



Department of Defense
Nonappropriated Fund
Health Benefits Program

Get Ready To Enroll

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



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Get prepared for Open Enrollment

During Open Enrollment, **November 7 – December 2, 2016**, you have the opportunity to make health benefit choices and changes. In this newsletter, you'll find highlights of what's new for 2017 and other tips and reminders to help you get ready to enroll. Plus, there's more online at www.nafhealthplans.com.

During Open Enrollment

Make informed decisions for you and your family during Open Enrollment. Here's what you can do:

- ★ Join the DoD NAF Health Benefits Program (HBP). The plan available to you is based on your geographic location.
- ★ Switch plans (if applicable).
- ★ Add/or remove eligible dependents.*
- ★ Enroll in a health care and/or a dependent care Flexible Spending Account (FSA). You must elect one or both FSAs during Open Enrollment to participate in 2017.

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

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

You can also add or remove dependents during the plan year within 31 days of a qualified family status change, such as a change in marital status, birth or adoption.

Visit the brand new website

The URL is the same, www.nafhealthplans.com, 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 on any device. Watch videos, get wellness tips, learn how to save on health care, 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.

You'll also find notices such as the Department of Labor notices, Summary Plan Descriptions, Medicare Creditable Coverage notices, Health Care Reform updates and other health plan details.



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:

- ★ Employee only
- ★ Employee + child(ren)
- ★ Employee + spouse
- ★ Employee + family (employee + 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. The chart below shows the change in tiers and biweekly premiums from 2016 to 2017.

Year	Tier	Medical	Dental	Medical & Dental	Stand Alone Dental
2016	Individual	\$ 75.71	\$ 4.26	\$ 79.97	\$ 18.44
	Family	\$ 189.28	\$ 10.66	\$ 199.94	\$ 43.62
2017	Employee only	\$ 77.33	\$ 4.50	\$ 81.83	\$ 16.18
	Employee + child(ren)	\$ 149.24	\$ 8.68	\$ 157.92	\$ 36.40
	Employee + spouse	\$ 178.63	\$ 10.38	\$ 189.01	\$ 32.35
	Employee + family	\$ 236.63	\$ 13.76	\$ 250.39	\$ 52.27

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.

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:

- ★ **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)**. OR,
- ★ **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."

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

*The Maintenance Choice program does not apply to members living overseas.

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.

Be informed

You can check drug costs using the Price-A-DrugSM tool. Just log in to **www.aetnavigators.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.**





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. Employees with employee-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, which measures health factors such as blood pressure, glucose and cholesterol through a blood draw and waist measure. Results 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

Three 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 employee only; \$600 for employees 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(s), for up to three years.

Money Matters: Choose Wisely, Spend Less

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.

2. Flexible Spending Account (FSA) reminders

Later this year you will receive a letter with your current FSA balance. It's important to remember that FSAs have a "use it or lose it" rule.

- ★ **Dependent Care FSA.** Any funds remaining in your account at the end of the year will be forfeited.
- ★ **Health Care FSA.** You are able to roll over up to \$500 of unused 2016 FSA funds into 2017. Anything above that will be forfeited. If you elect a Health Care FSA for the first time, you will receive a new debit card that you can use to pay eligible health care expenses.

For more information about your employers specific deadlines and amounts, visit www.nafhealthplans.com>Health Benefits>Flexible Spending Accounts.



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 (including pediatricians) via phone or video chat 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 StoreSM.*

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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.



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Inside:

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