

GEHA 2012

Health Savings AdvantageSM

High-deductible health plan with a health savings account (HSA)

(800) 821-6136 | www.geha.com

	CODE
Self Only	341
Self + Family	342



The Benefits of Better Health

Enrollment checklist

1. Research health plans.

More information on the GEHA Health Savings Advantage high-deductible health plan (HDHP) can be found in our 2012 benefit plan brochure and on our website, www.geha.com. Information that can help you compare health plans can be found at www.opm.gov/insure.

2. Enroll in your new plan.

Your Human Resources, Health Benefits or Payroll office can advise you whether to enroll in an online system or by completing the paper form called the Standard Form (SF) 2809.

If you've selected the GEHA Health Savings Advantage HDHP, you'll use one of these enrollment codes:

GEHA HDHP	Self Only	Enrollment Code 341
GEHA HDHP	Self + Family	Enrollment Code 342

3. Receive health plan membership information from GEHA.

After GEHA receives your enrollment, we'll set up your health savings account at HSA Bank® and send you a membership kit. Your new health plan ID card will be mailed by Medco.

4. Receive your welcome packet from HSA Bank.

The welcome packet includes information on signing up for free online banking and making personal deposits to your HSA. Checks and debit cards, if ordered, are mailed separately.

5. Receive GEHA contributions to your health savings account (HSA).

In 2012, GEHA will contribute \$62.50 per month for your Self Only enrollment in the Health Savings Advantage HDHP, or \$125 per month for Self + Family coverage, for each month that you are eligible for the HSA. If you enroll during Open Season and complete your HSA Bank application before the first of the year, your HSA will be open February 1. You'll receive your first GEHA contribution on February 15 and may also make personal, voluntary contributions to your account beginning that month.

6. Manage your account.

You will receive monthly e-statements and quarterly paper statements from HSA Bank and can also enroll for free online banking. Register for Member Web Services on the GEHA website and, at any time, you can check up to 18 months of claims processed by GEHA and check the amount applied toward your HDHP calendar-year deductible.

*Tax laws passed in 2004 allow HSAs only for people who also have a qualified HDHP, such as the GEHA Health Savings Advantage plan. If you enroll in this health plan and do not meet IRS requirements for an HSA, we will provide you with a health reimbursement arrangement (HRA).



GEHA Health Savings AdvantageSM

Take greater control over how you spend your health care dollars.

GEHA Health Savings Advantage combines a high-deductible health plan (HDHP) with a health savings account, or HSA.

Under this plan, you pay for many health care expenses from money saved in your HSA – money GEHA contributes plus money you may also contribute. Once you meet the plan deductible for the year, you receive enhanced provider benefits from GEHA – 95% for most in-network and 75% for most out-of-network care.

There are several tax advantages. You do not pay tax on GEHA's contribution to your HSA or on interest earned in the account. You do not pay tax on HSA withdrawals for qualified medical expenses. In addition, you can take a tax deduction on personal contributions you make to your HSA, up to the amounts allowed by law.

Unlike any other health insurance, an HDHP with an HSA allows you to “bank” current health insurance premiums for the future. Money in your HSA that you don't spend stays in your account and earns interest. If you are a saver with moderate health care expenses, you can build a tax-free nest egg for future health care expenses. If you change jobs or leave the GEHA health plan, you keep your HSA. At age 65, you can even use your HSA savings for non-health care expenses (normal tax rates apply).

Your high-deductible health plan benefits for 2012

Low premiums

	Code	Non-postal Biweekly	Postal Biweekly
Self Only	341	\$ 46.14	\$ 30.45
Self + Family	342	\$ 105.38	\$ 69.55

Preventive care

GEHA provides unlimited adult preventive care (paid at 100%, with no deductible), when you see a network provider. Unlimited preventive care for children is covered at 100%. Annual eye exams through EyeMed are covered for both adults and children with a \$5 copay.

GEHA contributions to your HSA

For members who enroll during Open Season, deposits will be made in February. In 2012, the following amounts will be deposited for members enrolled the entire year:

- \$750 per year for Self Only enrollment / \$62.50 deposited to your HSA by the 15th of each month.
- \$1,500 per year for Self + Family enrollment / \$125 deposited to your HSA by the 15th of each month.

No monthly fees

Online tools at www.geha.com

Your choice of providers

Although you can see any covered provider, you will have lower out-of-pocket expenses and will receive in-network discounts when you see a provider in GEHA's large provider network. To find providers in your area, visit www.geha.com.

Health Savings AdvantageSM High-Deductible Health Plan

Benefit	You Pay – In-Network	You Pay – Out-Of-Network
PHYSICIAN CARE		
Physician	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
Specialist	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
Maternity care	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
Surgical care	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
PREVENTIVE CARE/WELLNESS		
Adult preventive care	Nothing. No calendar year limit on preventive care from PPO providers.	25% of plan allowance, after deductible*
Covered lab services	Nothing	25% of plan allowance, after deductible*
Well child care visits/immunizations	Nothing, up to age 22	Nothing, up to plan allowance, up to age 22
Vision – annual eye exam, lenses & frames, contacts	\$5 copay at participating EyeMed providers. Additional reimbursements for frames, lenses and contacts. See plan brochure for details.	Reimbursement up to \$45 for eye exam. Additional reimbursement for frames, lenses and contacts. See plan brochure for details.
Dental – diagnostic/preventive	50% of plan allowance Twice per year	50% of plan allowance and any balance over plan allowance Twice per year
Chiropractic care	Balance after deductible* and GEHA payment. GEHA pays \$20 per visit for 12 visits per year and \$25 per year for spinal X-rays.	Balance after deductible* and GEHA payment. GEHA pays \$20 per visit for 12 visits per year and \$25 per year for spinal X-rays.
PRESCRIPTIONS		
Retail pharmacy (30-day supply) Generic and brand	25% of plan allowance, after deductible*	25% of plan allowance, after deductible* and any difference between GEHA allowance and the cost of the drug.
Mail order (90-day supply) Generic	Nothing. (first fill, most new prescriptions) Then, 25% of plan allowance, after deductible*	N/A
	Brand	25% of plan allowance, after deductible*
ACCIDENTAL INJURY – OUTPATIENT CARE		
Ambulance, physician, emergency room	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
HOSPITAL/FACILITY CARE		
Hospital inpatient (you must precertify)	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
Hospital outpatient	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
Emergency room	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
Other charges	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
Maternity	5% of plan allowance, after deductible*	25% of plan allowance, after deductible*
CATASTROPHIC LIMITS		
	\$5,000 single/\$10,000 family. This is the maximum coinsurance and deductible you pay before GEHA pays all expenses.	\$5,000 single/\$10,000 family. This is the maximum coinsurance and deductible you pay before GEHA pays all expenses.

*** GEHA CALENDAR YEAR DEDUCTIBLE.**

Under this health plan, your deductible is \$1,500 for Self Only coverage and \$3,000 for Self and Family coverage. With the exception of preventive care, vision and dental, you must pay the full deductible before GEHA pays for your health care. You can use funds in your health savings account to cover your deductible and other medical expenses.

This is a brief description of the features of GEHA. For complete information on benefits, see the GEHA Plan Brochure, RI 71-014. All benefits are subject to the definitions, limitations and exclusions set forth in the federal brochure.

GEHA coverage – paying for the health care you need

With the GEHA Health Savings Advantage plan, like other health plans, you pay a portion of your health care costs. This is a high-deductible health plan (HDHP), which means that you will pay 100% for certain health care, including prescriptions, until you have met a deductible amount for the year.

GEHA pays benefits – *before you meet the deductible* – for preventive, vision and dental care. See the chart on the left for a summary of plan benefits.

HSA funds help pay your deductible

Because GEHA contributes a large portion of your premium into your HSA during the year, your out-of-pocket expense for health care is limited.

	Self	Self + Family
Plan deductible	\$1,500	\$3,000
GEHA contribution to HSA	- \$750	- \$1,500
Balance	\$750	\$1,500

If you enroll at Open Season and remain in the plan all year, GEHA will make a contribution in 2012 for a total of \$750 (Self) or \$1,500 (Self + Family) into your account. If your health care expenses are more than this GEHA contribution, you pay \$750 (Self) or \$1,500 (Self + Family) to meet the deductible before GEHA pays benefits. Preventive care is covered at 100% when you see in-network providers – even before the deductible is met.

Additional contributions (optional)

In addition to the contributions GEHA makes to your HSA, you are welcome to make your own contributions. Your personal deposits can be made to your HSA through online banking, check or payroll deduction. Check with your benefits office to confirm if payroll deduction is available at your agency.

Total contributions (a combination of GEHA's premium pass through contributions and your voluntary contributions) are limited to the maximum contribution amount set by the IRS: \$3,100 for an individual and \$6,250 for a family in 2012. Calculators to help you determine the maximum amount you can contribute can be found on our website. Go to www.geha.com and click on GEHA Health Plans, then Health Savings Advantage. Any individual who will be age 55 or older by the end of 2012 may contribute an additional \$1,000 ("catch-up contribution").

Using your health savings account

When you have qualified medical expenses not paid by GEHA, you can pay with funds in your HSA. You are not required to use your HSA funds and may instead choose to allow the funds to accumulate in your account. To withdraw HSA funds to pay your provider, you can use a debit card, write a check or transfer funds into your personal account online using free online banking.

Preventive care

You do not need to use your HSA funds for in-network preventive care. GEHA provides unlimited adult preventive care (paid at 100%, with no deductible) when you see an in-network doctor. Included are annual physicals, routine adult immunizations, mammograms and cancer screenings. Lab tests as part of your preventive care visit are also covered at 100%. GEHA covers well-child visits and immunizations (paid at 100%, with no deductible), regardless of covered provider. Annual eye exams are covered through EyeMed with a \$5 copay.

Doctor or hospital

You do not have to pay at the time of service when you see a doctor or go to a hospital. Your provider submits your claim to GEHA and then GEHA applies network discounts to the bill. You will receive an explanation of benefits (EOB) form listing “patient responsibility.” Pay that amount to the provider.

Prescriptions

When you fill prescriptions at a pharmacy, you will pay at the time of purchase until your deductible is met. Show your GEHA ID card to get the GEHA negotiated discount, and then pay for the prescription with your HSA debit card, cash, personal check or HSA check. If you pay for the prescription out of personal funds, you may reimburse yourself from your HSA, but be sure to save receipts of all medical expenses reimbursed from the HSA.

Dental and vision

Dental and vision services are not subject to the Health Savings Advantage plan deductible. Use your health plan ID card for dental services. For vision services, be sure to show your EyeMed/vision ID card at the time of service to receive discounted services from participating EyeMed vision care providers. You will receive an explanation of benefits (EOB) from GEHA or EyeMed. Pay the remaining balance to the provider.

Other qualified expenses

Funds in your HSA can be used to pay for some health-related expenses not normally covered by health insurance. These include contact lenses and eyeglasses. For a list of expenses that are eligible (and not eligible) for reimbursement from your HSA, see the IRS website, www.irs.gov. A partial listing is at www.geha.com. Click on GEHA Health Plans, Health Savings Advantage, then Qualified Medical Expenses.

Bank fees

GEHA pays for your initial HSA set-up and initial debit card fees. In addition, GEHA will pay for your monthly HSA Bank administrative fee as long as you remain in GEHA's HDHP and are eligible for an HSA.

PIN-based transactions are approximately \$2 per transaction at the ATM or whenever you use your PIN. Signature-based transactions are free. To avoid PIN-based fees, use your card like a credit card for a signature-based transaction.

Questions & Answers

Am I eligible for an HSA?

To open an HSA, you must first be enrolled in a qualified high-deductible health plan. You must not be enrolled in Medicare or have any other health coverage that is not a qualified HDHP, including coverage under a spouse's health plan. You must not be enrolled in a flexible spending account (FSA) unless it's one specifically designed to work with an HSA, such as the FedFlex program offered through FEHB. Other than an annual physical exam, you must not have received VA medical services within the last three months. If you enroll in the GEHA Health Savings Advantage plan but are not eligible for an HSA, you will be provided with a health reimbursement arrangement (HRA).

What if my medical expenses are more than my health savings account?

You will pay any difference between the balance in your HSA and the deductible. After you meet the deductible, you receive traditional provider network benefits from GEHA – 95% for most in-network and 75% for most out-of-network care. For any out-of-pocket qualified medical expenses, you may pay yourself back with future HSA contributions.

When can I use my HSA?

Funds can be used immediately or can accumulate for future use. For any out-of-pocket qualified medical expense, you can pay yourself back with future HSA contributions.

What do I need to file my taxes?

You will file IRS form 8889 to report distributions from your HSA. HSA Bank will send you IRS form 1099-SA for your use in completing IRS form 8889.

What happens when I turn 65?

After age 65, you can continue to use your HSA funds tax-free for eligible medical expenses. At this age, you also have the option to use funds in your HSA for any reason, even for non-medical expenses, though you will pay taxes on these withdrawals at your normal tax rate.

When you enroll in Medicare, you are no longer eligible for contributions to an HSA. You will automatically transition to a health reimbursement arrangement (HRA) the month prior to the month of your 65th birthday, unless you notify GEHA that you will not be enrolled in Medicare Part A, B or D.

If I retire early, can I withdraw HSA funds for non-medical expenses?

If you use your HSA for **non**-medical withdrawals prior to age 65, the amount will be included in your gross income and you will pay a 20% penalty.



GEHA Health Savings AdvantageSM

Low Premiums

	Code	Non-postal Biweekly	Postal Biweekly
Self Only	341	\$ 46.14	\$ 30.45
Self + Family	342	\$ 105.38	\$ 69.55

No monthly fees

Free preventive care

Online tools at www.geha.com

Your choice of covered providers

For more information

Questions about the GEHA Health Savings Advantage health plan:

- Call GEHA at (800) 821-6136.
- Visit our website at www.geha.com. Click GEHA Health Plans, then Health Savings Advantage.
- Email GEHA Customer Service at cs.geha@geha.com.

Questions about your health savings account (HSA):

- Call HSA Bank[®] at (866) 471-5964 (toll-free).
- Visit the HSA Bank website, www.hsabank.com.

This is a brief description of the features of Government Employees Health Association, Inc. Before making a final decision, please read the GEHA federal brochure, RI 71-014. All benefits are subject to the definitions, limitations and exclusions set forth in the federal brochure.

HSA Bank[®] is a division of Webster Bank, N.A., member FDIC.

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The Benefits of Better Health