

2024 BENEFIT SUMMARY BOOK
Blue Cross and Blue Shield Service Benefit Plan



**The health plan
that's always by your side
That's the Benefit of Blue.®**

  **BlueCross.
BlueShield.**
Federal Employee Program.®

fepblue.org

Health care coverage you can count on

Choosing the right health plan matters. You want to make sure you have the coverage you need. This is where the Blue Cross and Blue Shield Federal Employee Program (FEP) can help.

For more than 60 years, FEP has been committed to providing federal employees, U.S. Postal Service employees, retirees and their families with some of the best health care benefits possible. You can count on us to be there every step of your health care journey. Enjoy free preventive care and rewarding incentives, plus a network that includes over 1.7 million doctors and hospitals in the U.S. That's how we've become the number one health insurance choice for federal and postal employees. Now, we invite you to explore this booklet and discover the **Benefit of Blue.**[®]

We have plans designed to support every need and budget:



FEP Blue Focus



Basic Option



Standard Option

We'll use these icons for each of our plans throughout this booklet.

You can choose to cover:



**Yourself with
Self Only**



**You and one other
person with Self + 1**



**You and multiple
dependents with
Self & Family**



With each of our plans, you'll receive:



**Free preventive care from in-network
(Preferred) providers**



Worldwide coverage



Referral-free care from specialists



Wellness rewards and discounts

Let's compare

	F	B	S
No Deductible	X	✓	X
Pay Mostly Copays	X	✓	X
In-Network Care	✓	✓	✓
Out-of-Network Care	X	X	✓
Preferred Drug Coverage	✓	✓	✓
Non-preferred Drug Coverage	X	✓	✓
Medicare Part B Reimbursement – \$800	X	✓	X

Premiums, deductibles and out-of-pocket maximums

	Bi-weekly Premiums			Monthly Premiums		
	FEP Blue Focus	Basic Option	Standard Option	FEP Blue Focus	Basic Option	Standard Option
Self Only	\$55.30	\$95.74	\$150.79	\$119.83	\$207.44	\$326.71
Enrollment Code	131	111	104	131	111	104
Self + One	\$118.88	\$238.63	\$336.84	\$257.58	\$517.03	\$729.82
Enrollment Code	133	113	106	133	113	106
Self & Family	\$130.76	\$262.60	\$370.68	\$283.32	\$568.96	\$803.14
Enrollment Code	132	112	105	132	112	105

These rates don't apply to all enrollees. If you are in a specific enrollment category, please contact the agency or Tribal employer that maintains your health benefits enrollment.

Benefit	FEP Blue Focus	Basic Option	Standard Option
Deductible	\$500 for Self Only \$1,000 for Self + One and Self & Family	No deductible	\$350 for Self Only \$700 for Self + One and Self & Family
Out-of-Pocket maximum (Preferred providers)	\$9,000 for Self Only \$18,000 for Self + One and Self & Family	\$6,500 for Self Only \$13,000 for Self + One and Self & Family	\$6,000 for Self Only \$12,000 for Self + One and Self & Family

What you'll pay for common services at in-network providers

Benefit	FEP Blue Focus	Basic Option	Standard Option
Primary care doctor	\$10 per visit for your first 10 primary and/or specialty care visits ¹	\$35 copay ¹	\$30 copay
Specialists		\$45 copay ¹	\$40 copay
Mental health visits		\$35 copay ¹	\$30 copay
Virtual doctor visits through Teladoc®	\$0 first 2 visits and all nutrition visits \$10 all additional visits	\$0 first 2 visits and all nutrition visits \$15 all additional visits	\$0 first 2 visits and all nutrition visits \$10 all additional visits
Urgent care centers	\$25 copay	\$35 copay	\$30 copay
Maternity	\$0 for doctor's visits \$1,500 for facility care	\$250 inpatient \$0 outpatient	\$0 copay
Inpatient hospital	30% of our allowance*	\$250 per day; up to \$1,500 per admission	\$350 copay
Outpatient hospital	30% of our allowance [†]	\$150 per day per facility ¹	15% of our allowance*
Surgery	30% of our allowance [†]	\$150 per surgeon in an office ¹ \$200 per surgeon in other settings ¹	15% of our allowance*
ER (accidental injury)	\$0 within 72 hours	\$250 per day per facility	\$0 within 72 hours
ER (medical emergency)	30% of our allowance*	\$250 per day per facility	15% of our allowance*
Lab work (such as blood tests)	\$0 for first 10 specific lab tests**	15% of our allowance ¹	15% of our allowance*
Diagnostic services (such as sleep studies, X-rays, CT scans)	30% of our allowance*	Up to \$100 in an office ¹ Up to \$200 in a hospital ¹	15% of our allowance*
Chiropractic care	\$25 for up to 10 visits per year ²	\$35 for up to 20 visits per year	\$30 for up to 12 visits per year

If you have Medicare primary or receive care overseas, different cost share amounts may apply.

*Deductible applies.

¹You pay 30% of our allowance for agents, drugs and/or supplies you receive during your care.

[†]Deductible applies. In addition, you pay 30% of our allowance for agents, drugs and/or supplies you receive during your care.

**Please see brochure for covered lab services.

²Up to 10 visits combined for chiropractic care and acupuncture.

Now let's take an at-a-glance look at pharmacy benefits available to all members

We want to make sure you and your family have access to the prescription drugs you need.

We designed our pharmacy program so that you can get the prescriptions you need conveniently and affordably. That's why we have a variety of coverage options you can count on.

Retail Pharmacy Program	F	B	S
FEP Mail Service Pharmacy Program	X	X*	S
FEP Specialty Pharmacy Program	F	B	S

*Available if you have Medicare Part B primary.

Our drug tiers

The tiers your prescription drugs fall in can vary between our coverage options. **FEP Blue Focus** only has two drug tiers. They are:

<p>Tier 1 Preferred Generics</p>	<p>Tier 2 Preferred Brand Name, Preferred Specialty and Preferred Brand Name Specialty</p>
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Basic Option and **Standard Option** each have five drug tiers. They are:

<p>Tier 1 Generics</p>	<p>Tier 2 Preferred Brand Name</p>	<p>Tier 3 Non-preferred Brand Name</p>	<p>Tier 4 Preferred Specialty</p>	<p>Tier 5 Non-preferred Specialty</p>
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Retail Pharmacy Program

Pick up your prescriptions conveniently at one of our more than 55,000 in-network pharmacies, such as a CVS Pharmacy or your grocery store pharmacy. Find an in-network pharmacy near you at fepblue.org/provider.

What you'll pay for up to a 30-day supply at an in-network pharmacy

FEP Blue Focus	Basic Option	Standard Option
Tier 1: \$5 copay Tier 2: 40% of our allowance (\$350 maximum)	Tier 1: \$15 copay Tier 2: \$60 copay Tier 3: 60% of our allowance (\$90 minimum) Tier 4: \$85 copay Tier 5: \$110 copay	Tier 1: \$7.50 copay Tier 2: 30% of our allowance Tier 3: 50% of our allowance Tier 4: 30% of our allowance Tier 5: 30% of our allowance

If you have Medicare or receive care overseas, different cost share amounts may apply. Tier 4 and 5 drugs are limited to one 30-day fill through the Retail Pharmacy Program. All additional fills must be placed through the Specialty Pharmacy Program.

FEP Mail Service Pharmacy Program

Get your prescriptions delivered directly to your door.

What you'll pay for up to a 90-day supply through this program

FEP Blue Focus	Basic Option	Standard Option
Not a benefit	Available to members with Medicare Part B primary only Visit fepblue.org for more information	Tier 1: \$15 copay Tier 2: \$90 copay Tier 3: \$125 copay

If you have Medicare or receive care overseas, different cost share amounts may apply.

FEP Specialty Pharmacy Program

This program is exclusively for members who are prescribed specialty drugs. It allows members who need these medications to get them at a reasonable cost.

What you'll pay for up to a 30-day supply through this program

FEP Blue Focus	Basic Option	Standard Option
Tier 2: 40% of our allowance (\$350 maximum)	Tier 4: \$85 copay Tier 5: \$110 copay	Tier 4: \$65 copay Tier 5: \$85 copay

If you have Medicare primary or receive care overseas, different cost share amounts may apply.



Know if your drug is covered and what it costs

Visit fepblue.org/rx to look up your specific drug(s) and how much it will cost at local pharmacies and through Mail Service.

NEW What's new for 2024

Here are some benefit changes for 2024. This is not a full list of changes. To see the full list, see section 2 of the Blue Cross and Blue Shield Service Benefit Plan brochures at [fepblue.org/brochure](https://www.fepblue.org/brochure).

Wellness Incentive Program Updates



Members can use their MyBlue® Wellness Card at select Blue365® retailers on non-qualified medical expenses. You can spend up to **\$150** at these retailers during the calendar year.



The Diabetes Management Incentive Program (the program where members can earn up to **\$100** for getting their annual A1c tests) will end December 31, 2023. Eligible **Basic Option** and **Standard Option** members who receive an A1c test(s) prior to this date will be able to submit a claim to receive their incentive through the end of 2024. This change does not impact the Diabetes Management Program by Livongo®.



We enhanced the Blue Health Assessment (BHA). The new assessment will be available Jan. 1, 2024. **Basic Option** and **Standard Option** members will still be able to earn **\$50** annually when they complete the BHA.



We are introducing a new online coaching tool called Daily Habits. With this tool, you will be able to complete activities related to your health and well-being. **Basic Option** and **Standard Option** members can earn **\$40** for each completed activity, up to three, for **\$120** in total.

With the introduction of Daily Habits, the Online Health Coach will go away after December 31, 2023. Most Online Health Coach goals take a few weeks to complete, so start them no later than Thanksgiving. You must complete your Online Health Coach goals by the end of 2023—they will not carry over to 2024.

Reproductive Care Updates



We will cover specific artificial insemination procedures and the associated prescription drugs for the covered services for all members. You must receive prior approval for artificial insemination.



Members diagnosed with infertility can receive up to three (3) annual drug cycles for in vitro fertilization (IVF). You must receive prior approval and buy your prescriptions through our pharmacy program.



Standard Option members with infertility can get any assisted reproductive technology (ART) procedure not listed as an exclusion in the brochure. We will cover up to **\$25,000** annually once you receive prior approval.



Members can save up to **40%** in exclusive savings through WINFertility's Treatment Program Bundles on Blue365®. This is another way members can receive top-quality fertility care at an affordable, predictable price.

Mental Health Updates



We will cover marital and family counseling for all members.

Additional Benefit Updates



We will cover medically necessary genetic testing for members who may be at high risk for certain conditions. You must receive prior approval.



We increased the copay for primary care and specialists by **\$5** for **Basic Option** and **Standard Option** members.



Basic Option and **Standard Option** members must receive prior approval before buying hearing aids. FEP Blue Focus members do not have a hearing aid benefit.



We increased the out-of-pocket maximum for **FEP Blue Focus** members.



FEP Blue Focus members with Medicare primary will no longer have their deductible waived.



FEP Medicare Prescription Drug Program

We are introducing a new pharmacy benefit called the FEP Medicare Prescription Drug Program, or MPDP. Through this program, eligible members with Medicare get reduced out-of-pocket costs for higher cost drugs and additional covered prescriptions for some drug tiers, all as part of their FEP premium.

Learn more at fepblue.org/medicarerx.

Overseas Program Updates



We have a new overseas benefit provider: **GeoBlue**[®]. Learn more about our overseas benefits at fepblue.org/overseas.

Coverage wherever you go

You're covered

Blue Cross Blue Shield has more doctors and hospitals in our network than any other insurer in the U.S. Your member ID card works in every ZIP Code and beyond. And you never need a referral to see a specialist with any of our plans.

Finding an in-network provider is easy if you have our **fepblue** app or go to our website, fepblue.org/provider. You can also call us at the customer service number on the back of your member ID card.

Travel confidently

If you're away from home for work or play, your benefits will travel with you. Just make sure to take your member ID card with you wherever you go—which is easy if you download our **fepblue** app.



New Member ID Cards

We will send updated member ID cards to all members beginning in the fall of 2023. New enrollees, **FEP Blue Focus** members and members enrolled in our new MPDP benefit will get their member ID cards first. **Basic Option** and **Standard Option** members not enrolled in MPDP will receive their ID cards in early 2024.

Traveling or moving overseas?

Your benefits work there, too—all at the in-network level, no matter which providers you visit.

We encourage you to visit fepblue.org/overseas to see how your benefits will work outside the U.S. You can also call our Overseas Assistance Center at **1-804-673-1678**.



Get answers to your health questions

Through our Nurse Line, you have 24/7 access to qualified registered nurses at no cost if you have a health question or need guidance on where to go for care. Call **1-888-258-3432** or chat with them via your **fepblue** app or MyBlue account.

Register for telehealth services

With telehealth services provided by Teladoc Health, you can get virtual doctor visits via phone, video chat or the Teladoc app. All members get their first two Teladoc visits—and all nutritional counseling visits—covered in full.

Your telehealth benefit includes:



24/7 General
Medical Care



Mental Health
Consults



Dermatology
Services



Nutritional
Counseling



Global Care
*(for Overseas
Members)*

Learn more about Teladoc at fepblue.org/telehealth or call **1-855-636-1579**.



Does your doctor offer telemedicine services?

If your in-network doctors offer phone or video visits, we'll cover them. You'll pay the same cost share as an in-person visit.

Access all your health care information in one place with MyBlue®



All members, 18 and older, have access to our online member-only website, MyBlue. The site is personalized to you and is the gateway to managing your information, earning rewards and using many of our helpful tools and resources.

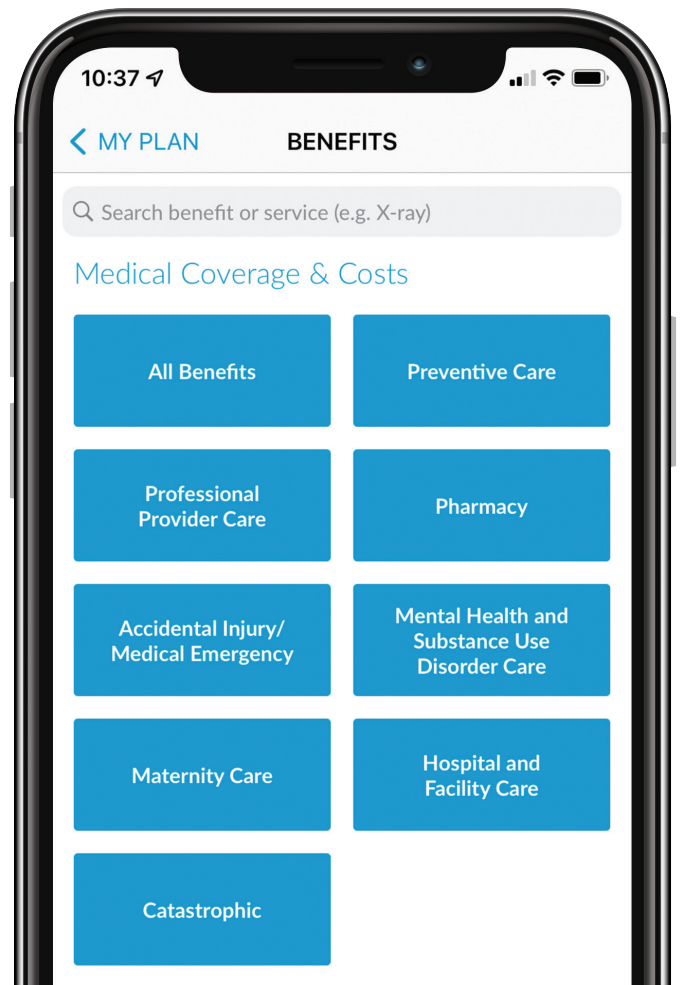
To register for an account:

- 1 Visit fepblue.org/signup.
- 2 Complete the registration fields. You'll need your member ID card and a unique PIN. Follow the instructions to get your PIN.
- 3 Confirm your registration and begin using MyBlue. Once you have an account, you can access MyBlue 24/7 at fepblue.org/myblue.

Download the fepblue app to do more on the go

The **fepblue** app puts your health insurance benefits in the palm of your hand. Use it to quickly access the digital version of your member ID card, find in-network providers no matter where you are or connect to a virtual one through Teladoc, set up notifications to receive updates from us and more.

Download **fepblue** on the App Store® or Google Play™ today.



Helpful tools to get the most out of your benefits

Through a variety of online tools and resources, we can help you stay informed, manage your costs and more.

Find the right plan

Members and potential members can take a simple online quiz to get a plan recommendation based on your health care needs and budget. Get started at askblue.fepblue.org.

Know your health care costs

See how close you are to meeting your annual deductible or visit limits as well as what you've paid in claims this year. See more at fepblue.org/myblue.

Get estimates for anticipated care and services

You can search for certain treatments and get estimates for how much they'll cost. Check it out at fepblue.org/provider.

Manage your coverage

View your claims, Explanation of Benefits (EOBs) and all your medical records in one convenient place. Learn more at fepblue.org/myblue.



Have questions about FEP?

Call **1-800-411-BLUE (2583)**. You can also call the number on the back of your member ID card.

NEW Get rewarded for completing activities that support your health

Blue Health Assessment **S** **B**

We are enhancing the Blue Health Assessment to feature new questions in 2024. The updated tool will take no more than 20 minutes to complete.

Here's how it works:



Answer a questionnaire about your health.



Receive a personalized score and plan to improve or maintain your health.



Earn **\$50** the first time you complete the BHA in 2024.

You must be the contract holder or spouse, 18 or older, on a Standard Option or Basic Option plan to earn incentive rewards.

Daily Habits **S** **B**

After you complete the BHA, you can participate in our new online health coaching tool, Daily Habits. This new program allows you to complete activities related to your well-being and earn rewards, up to **\$120**, for completing three activities.

You can complete activities related to:



Stress



Weight loss



Exercise



Balanced living



Nutrition



Managing asthma



Managing heart disease



Managing hypertension



Managing COPD



Quitting tobacco

Note: Daily Habits will replace the current Online Health Coach tool. All Online Health Coach activities must be completed by Dec. 31, 2023.



Routine Annual Physical Incentive Program F

FEP Blue Focus members can earn a reward for receiving their annual physical—one of the most important things you can do for your health.

Rewards you can earn include:

MyBlue® Wellness Card

Get **\$150** on a MyBlue Wellness Card that you can redeem at many health and wellness vendors on Blue365®.



Receive a four-month gym membership that's valid at more than 10,000 health clubs nationwide.



Get a personalized diet and nutrition plan by sending in a cheek swab.

To earn the reward, get your annual checkup from an in-network provider. Once your doctor submits the claim, we'll send you an email and/or a message on your EOB with instructions to receive the reward.

Location restrictions apply. You must be 18 or older and the contract holder or spouse on an FEP Blue Focus plan to earn this reward. We encourage you to consider possible tax implications of your rewards as part of this program and to consult your tax, legal or accounting advisors for additional information. Not all Blue365 vendors are included in this program.

Pregnancy Care Incentive Program S B

Pregnant members can earn **\$75** for getting prenatal care in their first trimester. You can also earn a Pregnancy Care Box with items to support you during and after your pregnancy.

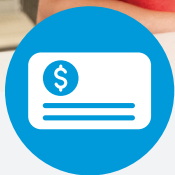
MyBlue Wellness Card

When you earn reward dollars through our incentive programs, we load the funds on to your MyBlue Wellness Card. This is a prepaid debit card that you can use to pay for qualified medical expenses, **and new for 2024, specific non-qualified medical expenses.**

Qualified medical expenses you can pay for with your card:

- Doctor's office copays
- Over-the-counter medicines
- Prescription copays
- Menstrual products
- Contacts and glasses
- And more

For the full list of qualified medical expenses, visit www.irs.gov/publications/p502.



Use your card for non-qualified medical expenses

You can spend up to **\$150** annually on your card to pay for specific products available through Blue365. See the current list of eligible products at blue365deals.com/fep and choose the wellness card dropdown.

Health and wellness programs



Diabetes Management Program by Livongo® S B

Basic Option and **Standard Option** members with diabetes can get an advanced digital glucose meter, free unlimited test strips and lancets, plus one-on-one support through Livongo.



Hypertension Management Program

Members with high blood pressure can receive a blood pressure monitor at no out-of-pocket cost every two years.



Additional Maternity Programs

Members who are pregnant or have recently given birth can receive a breast pump kit, up to 8 mental health visits and a blood pressure monitor. All at no out-of-pocket cost.



Tobacco Cessation Incentive Program

If you smoke or use other tobacco or vaping products and are ready to quit, we can help. Members can get support and free tobacco cessation drugs through this program.



Discount Drug Program

The Discount Drug Program gives you up to a 24% discount on specific drugs that are not covered under your regular pharmacy benefits.



Generic Incentive Program S

For **Standard Option** members who switch to an eligible generic medication, we'll waive your cost share for your first four prescription fills or refills.



Medicare Reimbursement Account B

Basic Option members enrolled in Medicare Part A and Part B can receive up to **\$800** if they pay Medicare Part B premiums. Each member on your plan enrolled in Medicare can receive this benefit.

Check out our Blue365 Discount Program

Blue365 is a discount program offered exclusively to Blue Cross Blue Shield members. Sign up for discounts from well-known national brands, such as Fitbit, Philips Norelco, Reebok and TRX Fitness, plus many more you might not expect.

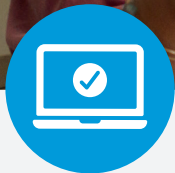
Log in to your MyBlue account to access Blue365 conveniently or learn more at fepblue.org/blue365.

Note: Blue365 deals and discounts may change at any time.

Selecting the right FEP plan for your needs

Since all of our plans provide quality coverage, you may be wondering how to narrow down the right one for you and your family. We'll break down the benefits of each.

Keep in mind that if you start in one plan now and your needs change in a few years, you'll have the opportunity to switch plans annually during Open Season. This is typically the second Monday in November through the second Monday in December each year. You'll also have the opportunity to make a change if you have a qualifying life event (QLE), such as getting married or having a baby.



Need help choosing the right plan?

Use the AskBlueSM FEP Medical Plan Finder, our interactive online quiz, to receive a plan recommendation based on your health care needs. Try it today at askblue.fepblue.org.

FEP Blue Focus

FEP Blue Focus is well suited for those who don't use their health care benefits often, only use in-network (Preferred) providers and don't have many prescription drug needs.



You pay the lowest premium for FEP Blue Focus.



FEP Blue Focus has the most limited prescription drug formulary.

Basic Option

For over 15 years, Basic Option has been the plan most federal employees choose in the FEHB.



You must see in-network (Preferred) providers to get care.



You don't have a deductible and you pay mostly copays.

Standard Option

Standard Option is our only plan that allows you to go in- and out-of-network for non-emergency care.



You pay the highest premium for Standard Option.



Standard Option has the largest approved drug list.



Health care glossary

We know health insurance can be confusing at times. Here are some helpful definitions you should know.

Coinsurance

The percentage you pay (e.g., 30%) of our payment to your provider; also known as our allowed amount (allowance) to your provider.

Copay

A set amount you pay for a service (e.g., \$30).

Cost share

Collectively, the copays, coinsurance and deductibles that you pay for the cost of a service.

Deductible

A set amount you need to pay before we'll begin paying for our portion of your service. Deductibles do not apply to all services. Additionally, only **FEP Blue Focus** and **Standard Option** have deductibles—**Basic Option** does not.



Formulary

The list of covered drugs for each plan. It will show which tier your drug falls in and that, combined with your pharmacy of choice, determines what your drug costs.

Out-of-Pocket Maximum

A cap (or maximum) on the amount you'll pay for your health care costs during the year; also sometimes called a catastrophic maximum. For example, if you have **Standard Option Self Only**, you'd pay no more than \$6,000 annually for medical services.

Preferred providers

These are our in-network providers. This means they have a contract with us to pay for your services.



Blue HowTo videos

Want to learn more? Check out our Blue HowTo videos for a closer look at more health insurance terms, our plans, preventive care, planning for retirement and more. Watch now at fepblue.org/videos.



How to enroll

If you're an actively working federal employee and want to become a member of the Blue Cross and Blue Shield Service Benefit Plan, there are two ways you can enroll:

Using your agency's preferred method

By contacting your agency's personnel office

You'll need the full name of the health plan and the enrollment code (**see page 3**) to enroll. Visit fepblue.org/enroll to learn more.



Remember, if you're a current member and you're happy with your coverage, you don't need to do anything. Your coverage will automatically continue into next year.

How to get started

When you become a member, we make it easy for you to get the most out of your coverage:

Sign up for MyBlue®

Download the fepblue mobile app

Find your providers

Take the BHA

Set up your Daily Habits goals

Register for Teladoc Health telehealth services

Helpful tools and resources

National Information Center
1-800-411-BLUE (2583)

Pharmacy
fepblue.org/pharmacy

Telehealth Services
fepblue.org/telehealth

24/7 Nurse Line
1-888-258-3432

Thank you for taking a closer look at what the Blue Cross and Blue Shield Federal Employee Program can offer you and your family. We're dedicated to your health and well-being and hope you choose us to be your trusted partner for years to come.



That's the Benefit of Blue.®

@fepblue



fepblue.org

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Google Play and the Google Play logo are trademarks of Google LLC.

This is a summary of the features of the Blue Cross and Blue Shield Service Benefit Plan. Before making a final decision, please read the Plan's Federal brochures (FEP Blue Standard and FEP Blue Basic: RI 71-005; FEP Blue Focus: RI 71-017). All benefits are subject to the definitions, limitations and exclusions set forth in the Federal brochures.

The Blue Cross Blue Shield Association is an association of independent, locally operated Blue Cross and Blue Shield companies.

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The FEP Medicare Prescription Drug Program is a prescription drug plan with a Medicare contract. Enrollment in MPDP depends on contract renewal.

The formulary and/or pharmacy network may change at any time. You will receive notice when necessary.



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