 and those that cover dependents can earn up to \$600.

Don't leave health incentive money on the table! There's still time to complete your 2016 incentive activities.

First things first — Complete the Health Assessment

You must complete the Compass® Health Assessment in order to earn any Health Incentive Credits. You won't earn credits for any of the activities until you've completed the assessment. To take the assessment, log in at www.aetna.com and click "I want to ... Take a Health Assessment" on your home page.

Health Incentive Credit opportunities include:

Complete by November 30

Metabolic syndrome/biometric screening measures health factors such as blood pressure, glucose and cholesterol through a blood draw and waist measure. Results that are out of target ranges can mean you are at risk for serious conditions such as heart disease, stroke and diabetes.

Credit earned: \$150 (if completed between January 1 and March 31)
Credit earned: \$100 (if completed between April 1 and November 30)

Complete one or more by December 31

3 calls with a Disease Management nurse*, if you or your covered spouse is invited to participate in the disease management program.

Credit earned: \$100

One or more online Journeys. These are part of the online health coaching programs recommended as part of your action plan after you complete the health assessment.

Credit earned: \$50 for each Journey completed (up to 4 Journeys)

Preventive exam for dependent child(ren) under age 18. Credit earned: \$50 per child, per year

Calendar year maximum for ALL activities: \$250 for retiree only; \$600 for retirees who cover dependents.

How credits are applied: Health Incentive Credits are applied automatically to your deductible and coinsurance, but not to copay amounts. Any credits left at the end of the year will roll over to the next plan year, for up to three years.

^{*}This program is not available to overseas retirees.

Money Matters: Save on your health care

Hold on to more of your money while getting the care and services you and your family need. Here are a few tips to get you started:

1. Watch for maximum allowable amounts

When you have certain outpatient procedures, the plan pays up to the maximum allowable amount for facility costs associated with the services.* You pay any facility costs above this amount. Maximum allowable amounts apply to procedures that include colonoscopy, endoscopy, CT scans, MRIs, cataract surgery and others.

Facility costs can vary significantly. To see and compare real costs for common procedures, including those with maximum allowable amount, log in at **www.aetna.com** and look for the Member Payment Estimator link on your home page. Or call Member Services at **1-800-367-6276**.

To see a complete list of outpatient procedures and their maximum allowable amounts, log in at www.aetna.com and click "I want to ... View Deductibles & Plan Limits." Scroll to the bottom for the page for the Maximum Allowable Amount box. To learn more, visit www.nafhealthplans.com>Tools & Resources>Cost of Care.

If you have questions, call Member Services at **1-800-367-6276** before you schedule your procedure. *Maximum allowable amount only applies to the Aetna Choice POS II plan.

2. Save money with the Choose Generics program

Choose Generics is a program that encourages you and your prescribing doctor to choose generic drugs in order to save money. It focuses only on Tier Three brand-name drugs if they have a generic alternative. This program does not apply to Tier One, Tier Two and Tier Four specialty drugs. To get the lowest price for your prescriptions, your health plan encourages you to use generic drugs when available. This will help you save money each time you fill a prescription.

You'll pay more for brand drugs. If a generic drug is available and you choose the brand instead, you'll pay the difference in actual cost between the brand and the generic plus the brand copay that applies. Ask your doctor if a brand-name drug you are taking has a generic equivalent.

Price-A-Drug is an online tool that lets you get cost estimates on prescription drugs, see cost-saving alternatives, and more. To use the tool, log in at **www.aetna.com** and click the Aetna Pharmacy tab at the top of your home page. Then click the link to "Get drug prices."



3. Make smart choices when you need care

Making the right choice when you need health care saves you time and money. Know your options ahead of time.

Your primary care physician (PCP) should be your first choice for non-emergency care. He or she can provide routine, basic care for common problems such as cold, flu, allergies and minor injuries. If you need specialty care, your PCP can recommend the right specialist for your particular need.

No PCP? While your plan doesn't require you to choose a PCP, it's a good idea to have one. A PCP can be an internist, general practitioner, family practitioner or pediatrician. Find in-network PCPs near you by logging in at **www.aetna.com** and clicking on "I want to ... Find a Doctor, Dentist or Facility."

Teladoc® lets you talk with board-certified physicians via phone 24/7, for a \$10 copay. Teladoc doctors can consult, treat and prescribe medication for conditions like colds, flu, sinus infections, allergies and more. To learn more, visit **www.nafhealthplans.com**. To register with Teladoc, go to **www.teladoc.com/aetna**.

Teladoc is not available in all states or overseas and is not available to retirees over age 65.

Urgent care centers and walk-in clinics provide prompt, cost-effective treatment for non-emergency conditions. Examples include colds, flu, ear infections, minor insect bites, sprains, strep throat, burns, rashes, sports injuries and more.

Find centers and facilities near you. Log in at **www.aetna.com** and clicking on "I want to ... Find a Doctor, Dentist or Facility." Or use the free **iTriage® mobile app** to find facilities in your area. The app also lets you enter symptoms and conditions and find the right doctors and services for your problem. You can book appointments, too. Get the app free on Google Play™ or the App Store™.*

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When is it a true medical emergency?

An emergency is an illness or injury that, without immediate treatment, can result in permanent disability or death. When it's a true emergency, the Emergency Room is your best choice for care. If it's not a true emergency, you'll save money by using one of the other less expensive options described above.

Visit the newly enhanced website www.nafhealthplans.com

The URL is the same, but the site has been completely redesigned with you in mind. You'll find all the tools and resources you need to enroll and make the best use of your DoD NAF health plan all year long. The site is designed to give you quick and easy-to-use access from any device.

- ★ Enrollment information
- ★ Medical, prescription and dental plan details
- ★ Plan programs and resources
- ★ Educational videos
- ★ Ways to save on health care
- ★ Department of Labor notices, Medicare Creditable Coverage notices, etc.
- ★ Health Care Reform updates
- ★ Wellness tips and much more



Be sure to sign up for wellness e-newsletters to receive helpful money savings tips, and other important information about your plan.