

November 1, 2020

Your 2021 SAMBA High Option Health Plan

Dear Member,

We are pleased to inform you that we have increased your health plan benefits for next year as explained below.

Improved Benefits for 2021:

- **We have reduced the amount of out-of-pocket expenses you must pay for deductibles, coinsurance and copayments before your catastrophic protection begins:**
 - PPO: Reduced out-of-pocket expenses from \$6,000 to \$5,000 for one person and from \$12,000 to \$10,000 for you and any covered family members, per calendar year
 - Non-PPO: Reduced out-of-pocket expenses from \$9,500 to \$6,000 for one person and from \$19,000 to \$14,000 for you and any covered family members, per calendar year
- **We are lowering the non-preferred drug coinsurance maximum:** The Plan's mail order and retail out-of-pocket maximum coinsurance will be reduced from \$600 to \$400 for a 90-day supply.
- **We will align the cost of outpatient hospital observation care services with our inpatient hospital benefits:** Your cost for outpatient hospital observation care services will not exceed your cost for inpatient hospital confinements.
- **Telemedicine:** In response to the current conditions related to the Coronavirus (COVID-19) and the need to limit the spread of the virus while maintaining access to care, we will continue our expanded telemedicine benefit for 2021. Telemedicine services include office visits, mental health counseling and preventative health screenings, conducted by providers such as: physicians, nurse practitioners, physician assistants, clinical psychologists, and clinical social workers. Normal copay, coinsurance and deductible amounts will be applied to these services; however, we will continue to waive all member cost sharing for COVID-19 diagnostic and antibody testing.

As a reminder, telemedicine services can also be obtained through Teladoc providers. For 2021, SAMBA will continue to waive the member copayment for the first two (2) Teladoc visits per person, per calendar year. Visit our web site at Sambaplans.com or call 1-800 TELADOC (835-2362) for more information about the Teladoc program or to schedule a visit.

We are extremely pleased to inform you that for the third consecutive year, your health plan premium is being reduced.

The table shows the 2021 High Option premium for all enrollment codes, along with the difference in amounts from the 2020 premiumⁱ.

2021 High Option Premium		
Type	Biweekly	Monthly
Self Only (code 441)	\$162.12 (-\$18.30)	\$351.26 (-\$39.65)
Self Plus One (code 443)	\$370.68 (-\$40.81)	\$803.14 (-\$88.42)
Self & Family (code 442)	\$406.62 (-\$45.75)	\$881.01 (-\$99.12)

The official 2021 Health Benefit Plan Brochure and the Summary of Benefits and Coverage (SBC) documents are available on our web site (Sambaplans.com). You may also request paper copies of either document by visiting our web site or calling us at 1-800-638-6589.

Your 2021 SAMBA ID cards will be mailed to you in late December. Should there be a delay in the mail, please note that your current ID card(s) will continue to be accepted by all medical providers and pharmacies.

As always, we pledge to you our best efforts to deliver the excellent benefits and services you have come to expect from SAMBA and 2021 will be no exception.

Sincerely,



Walter E. Wilson
Executive Director

Enclosures

This communication is a summary. For complete information on benefits, see the Plan's 2021 Federal brochure (RI 71-015). All benefits are subject to definitions, limitations, and exclusions set forth in the Federal brochure.

Required Notice of Summary of Benefits and Coverage

Availability of Summary Health Information: The Federal Employees Health Benefits (FEHB) Program offers numerous health benefits plans and coverage options. Choosing a health plan and coverage option is an important decision. To help you make an informed choice, each FEHB plan makes available online a Summary of Benefits and Coverage (SBC) about each of its health coverage options. The SBC summarizes important information in a standard format to help you compare plans and options. To learn more about the plans available under the FEHB Program, including SBCs for other FEHB plans, visit www.opm.gov/insure.

ⁱ The premiums in the table do not apply to all enrollees. If you are in a special enrollment category, contact the agency which maintains your health benefits enrollment.