

Postal employees, retirees and second term appointment MHAs can count on MHBP!



Your union-sponsored 2023 health plans

MHBP has been trusted by federal and postal employees and retirees for over 50 years. With our three nationwide health plans, we offer quality coverage and exceptionally low premiums. One winning feature is our highly-rated customer service. We have dedicated MHBP representatives available to answer your questions 24/7, except major holidays. MHBP also offers worldwide coverage – so you're covered anywhere in the world. In the United States, we are backed by the strength of the Aetna® national network, with over 1.5 million providers. All MHBP plans offer out-of-network benefits, as well. At MHBP, we are raising quality standards while keeping low rates — because we believe it's what all federal and postal employees deserve.

Scan for more information!



Who is eligible and when:

1. All existing career Mail Handlers may make any one, or a combination of, the following changes to their health insurance during Open Season: enroll if not enrolled; cancel enrollment; change from one plan to another or from one option to another; and change from Self to Self and Family, or from Self and Family to Self.

2. For those Mail Handlers converting to fulltime regular (FTR), you have 60 days from the date of conversion to enroll in a FEHB Plan

3. Mail Handler Assistants (MHAs) – those working in their second term are eligible for immediate enrollment into the MHBP Consumer Option and Value Plan with contributions toward premiums to be made by the Postal Service. You have 60 days from the date of your newly acquired eligibility to enroll in MHBP.

Plan Features to Compare	Standard Option	Consumer Option (HDHP)	Value Plan
Deductible	\$350 self/\$700 self plus one and family	\$2,000 self/\$4,000 self plus one and family**	\$600 per person limited to \$1,200 self plus one and family
HSA Contributions	N/A	\$1,200 self/\$2,400 self plus one and family	N/A
Network Benefits			
PCP visit	\$20 copay (\$10 copay for dependents through age 21)	\$15 copay**	\$30 copay (\$10 copay for dependents through age 21)
Specialist visit	\$30 copay	\$15 copay**	\$50 copay
Maternity care	No additional cost	No additional cost**	No additional cost
Generic prescription	\$5 copay	\$10 copay**	\$10 copay
Outpatient hospital	10% of the Plan's allowance**	Surgical - \$150 copay per occurance** Non-surgical - \$75 copay per occurance**	20% of the Plan's allowance**
Telehealth through Teladoc®	No additional cost	No additional cost**	No additional cost

Lab Savings Program	No additional cost	No additional cost**	No additional cost
Walk-in clinic visit	\$5 copay	\$5 copay**	\$15 copay for adults \$5 copay for dependents through age 21
MinuteClinic [®] at a CVS Pharmacy [®] visit	No additional cost	No additional cost**	No additional cost

2023 Rates		Standard Option	Consumer Opti	on Value Plan
Federal employees* (biweekly)	Self only	\$ 80.61	\$ 78.6	9 \$ 5 8.20
	Self plus one	\$ 185.54	\$ 174.1	4 \$ 137.91
	Self and family	\$ 187.33	\$ 182.8	5 \$ 140.66
Second-term MHAs*** (biweekly)		Standard Option	Consumer Opti	on Value Plan
	Self only	N/A	\$ 189.7	7 \$ 107.82
	Self plus one		\$ 365.8	2 \$ 220.90
	Self and family		\$ 263.3	9 \$ 94.66

* These rates do not apply to all Enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.

** Deductible must be met before any benefits apply (except preventive care).

***These rates apply upon appointment to second term.

This is a brief description of the features of this Aetna health benefits plan. Before making a decision, please read the plan's applicable federal brochure(s). All benefits are subject to the definitions, limitations and exclusions set forth in the federal brochure.

