
The **1999** Guide to
Federal
Employees
Health Benefits Plans

for
Individuals Receiving
Compensation from the
Office of Workers'
Compensation Programs
(OWCP)



United States
Office of
Personnel
Management

Retirement and
Insurance
Service

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Our Commitment to Our Customers

The U.S. Office of Personnel Management (OPM) administers the Federal Employees Health Benefits (FEHB) Program, the largest employer-sponsored health insurance program in the world. We interpret the health insurance laws and write regulations for the FEHB Program. We give advice and help to agencies and retirement systems so they can process your enrollment changes and deduct your premium. We also contract with and monitor your plan — and almost 300 other health plans — that pay claims or provide care to covered members.

This is our commitment to you:

- Your choice of health benefits plans will compare favorably for value and selection with the private sector.
- When you use the FEHB Guide and plan benefit brochures, you will find they are clear, factual and give you the information you need.
- When you change plans or options, your new plan will issue your identification card within 15 days after it gets your enrollment form from your agency or retirement system.
- Your fee-for-service plan should pay your claims within 20 work days; if more information is needed, it should pay within 60 days.
- If you ask us to review a claim dispute with your plan, our decision will be fair and easy to understand, and we'll send it to you within 60 days. If you need to do more before we can review a claim dispute, we will tell you within 14 work days what you still need to do.
- When you write to us about other matters, we will respond within 30 days after we get your letter. If we need time to give you a complete response, we will let you know.



Better Information
Better Choices
Better Health

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Things to Remember

- A number of plans withdrew from the FEHB Program.
 Make sure your plan will be offered in 1999
 - Be aware of 1999 benefit changes
 - Check the 1999 premium

The information in the 1999 Guide to Federal Employees Health Benefits (FEHB) Plans gives you an overview of the FEHB Program and its participating plans. Before making any final decisions about health plans, be sure to check the plans' brochure.

FEHB and You

The Federal Employees Health Benefits (FEHB) Program can help you meet your health care needs. Federal employees, retirees and their survivors enjoy the widest selection of health plans in the country. You can choose from among Managed Fee-for-Service (FFS) plans, regardless of where you live, or Plans offering a Point of Service (POS) Product and Health Maintenance Organizations (HMO) if you live (or sometimes if you work) within the area serviced by the plan. (See page 6 for definitions.)

Some FFS plans are open to all enrollees, but others require that you join the organization that sponsors the plan. Some plans limit enrollment to certain employee groups. Membership requirements and/or limitations also apply to any POS product the FFS plan may be offering.

Managed care is an important part of the FEHB Program. You will find managed care features in all the plans described in this Guide. Common features of managed care are pre-approval of hospital stays, the use of primary care providers as “gatekeepers” to coordinate your medical care, and networks of physicians and other providers.

You are fortunate to be able to choose from among many different health plans competing for your business. Use this Guide to compare the costs, benefits, and features of different plans. The plan brochures tell you what services and supplies are covered and the level of coverage. Look over the brochures carefully, especially the Changes page of your current plan to see how benefits have changed from last year. You can get brochures from the health plans or your OWCP district office. They are also available on our web site at www.opm.gov/insure. When it comes to your health care, the best surprise is no surprise.



Do not cancel your enrollment before reading this section.

You may voluntarily cancel your enrollment at any time. However, once your cancellation takes effect, you probably will not be able to enroll again as a retiree. You will **not** be entitled to a 31-day extension of coverage for conversion to a non-group (private) policy and neither you nor your family members will be entitled to temporarily continue coverage.

You will **not** be able to reenroll in FEHB except under the following circumstances:

- You have been continuously covered as a family member under another enrollment in FEHB since the date of your cancellation, **and** you lose the coverage because the enrollment ends or the enrollee changes from self and family to self only; or
- You suspended your FEHB coverage to enroll in a Medicare-sponsored health plan under the Social Security Act or because you are eligible under Medicaid or a similar State-sponsored program of medical assistance for the needy.

For more information on how to suspend your FEHB enrollment, contact the OWCP district office that handles your case.

Time limitations and other restrictions apply. For instance, you must submit documentation that you are suspending FEHB to enroll in a Medicare-sponsored health plan or furnish proof of eligibility for coverage under the Medicaid program or similar State-sponsored program of medical assistance for the needy, in case you wish to reenroll in the FEHB Program at a later time.

If you had suspended FEHB coverage for either one of these reasons (and had submitted the required documentation) but now want to enroll in the FEHB Program again, you may enroll during Open Season. You may reenroll outside Open Season only if you move out of the Medicare-sponsored health plan’s service area, the Medicare-sponsored health plan is discontinued, or you involuntarily lose coverage under the Medicaid program or similar State-sponsored program of medical assistance for the needy. If you cancelled your coverage for any other reason, you **cannot** reenroll.

FEHB and You

Choosing a plan

Cost — certainly the premium you pay is an important consideration, but there are some other things you should consider. When thinking about premiums, what can you afford biweekly or monthly? Should you enroll in a High Option – and pay High Option premiums – if a Standard Option would do?

If you need to go to the hospital, how much will you have to pay? Do you know how much you will pay for an emergency room visit? If you have children, what will it cost you for a well-child care visit?

Do you have to pay a deductible for the services you might use? Your share of medical expenses is either a coinsurance (a percentage of the bill) or a copayment (a fixed dollar amount). Which option do you prefer and what does the plan require? Does the plan limit the dollar amount it will pay for certain services?

Coverage — check to see if the plan offers the services you think you might need. If you're 65 or over, how does the plan coordinate coverage with Medicare? If you regularly see an allergist, do you pay extra for the allergy serum? Does the plan offer a prenatal program? Given the trend toward reducing hospital stays, will your plan pay for home health care? Because health care is expensive, pay attention to the plan's catastrophic coverage to see how you are protected. See if there are limits on the number of visits for the services you need.

How the plan works — if predictable cost, comprehensive benefits, no paperwork, and a coordinated approach to health care are high priorities, consider a Health Maintenance Organization (HMO). Most HMOs require you to select a doctor to act as your

primary care physician, or PCP, who refers you to specialists. If you don't use a plan doctor, the plan usually will not pay for services, unless it is an emergency.

A Plan offering a Point of Service (POS) Product also has rules about doctor choice and access to specialists, but you can choose any doctor you like and see specialists without referrals if you agree to pay more.

If you are willing to pay a little more in total costs for the widest choice of doctors, a Fee-for-Service (FFS) plan might be for you. FFS plans let you choose your own doctor and allow you to see specialists without a referral. Most FFS plans have Preferred Provider Organizations (PPO) that save you money if you use these providers.

Some plans offer 24-hour medical advice lines to help you make health decisions. These programs try to keep you healthy and avoid unnecessary – and potentially costly and time consuming – medical treatment.

Satisfaction — the experience of FEHB members form the satisfaction ratings in this Guide. If you're considering joining a FFS plan, chances are you'll file a claim. How quickly does the plan process claims? Will the plan be responsive to your questions? As an HMO enrollee, you might be most interested in how the plan is rated in access to care and choice of doctors. Ask the plan for its satisfaction ratings for the past few years. Have the ratings changed much? Ask your doctor's office about experiences with different health plans.

Accreditations — HMO accreditations reflect the independent evaluations of nationally-recognized organizations. Plans willing to go through an accreditation review show a commitment to continuous quality improvement and accountability.

FEHB and You

Getting the most from a plan

Within any plan, there are things you can do to minimize your out-of-pocket costs and make the plan work best for you.

Cost — an easy way to save money is to use your plan’s mail order drug program, if it has one. Request generic drugs instead of brand name drugs. Almost all FFS Plans have Preferred Provider Organizations (PPO, see definitions). Using a PPO will reduce your out-of-pocket expenses. If you do not use a PPO provider, your plan will base its payment on a “usual and customary” allowance which may be less than the actual billed charge. This means you might have to pay the difference. You can reduce the chance of this happening by discussing fees in advance with your provider. Remember that plans set their own allowances.

It is also important to note that all of the services provided in a PPO hospital may not be covered by PPO arrangements. Room and board will be covered, but

the anesthesia and radiology services may not be. The only way to find out is to ask ahead of time.

Quality — talk openly with your health plan and providers about the kind of quality you want. Is your HMO rated by a national accrediting organization? Ask your surgeon how frequently (s)he performs the procedure you’re considering and how the patients are doing. If you’re pregnant, ask your obstetrician the percentage of cases in which (s)he performs a cesarian section. Is your doctor proposing a radical approach to treatment when a more conservative one is just as effective? Does your doctor tell you about possible drug interactions with you when prescribing a new medication?

No one has a greater stake in your health than you. Understand how your plan works and don’t be shy about asking questions. An informed consumer is a better decision maker.



**Call the FEHB Fraud Hot Line
(202) 418-3300
if a provider has billed you for services
you did not receive.**

Program Features

Some of our important Program features are:

No waiting periods. Your human resource office sets the effective date of your coverage. You can use your FEHB benefits as soon as your coverage is effective — there are no waiting periods, required medical examinations or restrictions because of age or physical condition.



A choice of coverage. You can choose self only coverage just for you, or self and family coverage for you, your spouse, and unmarried dependent children under age 22. Under certain circumstances, your FEHB enrollment may cover your disabled child 22 years old or older who is incapable of self-support.



A choice of plans and options.

- Managed Fee-for-Service plans
- Plans offering a Point of Service product
- Health Maintenance Organizations



A Government contribution. The Government contributes toward the total cost of your premium. In 1999, the Government will pay up to \$1873.56 for each self only enrollment and \$4170.14 for each self and family enrollment, but not more than 75% of the total premium for any plan. The Government contribution for part-time employees may be different. See your human resource office to get the exact amount.

Deduction from your compensation benefits for your share.

After the Government pays its share toward the total premium, you pay the rest. Each plan's premium in this Guide is the amount that will be withheld in 1999.

Even if you do not change your enrollment, your premium may change for the coming year. Premium changes will be reflected in the check you receive for the period beginning January 3, 1999. The amount

you pay will be deducted from your compensation benefits every four weeks in 1999.

Annual opportunities to change plans. Each year you have the opportunity to change plans. The 1998 Open Season is from November 9 through December 14, during which you may change plans or options, or change from self only to self and family. (You may change from self and family to self only at any time.)

If you are enrolled and want to change your enrollment in Open Season, use the postcard on the back cover of this booklet to request a registration form to make a change. (Your health plan will send you its brochure. You can use the postcard to order brochures for other plans.)

Cut the postcard along the perforated lines, then complete the postcard and mail it to the OWCP district office that handles your case. See page 58 for the district office addresses. If you order brochures, you will be given another form to make a change. Any enrollment change you make will take effect January 1999.

Your new plan will mail you an identification card. If you need services before you receive your new card, contact your new plan at the member services number in your brochure.

If you decide not to change your enrollment, no action by you is necessary.



Continued group coverage. The FEHB Program offers continued FEHB coverage for you and your family when you move, for your family if you die, or for your former spouse if you divorce and he or she has a qualifying court order (contact the OWCP district office that handles your case for more information).

Coverage after FEHB ends. The FEHB Program offers either temporary continuation of FEHB coverage (TCC) or conversion to non-group (private) coverage for your covered dependent child if he or she marries or turns age 22, or for your former spouse if you divorce and he or she does not have a qualifying court order (contact the OWCP district office that handles your case for more information).

Patient Bill of Rights and Responsibilities

The Patient Bill of Rights and Responsibilities spells out recommendations made by the President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry. These recommendations promote and ensure health care quality and protect health care consumers. The President signed an Executive memorandum directing us (the Office of Personnel Management) to take steps to bring the FEHB Program into contractual compliance with these recommendations.

We are pleased to report that most FEHB plans already comply with the Commission's Patient Bill of Rights and Responsibilities. For 1999, you can expect all of the following from your FEHB plan:

- Direct access to women's health care providers for routine and preventative women's health care services.
- Coverage of emergency department services for screening and stabilization without authorization if you have reason to believe your life is endangered or you would be seriously injured or disabled.

- Direct access to a qualified specialist within your network of providers if you have complex or serious medical conditions that need frequent specialty care. Authorizations, when required by a plan, will be for an adequate number of direct access visits under an approved treatment plan.
- Extensive information about plan characteristics and performance, provider network characteristics, and care management.
- The elimination of "gag rules" in provider contracts that could limit communication about medically necessary treatment.

The health care system works best when enrollees take the time to become informed. As responsible consumers, you should:

- Read and understand your health benefits coverage, limitations, and exclusions, health plan processes, and procedures to follow when seeking care.
- Work with your physician in developing and carrying out a treatment plan.
- Practice healthy habits.

Definitions and Explanations

Brochure — A plan’s description of benefits, limitations, exclusions, and definitions under the FEHB Program. You can get brochures from the health plans. They are also available on our web site at www.opm.gov/insure.

Catastrophic limit — The maximum amount of certain covered charges you have to pay out of your own pocket during the year.

Coinsurance — How you and your FEHB plan split the cost of covered medical expenses. For example, a 20% coinsurance means you pay 20% of most covered charges. The plan pays 80%.

Copayment — A fixed dollar amount you pay as your share of a service or benefit (sometimes called a copay).

Covered charges — What the plan pays for. You’ll find information about covered benefits, expenses and services in each plan’s brochure.

Deductible — The amount of covered charges you must pay before the plan begins to pay.

Health Maintenance Organization (HMO) — A health plan that provides care through a network of physicians and hospitals in particular geographic or service areas. HMOs coordinate the health care services you receive. Your eligibility to enroll in an HMO is determined by where you live or, for some plans, where you work. Some HMOs have agreements with providers in other service areas for non-emergency care if you travel or are away from home for extended periods.

- The HMO provides a comprehensive set of services — as long as you use the doctors and providers in the HMO network. You may have to pay something when you get care, for example, a \$10 copayment per office visit.
- Most HMOs ask you to choose a doctor or medical group to be your primary care provider (PCP). Your PCP takes care of most of your medical needs. In many HMOs, generally you must get permission or a “referral” from your PCP in order to see other providers in the network.
- Care received from a non-network provider, other than emergency care, is generally not covered.

Definitions and Explanations

Managed Fee-for-Service (FFS) Plan — A traditional type of insurance that lets you use any doctor or hospital, but you usually must pay a deductible and coinsurance. These plans are called FFS because doctors and other providers are paid for each service, such as an office visit, or test. They help control costs by managing some aspects of patient care. Most also provide access to PPOs.

Preferred Provider Organization (PPO) — A FFS option where you can choose plan-selected providers who have agreements with the plan. When you use a PPO provider, you pay less money out-of-pocket for medical service than when you use a non-PPO provider.

Plans offering a Point of Service (POS) Product — A product offered by an HMO or FFS plan that has features of both. In an HMO, the POS product lets you use providers who are not part of the HMO network. However, there is a greater cost associated with choosing these non-network providers. You usually pay deductibles and coinsurances that are substantially higher than the payments when you use a plan

provider. You will also need to file a claim for reimbursement, like in a FFS plan. The HMO plan wants you to use its network of providers, but recognizes that sometimes enrollees want to choose their own provider.

In a FFS plan, the plan's regular benefits include deductibles and coinsurance. But in some locations, the plan has set up a POS network of providers similar to what you would find in an HMO. The plan encourages you to use these providers, usually by waiving the deductibles and applying a copayment that is smaller than the normal coinsurance. Generally, there is no paperwork when you use a network provider.

Provider — As used in this Guide and plan brochures, a provider means an individual or institution that provides medical or health services, such as doctors, hospitals, nurse-midwives, or therapists. "Covered" providers are those the plan will reimburse.

Your Links to Information

1999 FEHB Web Site — www.opm.gov/insure

Our 1999 FEHB web site gives current and valuable information to help you choose a health plan. Visit us at www.opm.gov/insure.

You will find even more information on our site this year. The new Health Plan Profiler (HPP) lets you view and print summary information about health plans. Enrollees in some states can use a new interactive decision tool to narrow the health plan search.

You can download and print plan brochures and other materials, access definitions by clicking hyperlinks, and use automated links to navigate to other sites. When you visit www.opm.gov/insure you will see these choices and more:

- **1999 Plan Information** – gives you access to general information about plans, plan quality indicators (including detailed survey results which are not printed in this Guide), plan brochures, and information about how to choose a plan. You can link to other web sites with valuable information about health plans, including those plans participating in the FEHB Program. You also can view, download and print the **Guides to Federal Employees Health Benefits Plans**.

The **Health Plan Profiler** is an easy-to-use web tool that lets you create plan profiles and summaries. You also can link to FEHB plan web sites from the Health Plan Profiler. Plans that have a  in the column labeled “Web site” in this Guide have their own web site.

- **Annuitant Information** – gives you general information about Open Season for annuitants as well as new features available to retirees, including how to make Open Season changes through the Internet. You can also link to the Medicare web site.
- **Patient Bill of Rights** – gives you information about the three objectives of the Patient Bill of Rights and the eight principle areas of rights and responsibilities. You can also link to the full text of the Patient Bill of Rights and related background information.
- **Frequently Asked Questions** – gives you answers to questions about premiums, Employee Express, enrollment, family members, temporary continuation of coverage (TCC), switching plans, retirement and other topics of interest.

Quality Indicators

Accreditation

We encourage all FEHB plans to get accreditation from national accrediting organizations. These organizations evaluate health plans and health care organizations and confer accreditation, much like educational accrediting organizations confer accreditation on schools. We have listed the accreditation status of the FEHB plans that requested review from two large, nationally-recognized accrediting organizations — NCQA and JCAHO.

National Committee for Quality Assurance (NCQA)

The NCQA accreditation process evaluates how well an HMO manages all parts of its delivery system, including physicians, hospitals, other providers, and administrative services. NCQA evaluations are used to assess the quality of a plan's operations.

- ★ **Full Accreditation** is granted for a period of three years to those plans that have excellent programs for continuous quality improvement and meet NCQA's rigorous standards.
- **One-Year Accreditation** is granted to plans that have well-established quality improvement programs and meet most NCQA standards. NCQA reviews the plans again after a year to determine if their accreditation status should be changed.
- ◐ **Provisional Accreditation** is granted for one year to plans that have adequate quality improvement programs and meet some NCQA standards. When these plans demonstrate progress, they can qualify for a higher level of accreditation.
- ⊗ **Denial** indicates that a plan was reviewed but did not qualify for any of the above categories.

Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

The JCAHO accreditation process evaluates an HMO's level of performance in key functional areas, such as care and treatment of patients, patient rights, improving organizational performance, and organizational ethics. JCAHO standards set performance expectations about the quality of patient care.

- ★ **Accreditation With Commendation** is granted to those plans that have demonstrated exemplary performance in complying with JCAHO standards.
- **Accreditation** is granted when a plan has demonstrated acceptable compliance with JCAHO standards.
- ◐ **Accreditation With Recommendations For Improvement** is granted when a plan receives at least one recommendation addressing insufficient or unsatisfactory compliance in a specific performance area.
- ⊗ **Not Accredited** indicates a plan has been denied accreditation because of significant noncompliance with JCAHO standards, or a plan's accreditation is withdrawn by JCAHO, or the plan voluntarily withdrew from the accreditation process.

Note: This Guide does not show an accreditation status for every plan. There may be various reasons why you won't find an accreditation symbol for a plan; check with the plan for specific information.

You may call a plan for more information about their accreditation status or call NCQA toll free at (888) 275-7585 or JCAHO at (630) 792-5800. You may also visit NCQA's web site at www.ncqa.org or JCAHO's web site at www.jcaho.org. You can link to either site from our web site at www.opm.gov/insure.

Quality Indicators

1998 Customer Satisfaction Survey Results

Each year we ask a sample of Federal enrollees to rate their satisfaction with their plans. We know this is an important consideration for most people when choosing between plans. Ratings are included in this Guide for most FEHB plans.

If a plan is not rated, it is because the plan is new to the FEHB Program or the number of respondents was too small for us to reliably include their opinions.

The Ratings. We survey enrollees and ask them to rate various aspects of their health plan on a five point scale of *poor*, *fair*, *good*, *very good*, and *excellent*. Plans that enrollees rated significantly better than average in any category have a ●, average ratings get a ◐, and significantly below average get a ○. The average rating for all plans of the same type is shown in the column heading.

For more detailed information about ratings, visit our web site at www.opm.gov/insure.

The categories shown in this Guide were chosen because of their importance to most people in selecting a plan (some categories apply only to POS and HMO plans or only to FFS plans):

- Ability to see the same doctor on most visits,
- Access to medical care (arranging for and getting care),
- Access to medical care in an emergency (POS and HMO only),
- Choice of doctors available through the plan (being able to find doctors you are satisfied with),

- Costs you personally have to pay (FFS only),
- Coverage (range of services covered),
- Explanation of care (what is wrong, what is being done, and what to expect),
- Getting appointments when sick,
- Getting claims processed quickly (FFS only),
- Quality of care (from doctors and other medical professionals), and
- Results of care.

Overall Satisfaction. We also asked enrollees about their **overall** satisfaction with their health plan.

A bar graph for each plan shows the percentage of plan enrollees who indicated they were *extremely satisfied*, *very satisfied* or *satisfied*.

Example:

19	45	22
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In the example, 19% of respondents are *extremely satisfied*, 45% are *very satisfied*, and 22% are *satisfied*. The numbers in the bar add to 86, meaning 86% of respondents were at least satisfied with the plan. The remainder were less than satisfied with the plan overall.

Plans with an overall satisfaction score that is significantly higher than the average overall score are identified with a ✓ in the column labeled “Top rated plans”.

A Word About Medicare

Most Federal employees aren't yet eligible for Medicare, but many of us have friends or relatives who are. The Balanced Budget Act of 1997 (P.L. 105-33) expanded Medicare's health plan options with the creation of Medicare+Choice. Beginning in 1999, Medicare beneficiaries can remain in the original Medicare plan or choose to get their Medicare benefits from an array of other Medicare+Choice options. These options include managed care plans such as HMOs and PPOs, as well as Private FFS plans and Medical Savings Accounts (MSAs). Medicare benefi-

ciaries will receive information about these new choices this fall, or can check Medicare's web site at www.medicare.gov. If a friend or relative asks you about these new choices, they need to know that they don't have to make any change. If they want to change and have an employer-sponsored health care policy, they should first talk with their former employing office. Former Federal employees should call their retirement system before making any change, especially if they are considering suspending their FEHB coverage.

Choosing a Health Plan?

DID YOU KNOW?

About 58,000 Americans are waiting for organ transplants, and about 4,000 die each year while waiting.

There is *no* cost to your family when you become an organ donor.

Your decision to become an organ and tissue donor *will not* affect your medical care because every effort is made to save your life before donation occurs.

A national system is in place to ensure fair distribution of organs without regard to race, gender, age, income or celebrity status.

All major religious groups in the U.S. approve of and support organ and tissue donation.

To be an organ and tissue donor, even if you've put your wishes in writing, you must tell your family members *now* so they can carry out your decision later.

Organ & Tissue DONATION



©Coalition on Donation

Share Your Life.

SIGN YOUR DONOR CARD.

*Share Your Decision.*SM

TELL YOUR FAMILY.

For a free brochure and donor card, call the
Coalition on Donation at 1-888-90-SHARE
(1-888-907-4273) or visit the
U.S. Department of Health & Human Services web site:
www.organdonor.gov

Plan Report Cards

Nationwide Managed Fee-for Service Plans

(Pages 14 through 16)

Important: Some FFS plans also offer a POS product.
Check the POS section.

Nationwide Managed Fee-for-Service Plans			Enrollment code		Twice-Biweekly Premium Your Share	
			Self only	Self & family	Self only	Self & family
Plan name	Telephone number	Web- site				
Plans open to all						
Alliance Health Plan	202/939-6325		YQ1	YQ2	124.72	249.16
APWU Health Plan	800/222-2798		471	472	73.40	156.58
Blue Cross and Blue Shield Service Benefit Plan-High	local phone #		101	102	127.14	259.24
Blue Cross and Blue Shield Service Benefit Plan-Std*	local phone #		104	105	55.64	124.64
GEHA Benefit Plan*	800/821-6136		311	312	72.50	146.42
Mail Handlers-High	800/410-7778		451	452	77.78	147.26
Mail Handlers-Std	800/410-7778		454	455	38.34	83.20
NALC	703/729-4677		321	322	86.28	171.58
Postmasters-High	703/683-5585		361	362	231.54	489.76
Postmasters-Std*	703/683-5585		364	365	83.68	171.98
Plans open only to specific groups						
Association Benefit Plan	800/634-0069		421	422	†	†
Foreign Service	202/833-4910		401	402	59.54	174.42
Panama Canal Area	504/566-3501		431	432	46.02	99.82
Rural Carrier Benefit Plan	800/638-8432		381	382	68.12	111.90
SAMBA	301/984-1440		441	442	79.44	205.70
Secret Service	800/424-7474		Y71	Y72	44.20	104.76

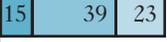
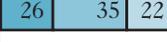
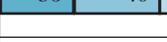
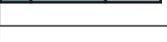
*Offers a Point of Service product.

† See your Personnel Office.

Nationwide Managed Fee-for-Service Plans Plan name	Benefit type	Medical-surgical											
		You pay				Plan pays							
		Deductible		Catastrophic limit		Inpatient care				Outpatient care			
		Calendar year	Inpatient hospital	Per person	Per family	Hospital		Doctor		Hospital		Doctor	
				Room & board	Other	Surgeon	Other	Surgeon	Other	Surgeon	Other	Tests	Accidental injuries
Plans open to all													
Alliance Health Plan	Non-PPO PPO	\$300 \$100	\$250 \$150	\$3,000 \$2,000	\$3,000 \$2,000	70% 90%	70% 90%	70% 90%	70% 90%	70% 90%	70% 90%	70% 90%	100% 100%
APWU Health Plan	Non-PPO PPO	\$250 \$250	\$200 None	\$3,500 \$2,000	\$3,500 \$2,000	70% 90%	70% 90%	70% 90%	70% 90%	70% 90%	70% 90%	70% 90%	100% 100%
Blue Cross and Blue Shield Service Benefit Plan-High	Non-PPO PPO	\$150 \$150	\$100 None	\$2,700 \$1,000	\$2,700 \$1,000	100% 100%	100% 100%	80% 95%	80% 95%	80% 95%	* *	80% 95%	100% 100%
Blue Cross and Blue Shield Service Benefit Plan-Std	Non-PPO PPO	\$200 \$200	\$250 None	\$3,750 \$2,000	\$3,750 \$2,000	100% 100%	100% 100%	75% 95%	75% 95%	75% 95%	* *	75% 95%	100% 100%
GEHA Benefit Plan	Non-PPO PPO	\$250 \$250	None None	\$3,500 \$2,500	\$4,000 \$3,000	100% 100%	80% 90%	80% 90%	80% 90%	80% 90%	80% 90%	80% *	100% 100%
Mail Handlers-High	Non-PPO PPO	None None	\$250 None	\$3,000 \$2,000	\$3,000 \$2,000	100% 100%	100% 100%	70%* *	70% *	70%* *	70% *	70% *	100% 100%
Mail Handlers-Std	Non-PPO PPO	\$100 None	\$300 \$150	\$3,000 \$3,000	\$3,000 \$3,000	100% 100%	100% 100%	70%* 95%*	70% *	70%* 95%*	70% *	70% *	100% 100%
NALC	Non-PPO PPO	\$275 \$275	\$100 None	\$3,500 \$3,000	\$3,500 \$3,000	80% 100%	80% 100%	70% 85%	70% 80%	70% 85%	70% 80%	70% 80%	100% 100%
Postmasters-High	Non-PPO PPO	\$275 \$200	\$150 None	\$2,500 \$2,500	\$2,500 \$2,500	100% 100%	85% 100%	85% 95%	80% 95%	85% 95%	80% 95%	80% 95%	100% 100%
Postmasters-Std	Non-PPO PPO	\$300 \$200	\$600 \$350	\$6,700 \$3,000	\$6,700 \$3,000	70% 100%	70% 95%	70% 95%	70% 95%	70% 95%	70% 95%	70% 95%	100% 100%
Plans open only to specific groups													
Association Benefit Plan	Non-PPO PPO	\$250 \$250	\$100 None	\$2,000 \$2,000	\$2,000 \$2,000	80% 100%	80% 100%	80% 90%	80% 90%	80% 90%	80% 90%	80% 90%	100% 100%
Foreign Service	Non-PPO PPO	\$250 \$250	\$175 None	\$2,500 \$2,500	\$3,000 \$3,000	80% 100%	85% 85%	90% 90%	80% 90%	100% 100%	80% 90%	80% 90%	100% 100%
Panama Canal Area	Non-PPO	None	\$125	\$1,000	-	100%	80%	100%	SA**	100%	75%	75%	100%
Rural Carrier Benefit Plan	Non-PPO	\$250	\$200	\$2,500	\$3,000	100%	80%	85%	75%	85%	75%	75%	SA**
SAMBA	Non-PPO PPO	\$300 \$200	\$200 \$200	\$1,500 \$1,500	\$2,000 \$2,000	70% 100%	70% 95%	70% 95%	70% 95%	70% 95%	70% 100%	70% 95%	100% 100%
Secret Service	Non-PPO	\$200	\$100	\$1,000	\$2,000	100%	100%	80%	80%	80%	80%	80%	100%

*Copayment applies. See brochure for details.

** Scheduled Allowance.

Plan name	Plan code	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average, ○ below average (Numeric average for all Fee-for-Service plans in heading)												Top rated plans		
		% satisfied with plan			Coverage (93%)	Access to care (92%)	Choice of doctors (72%)	When sick, can get appointment (83%)	Quality of care (88%)	Provider thorough and competent (88%)	Explanation of care (85%)	Results of care (84%)	Plan handles your questions well (80%)		Process claims quickly (97%)	Costs you pay (85%)
		 % Extremely satisfied	 % Very satisfied	 % Somewhat satisfied												
Plans open to all																
Alliance Health Plan*	YQ		○	●	●	●	●	●	●	●	●	●	○			
APWU Health Plan	47		●	●	●	●	●	●	●	●	●	●	●			
Blue Cross and Blue Shield-High	10		●	●	●	●	●	●	●	●	●	●	●			
Blue Cross and Blue Shield-Std	10		●	●	●	●	●	●	●	●	●	●	●	✓		
GEHA Benefit Plan	31		●	●	●	●	●	●	●	●	●	●	●	✓		
Mail Handlers-High	45		●	●	●	●	●	●	●	●	●	○	○			
Mail Handlers-Std	45		○	●	●	●	●	●	●	●	●	○	○			
NALC	32		○	●	○	●	●	●	●	●	●	●	○			
Postmasters-High	36		●	●	●	●	●	●	●	●	●	●	○			
Postmasters-Std	36		●	●	●	●	●	●	●	●	●	○	○			
Plans open only to specific groups																
Association Benefit Plan	42		●	●	●	●	●	●	●	●	●	●	●	✓		
Foreign Service	40		●	●	●	●	●	●	●	●	●	●	●			
Panama Canal Area	43															
Rural Carrier Benefit Plan	38		●	●	●	●	●	●	●	●	●	●	●			
SAMBA	44		●	●	○	●	●	●	●	●	●	●	●			
Secret Service	Y7		○	●	●	●	●	●	●	●	●	●	●			

*1997 Survey data

Plan Report Cards

Plans Offering Point of Service Product

(Pages 18 through 26)

Important: Some plans have been redesignated as HMOs.
If you do not find your plan in this section,
check the HMO section.

Plans Offering a Point of Service Product Nationwide and by State (Also check HMO Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Nationwide					
Postmasters-Std - All states	703/683-5585	364	365	83.68	171.98
Arizona					
Health Plan of Nevada - Mohave County	702/871-0999	NM1	NM2	36.98	85.02
Arkansas					
American HMO - Most of Arkansas	800/333-3534	RB1	RB2	36.86	90.32
QCA Health Plan - Most of Arkansas	800/235-7111	8Q1	8Q2	45.12	119.86
Colorado					
HMO Colorado/Nevada - Most of Colorado	800/533-5643	L21	L22	41.72	104.28
Connecticut					
Blue Cross and Blue Shield-Std - All of Connecticut	800/438-5356	104	105	55.64	124.64
Physicians Health Services/CT - All of Connecticut	800/848-4747	DP1	DP2	81.20	308.90
District of Columbia					
Free State Health Plan - Washington, DC area	800/445-6036	LD1	LD2	47.74	172.20
Prudential HealthCare HMO - Washington, DC area	800/888-5447	JB1	JB2	46.12	101.54
United HealthCare Mid-Atlantic - Washington, DC/most of Maryland	410/277-9300	BL1	BL2	42.72	102.54
Georgia					
Blue Cross and Blue Shield-Std - Athens/Atl/Augusta/Col/Macon/Savannah	800/282-2473	104	105	55.64	124.64
Hawaii					
HMSA - All of Hawaii	808/948-6499	871	872	43.16	100.38
Illinois					
American HMO - Chicago area/Central/South/Western IL	800/242-7460	AC1	AC2	43.08	103.42
Indiana					
American HMO - Northwest Indiana	800/242-7460	AC1	AC2	43.08	103.42
Kansas					
Blue Cross and Blue Shield-Std - Most of Kansas	800/432-0379	104	105	55.64	124.64
Louisiana					
Blue Cross and Blue Shield-Std - New Orleans area	800/272-3029	104	105	55.64	124.64
Maxicare Louisiana - Baton Rouge/New Orleans areas	800/933-6294	JA1	JA2	37.52	87.32
Maryland					
Free State Health Plan - All of Maryland	800/445-6036	LD1	LD2	47.74	172.20
Prudential HealthCare HMO - Most of Maryland	800/888-5447	JB1	JB2	46.12	101.54
United HealthCare Mid-Atlantic - Most of Maryland/Washington, DC	410/277-9300	BL1	BL2	42.72	102.54
Massachusetts					
Blue Chip, Coord Hlth Partners - Southeastern Massachusetts	401/459-5500	DA1	DA2	44.32	133.14

Plans Offering a Point of Service Product Nationwide and by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all plans offering a Point of Service product in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site
	% satisfied with plan			Coverage (87%)	Access to care (91%)	Access to care in an emergency (87%)	Choice of doctor (84%)	When sick, can get appointment (82%)	Seeing same doctor on most visits (89%)	Quality of care (91%)	Provider thorough and competent (94%)	Explanation of care (90%)	Results of care (90%)			
Plan name																
Nationwide																
Postmasters-Std																
Arizona																
Health Plan of Nevada	9	32	31	●	○	○	○	○	○	○	○	○	○		●	
Arkansas																
American HMO	19	32	27	○	●	●	○	●	●	●	●	●	●			
QCA Health Plan																
Colorado																
HMO Colorado/Nevada*	19	36	34	●	●	●	●	●	●	●	●	●	●		●	
Connecticut																
Blue Cross and Blue Shield-Std															★	
Physicians Health Services/CT	24	41	26	●	●	●	●	●	●	●	●	●	●	✓	●	
District of Columbia																
Free State Health Plan	16	50	24	●	●	●	●	●	●	●	●	●	●	✓	●	
Prudential HealthCare HMO	8	37	29	●	○	○	○	●	●	○	○	○	○		●	
United HealthCare Mid-Atlantic*	16	38	28	●	○	○	○	●	●	●	○	○	○			
Georgia																
Blue Cross and Blue Shield-Std															★	
Hawaii																
HMSA	20	43	29	●	●	●	●	●	●	●	●	●	●	✓		
Illinois																
American HMO	4	32	30	○	○	○	○	○	○	○	○	○	○			
Indiana																
American HMO	4	32	30	○	○	○	○	○	○	○	○	○	○			
Kansas																
Blue Cross and Blue Shield-Std																
Louisiana																
Blue Cross and Blue Shield-Std																
Maxicare Louisiana	18	41	28	●	○	●	●	○	●	●	●	●	●			
Maryland																
Free State Health Plan	16	50	24	●	●	●	●	●	●	●	●	●	●	✓	●	
Prudential HealthCare HMO	8	37	29	●	○	○	○	●	●	○	○	○	○		●	
United HealthCare Mid-Atlantic*	16	38	28	●	○	○	○	●	●	●	○	○	○			
Massachusetts																
Blue Chip, Coord Hlth Partners	14	41	34	●	●	●	●	●	●	●	●	●	●		●	

*1997 Survey data

Plans Offering a Point of Service Product Nationwide and by State (Also check HMO Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Massachusetts (continued)					
Blue Cross and Blue Shield-Std - All of Massachusetts	800/433-7766	104	105	55.64	124.64
United HealthCare New England - All of Massachusetts	800/422-1404	VF1	VF2	60.82	171.04
Minnesota					
Blue Cross and Blue Shield-Std - All of Minnesota	800/859-2128	104	105	55.64	124.64
Nebraska					
GEHA Benefit Plan - Omaha area	800/821-6136	311	312	72.50	146.42
Nevada					
Health Plan of Nevada - Las Vegas/Reno areas	702/871-0999	NM1	NM2	36.98	85.02
HMO Colorado/Nevada - Most of Nevada	800/438-5270	VS1	VS2	47.06	128.92
New Jersey					
Blue Cross and Blue Shield-Std - All of New Jersey	800/624-5078	104	105	55.64	124.64
GHI Health Plan - Northern New Jersey	201/623-6000	801	802	46.40	143.20
New York					
Blue Cross and Blue Shield-Std - NYC/LI/Rocklnd/Wstchstr/Mid-Hudson	800/522-5566	104	105	55.64	124.64
GHI Health Plan - All of New York	212/501-4444	801	802	46.40	143.20
Physicians Health Svcs of NY - NYC/LI/Dtchs/Orng/Putnm/Rklnd/Wschs	800/848-4747	PD1	PD2	119.48	368.00
North Carolina					
QualChoice of North Carolina - Northwestern North Carolina	800/816-0911	7Q1	7Q2	42.38	103.18
North Dakota					
Blue Cross and Blue Shield-Std - Fargo/Moorehead area	800/548-4026	104	105	55.64	124.64
Ohio					
Blue Cross and Blue Shield-Std - Cincinnati area	888/818-4767	104	105	55.64	124.64
HealthFirst, Inc. - North Central Ohio	800/858-1472	RF1	RF2	45.90	148.16
Oklahoma					
Blue Cross and Blue Shield-Std - Lawton/OK City/Tulsa/Other areas	800/722-3130	104	105	55.64	124.64
Pennsylvania					
Free State Health Plan - Southern Pennsylvania	800/445-6036	LD1	LD2	47.74	172.20
Penn State Geisinger HlthPlan - Central/Northeastern Pennsylvania	717/271-8760	N91	N92	33.82	103.16
Puerto Rico					
PCA Health Plans/Puerto Rico - All of Puerto Rico	787/282-7900	5P1	5P2	34.62	92.44
Triple-S - All of Puerto Rico	787/749-4777	891	892	42.60	91.48
United HealthCare Puerto Rico - All of Puerto Rico	787/782-5792	7U1	7U2	36.34	78.38
Rhode Island					
Blue Chip, Coord Hlth Partners - All of Rhode Island	401/459-5500	DA1	DA2	44.32	133.14

Plans Offering a Point of Service Product Nationwide and by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all plans offering a Point of Service product in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site		
	% satisfied with plan			Coverage (87%)	Access to care (91%)	Access to care in an emergency (87%)	Choice of doctor (84%)	When sick, can get appointment (82%)	Seeing same doctor on most visits (89%)	Quality of care (91%)	Provider thorough and competent (94%)	Explanation of care (90%)	Results of care (90%)					
																	% Extremely satisfied	% Very satisfied
Plan name																		
Massachusetts (continued)																		
Blue Cross and Blue Shield-Std																	●	
United HealthCare New England*	25	40	27	●	●	●	●	●	●	●	●	●	●	✓		★		
Minnesota																		
Blue Cross and Blue Shield-Std																		
Nebraska																		
GEHA Benefit Plan																		
Nevada																		
Health Plan of Nevada	9	32	31	●	○	○	○	○	○	○	○	○	○				●	
HMO Colorado/Nevada	21	49	23	●	●	●	●	●	●	●	●	●	●	✓		●		
New Jersey																		
Blue Cross and Blue Shield-Std																		
GHI Health Plan	16	36	34	○	●	●	○	●	●	●	●	●	●					
New York																		
Blue Cross and Blue Shield-Std																	●	
GHI Health Plan	16	36	34	○	●	●	○	●	●	●	●	●	●					
Physicians Health Svcs of NY																	●	
North Carolina																		
QualChoice of North Carolina																		
North Dakota																		
Blue Cross and Blue Shield-Std																		
Ohio																		
Blue Cross and Blue Shield-Std																	★	
HealthFirst, Inc.																	★	
Oklahoma																		
Blue Cross and Blue Shield-Std																		
Pennsylvania																		
Free State Health Plan	16	50	24	●	●	●	●	●	●	●	●	●	●	✓		●		
Penn State Geisinger HlthPlan	24	44	20	●	●	●	●	●	●	●	●	●	●			★		
Puerto Rico																		
PCA Health Plans/Puerto Rico																		
Triple-S	20	59	16	●	●	●	●	●	●	●	●	●	●	✓				
United HealthCare Puerto Rico																		
Rhode Island																		
Blue Chip, Coord Hlth Partners	14	41	34	●	●	●	●	●	●	●	●	●	●				●	

*1997 Survey data

Plans Offering a Point of Service Product Nationwide and by State (Also check HMO Section)		Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location	Telephone number				
Rhode Island (continued)					
United HealthCare New England - All of Rhode Island	800/422-1404	VF1	VF2	60.82	171.04
Texas					
HMO Texas, L.C. - Houston/Beaumont areas	713/952-6868	2T1	2T2	36.90	92.10
Virginia					
Prudential HealthCare HMO - Washington, DC area/Northern Virginia	800/888-5447	JB1	JB2	46.12	101.54
West Virginia					
Free State Health Plan - Northeastern West Virginia	800/445-6036	LD1	LD2	47.74	172.20

Plans Offering a Point of Service Product Nationwide and by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average, ○ below average (Numeric average for all plans offering a Point of Service product in heading)											Top rated plans	Accreditation status NCQA JCAHO	Web site			
	% satisfied with plan			Coverage (87%)	Access to care (91%)	Access to care in an emergency (87%)	Choice of doctor (84%)	When sick, can get appointment (82%)	Seeing same doctor on most visits (89%)	Quality of care (91%)	Provider thorough and competent (94%)				Explanation of care (90%)	Results of care (90%)	
																	% Extremely satisfied
Plan name																	
Rhode Island (continued)																	
United HealthCare New England*	25	40	27	●	●	●	●	●	●	●	●	●	●	✓	★		
Texas																	
HMO Texas, L.C.																	
Virginia																	
Prudential HealthCare HMO	8	37	29	●	○	○	○	●	●	○	●	○	○		●		
West Virginia																	
Free State Health Plan	16	50	24	●	●	●	●	●	●	●	●	●	●	✓	●		

*1997 Survey data

Plans Offering a Point of Service Product Nationwide and by State	Plan name	Plan code	In Network You Pay				Out of Network You Pay			
			Outpatient visits		In-hospital care		Calendar year deductible (per person/family)	Out-patient visits	In-hospital care	
			Copay/coinsurance	Deductible	Copay/coinsurance	Per admission deductible		Copay/coinsurance	Copay/coinsurance	Per admission deductible
Nationwide										
Postmasters-Std	36	\$10	None	None	\$350	\$300/\$600	30%	30%	\$600	
Arizona										
Health Plan of Nevada	NM	\$5	None	\$100	None	\$250/\$750	20%	20%	None	
Arkansas										
American HMO	RB	\$5	None	None	None	\$200/\$600	30%	30%	None	
QCA Health Plan	8Q	\$10	None	None	None	\$300/NA	20%	20%	None	
Colorado										
HMO Colorado/Nevada	L2	\$10	None	\$200	None	\$250/\$500	30%	30%	None	
Connecticut										
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250	
Physicians Health Services/CT	DP	\$10	None	None	None	\$300/\$750	20%	20%	None	
District of Columbia										
Free State Health Plan	LD	\$5	None	None	None	\$200/\$400	20%	20%	None	
Prudential HealthCare HMO	JB	\$5	None	None	None	\$150/\$300	20%	20%	None	
United HealthCare Mid-Atlantic	BL	\$5	None	None	None	\$250/\$750	20%	20%	None	
Georgia										
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250	
Hawaii										
HMSA	87	20%	None	None	None	\$250/NA	30%	30%	None	
Illinois										
American HMO	AC	None	None	None	None	\$200/\$600	30%	None	None	
Indiana										
American HMO	AC	None	None	None	None	\$200/\$600	30%	None	None	
Kansas										
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250	
Louisiana										
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250	
Maxicare Louisiana	JA	\$5	None	None	None	\$200/\$600	20%	20%	None	
Maryland										
Free State Health Plan	LD	\$5	None	None	None	\$200/\$400	20%	20%	None	
Prudential HealthCare HMO	JB	\$5	None	None	None	\$150/\$300	20%	20%	None	
United HealthCare Mid-Atlantic	BL	\$5	None	None	None	\$250/\$750	20%	20%	None	
Massachusetts										
Blue Chip, Coord Hlth Partners	DA	\$5	None	None	None	\$250/\$500	20%	20%	None	

Plans Offering a Point of Service Product Nationwide and by State	Plan code	In Network You Pay				Out of Network You Pay			
		Outpatient visits		In-hospital care		Calendar year deductible (per person/family)	Out-patient visits	In-hospital care	
		Copay/coinsurance	Deductible	Copay/coinsurance	Per admission deductible		Copay/coinsurance	Copay/coinsurance	Per admission deductible
Plan name									
Massachusetts (continued)									
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250
United HealthCare New England	VF	\$10	None	None	None	\$200/\$400	20%	20%	None
Minnesota									
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250
Nebraska									
GEHA Benefit Plan	31	\$5	None	\$75	None	\$175/\$350	20%	20%	None
Nevada									
Health Plan of Nevada	NM	\$5	None	\$100	None	\$250/\$750	20%	20%	None
HMO Colorado/Nevada	VS	\$10	None	\$200	None	\$250/\$500	30%	30%	None
New Jersey									
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250
GHI Health Plan	80	\$10	None	None	None	None	50%	50%	None
New York									
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250
GHI Health Plan	80	\$10	None	None	None	None	50%	50%	None
Physicians Health Svcs of NY	PD	\$10	None	None	None	\$300/\$750	20%	20%	None
North Carolina									
QualChoice of North Carolina	7Q	\$10	None	None	None	\$300/\$750	30%	30%	None
North Dakota									
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250
Ohio									
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250
HealthFirst, Inc.	RF	\$5	None	None	None	\$250/\$500	20%	20%	None
Oklahoma									
Blue Cross and Blue Shield-Std	10	\$5	None	None	None	\$200/\$400	25%	None	\$250
Pennsylvania									
Free State Health Plan	LD	\$5	None	None	None	\$200/\$400	20%	20%	None
Penn State Geisinger HlthPlan	N9	\$10	None	None	None	\$250/\$750	20%	20%	None
Puerto Rico									
PCA Health Plans/Puerto Rico	5P	\$5	None	None	None	\$100/\$300	\$8	None	\$50
Triple-S	89	None	None	None	None	None	10%	10%	None
United HealthCare Puerto Rico	7U	\$5	None	None	None	\$200/\$400	20%	20%	None
Rhode Island									
Blue Chip, Coord Hlth Partners	DA	\$5	None	None	None	\$250/\$500	20%	20%	None

Plans Offering a Point of Service Product Nationwide and by State	Plan code	In Network You Pay				Out of Network You Pay			
		Outpatient visits		In-hospital care		Calendar year deductible (per person/family)	Out-patient visits	In-hospital care	
		Copay/coinsurance	Deductible	Copay/coinsurance	Per admission deductible		Copay/coinsurance	Copay/coinsurance	Per admission deductible
Plan name									
Rhode Island (continued)									
United HealthCare New England	VF	\$10	None	None	None	\$200/\$400	20%	20%	None
Texas									
HMO Texas, L.C.	2T	\$5	None	None	None	\$500/\$1500	30%	30%	None
Virginia									
Prudential HealthCare HMO	JB	\$5	None	None	None	\$150/\$300	20%	20%	None
West Virginia									
Free State Health Plan	LD	\$5	None	None	None	\$200/\$400	20%	20%	None

Plan Report Cards

Health Maintenance Organization Plans

(Pages 28 through 55)

Important: Some plans have been redesignated as POS products. If you do not find your plan in this section, check the POS section.

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Alabama					
Health Partners of Alabama - Birmingham/Other areas	800/888-7647	DF1	DF2	45.10	140.96
PrimeHealth of Alabama, Inc. - Central/Southern Alabama	800/236-9421	AA1	AA2	45.24	125.86
VIVA Health Plan - Northern/Central and Southern Cos	205/558-7474	4B1	4B2	49.38	133.94
Arizona					
Aetna U.S. Healthcare - Phoenix/Tucson areas	800/537-9384	WQ1	WQ2	38.20	108.46
CIGNA HC of AZ-Phoenix - Phoenix area	800/572-9990	161	162	44.56	124.90
HealthPartners Health Plans - Central Arizona	602/664-2612	2S1	2S2	32.90	98.94
HealthPartners Health Plans - Tucson/Southern Arizona	602/664-2612	TD1	TD2	35.60	99.72
Humana Health Plan of AZ - Phoenix/Tucson/Southern Arizona	888/393-6765	DY1	DY2	38.20	103.88
Intergroup of Arizona, Inc. - Maricopa/Pima/Other AZ counties	800/289-2818	A71	A72	36.80	99.30
PacifiCare of Arizona - Counties surrounding Phoenix/Tucson	800/346-8600	7R1	7R2	41.64	145.66
PacifiCare of Arizona - Maricopa/Pima/Pinal Counties	800/347-8600	A31	A32	32.12	89.92
Premier HealthCare of Arizona - Graham/Greenlee/Maricopa/Pima/Pinal	800/914-4474	9A1	9A2	30.32	83.44
Premier HealthCare of Arizona - Yavapai/Mohave/Coconino/Yuma/Gila	800/914-4474	9B1	9B2	37.94	105.98
Arkansas					
Prudential HealthCare HMO - Central and Northwest Arkansas	800/821-8787	VY1	VY2	56.62	126.74
California					
Aetna U.S. Healthcare - Southern California	800/537-9384	2X1	2X2	41.96	98.18
Aetna U.S. Healthcare - Northern California area	800/537-9384	BU1	BU2	56.64	129.70
Blue Shield of CA Access+HMO - Most of California	800/334-5847	SJ1	SJ2	36.84	91.42
Blue Cross CaliforniaCare - Most of California	800/235-8631	M51	M52	37.06	94.56
CIGNA HealthCare of California - Northern/Southern California	800/832-3211	9T1	9T2	45.82	98.24
Health Net - Most of California	800/522-0088	LB1	LB2	40.16	95.08
Kaiser Permanente - Northern California	800/464-4000	591	592	40.14	95.84
Kaiser Permanente - Southern California	800/464-4000	621	622	44.34	102.50
Maxicare Southern California - Southern California	800/234-6294	CM1	CM2	33.30	84.26
National HMO Health Plan - Northern/Central/Southern California	800/468-8600	MN1	MN2	35.62	94.20
Omni Healthcare - Central Valley and Sacramento areas	800/342-8462	HN1	HN2	44.56	127.54
PacifiCare of California - Most of California	800/624-8822	CY1	CY2	37.38	96.88
United Health Plan - LA/Orange/San Bernardino Counties	800/544-0088	C41	C42	32.58	70.56
Western Health Advantage - Northern California	888-563-2250	5Z1	5Z2	38.54	92.50
Colorado					
Aetna U.S. Healthcare - The Front Range	800/537-9384	6F1	6F2	36.90	98.24
Antero HealthPlans - Central Colorado	800/456-9292	9X1	9X2	31.98	86.80

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (8%)	Explanation of care (80%)	Results of care (74%)				
	20	48	22														
Plan name	11	36	28														
Alabama																	
Health Partners of Alabama	20	48	22	●	●	●	●	●	●	●	●	●	●	✓			
PrimeHealth of Alabama, Inc.	11	36	28	○	●	●	●	○	●	●	●	●	●				🖥️
VIVA Health Plan																	
Arizona																	
Aetna U.S. Healthcare	13	35	21	●	●	●	●	○	●	●	●	●	●				🖥️
CIGNA HC of AZ-Phoenix	21	43	21	●	●	●	●	○	○	●	●	●	●		★		🖥️
HealthPartners Health Plans	12	38	25	○	○	●	●	●	●	●	●	●	●		★		🖥️
HealthPartners Health Plans	16	42	23	●	●	●	●	○	●	○	○	○	○		★		🖥️
Humana Health Plan of AZ	17	30	23	●	○	●	●	○	●	○	○	○	○				🖥️
Intergroup of Arizona, Inc.	13	39	28	●	○	○	○	○	○	○	○	○	○		★		
PacifiCare of Arizona															★		🖥️
PacifiCare of Arizona	14	30	26	○	○	○	○	○	○	○	○	○	○		★		🖥️
Premier HealthCare of Arizona																	
Premier HealthCare of Arizona																	
Arkansas																	
Prudential HealthCare HMO															★		🖥️
California																	
Aetna U.S. Healthcare	10	31	29	●	○	●	●	○	○	○	●	○	○				🖥️
Aetna U.S. Healthcare	11	38	28	●	●	●	●	●	●	●	●	●	●		★		🖥️
Blue Shield of CA Access+HMO	14	33	33	●	○	○	○	●	●	○	○	○	○		●		🖥️
Blue Cross CaliforniaCare	16	39	27	●	●	●	○	●	●	○	○	●	○		★		🖥️
CIGNA HealthCare of California	11	37	26	○	○	○	○	●	●	○	○	○	○		★		🖥️
Health Net	14	40	32	●	●	●	●	●	●	●	●	●	●		●		🖥️
Kaiser Permanente	15	44	27	●	○	○	●	○	○	●	○	○	●		●		🖥️
Kaiser Permanente	19	47	20	●	●	●	●	○	○	●	●	○	●		★		🖥️
Maxicare Southern California	14	29	30	○	○	○	○	○	○	○	○	○	○				
National HMO Health Plan*	11	48	20	○	●	○	●	●	●	●	●	●	●				🖥️
Omni Healthcare	21	32	31	●	●	●	●	●	●	●	●	●	●				🖥️
PacifiCare of California*	18	35	27	●	○	●	●	○	●	○	○	○	○		★		🖥️
United Health Plan															⊗	●	
Western Health Advantage																	🖥️
Colorado																	
Aetna U.S. Healthcare																	🖥️
Antero HealthPlans																	🖥️

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Colorado (continued)					
CIGNA HealthCare of CO - Front Range area	800/832-3211	1C1	1C2	42.12	101.08
Kaiser Permanente - Denver/Colorado Springs areas	303/338-3800	651	652	39.86	101.78
PacifiCare of Colorado-High - Denver/Pueblo/Col.Springs/Fort Collins	800/877-9777	D61	D62	39.08	101.10
PacifiCare of Colorado-Std - Denver/Pueblo/Col.Springs/Fort Collins	800/877-9777	D64	D65	31.10	80.60
QualMed of Colorado - Denver/Boulder/Colorado Springs/Pueblo	800/847-3990	2D1	2D2	41.40	105.08
Rocky Mountain HMO - Most of Colorado	800/346-4643	881	882	73.48	188.14
Connecticut					
Aetna U.S. Healthcare - All of Connecticut	800/537-9384	H11	H12	74.76	267.78
ConnectiCare - All of Connecticut	800/251-7722	TE1	TE2	46.00	102.24
Harvard Community Hlth Plan - Northwest Connecticut	888/333-4742	681	682	65.12	233.74
Health New England - Northern Connecticut	413/787-4004	DJ1	DJ2	59.42	129.04
Kaiser Permanente - Most of Connecticut	800/597-3872	DM1	DM2	57.02	162.38
Prudential HealthCare HMO - Fairfield/Litchfield/New Haven Cos.	800/422-7399	8C1	8C2	100.72	285.40
Delaware					
Aetna U.S. Healthcare - All of Delaware	800/537-9384	NK1	NK2	95.24	343.48
AmeriHealth HMO, Inc. - All of Delaware	800/444-6282	SP1	SP2	49.64	187.88
District of Columbia					
Aetna U.S. Healthcare - Washington, DC area	800/537-9384	V81	V82	68.50	198.92
CapitalCare - Washington, DC area	800/680-9495	2G1	2G2	52.46	219.84
George Washington Univ HP-High - Washington, DC area	301/941-2000	E51	E52	68.08	143.38
George Washington Univ HP-Std - Washington, DC area	301/941-2000	E54	E55	39.02	84.96
Kaiser Permanente - Washington, DC area	301/468-6000	E31	E32	43.66	110.54
MD-IPA - Washington, DC area	800/331-2102	JP1	JP2	46.58	126.38
NYLCare/Mid-Atlantic-High - Washington, DC area	800/635-3121	JN1	JN2	46.58	117.20
NYLCare/Mid-Atlantic-Std - Washington, DC area	800/635-3121	JN4	JN5	32.92	77.38
Florida					
Aetna U.S. Healthcare - Central and South Florida areas	800/537-9384	8A1	8A2	53.38	227.02
Av-Med Health Plan - Broward/Dade/Palm Beach Counties	800/882-8633	EM1	EM2	39.68	115.82
Av-Med Health Plan - Orlando area	800/882-8633	GP1	GP2	38.72	106.48
Av-Med Health Plan - Tampa Bay area	800/882-8633	H51	H52	38.70	106.40
Av-Med Health Plan - Jacksonville area	800/882-8633	HW1	HW2	39.64	115.18
Av-Med Health Plan - Gainesville area	800/882-8633	JF1	JF2	42.62	148.10
Beacon Health Plan - Dade/Broward/Palm Beach Counties	800/850-0979	4K1	4K2	34.00	95.26
Capital Health Plan - Tallahassee area	850/383-3311	EA1	EA2	37.60	100.42

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)			
	%															
	% Extremely satisfied	% Very satisfied	% Somewhat satisfied													
Plan name																
Colorado (continued)																
CIGNA HealthCare of CO															★	
Kaiser Permanente	25	46	19	●	●	●	●	●	○	●	●	●	●	✓	★	
PacifiCare of Colorado-High	14	43	25	●	●	●	●	●	●	●	●	●	●		★	
PacifiCare of Colorado-Std	10	35	31	○	●	●	○	●	●	○	○	○	●		★	
QualMed of Colorado															●	
Rocky Mountain HMO	14	54	20	●	●	●	●	●	●	●	●	●	●	✓	●	
Connecticut																
Aetna U.S. Healthcare	11	37	28	●	●	●	●	●	●	●	●	●	●		●	
ConnectiCare	25	46	21	●	●	●	●	●	●	●	●	●	●	✓	●	
Harvard Community Hlth Plan	27	43	19	●	●	●	●	●	●	●	●	●	●	✓	★	
Health New England	13	53	24	●	●	●	●	●	●	●	●	●	●	✓	●	
Kaiser Permanente	18	41	29	●	●	●	●	●	●	●	●	●	●	✓	★	
Prudential HealthCare HMO															★	
Delaware																
Aetna U.S. Healthcare	15	33	31	●	●	●	●	●	●	●	●	●	●			
AmeriHealth HMO, Inc.	15	31	29	●	●	●	●	●	●	●	●	●	●		●	
District of Columbia																
Aetna U.S. Healthcare	11	36	31	●	●	●	●	●	●	●	●	●	●		★	
CapitalCare	20	36	29	●	●	●	●	●	●	●	●	●	●			
George Washington Univ HP-High	18	40	25	●	●	●	●	●	○	●	●	●	●		●	
George Washington Univ HP-Std	13	31	33	●	●	○	●	●	○	●	●	●	●		●	
Kaiser Permanente*	23	39	24	●	●	○	●	●	○	○	●	○	●		★	
MD-IPA	15	45	30	●	●	●	●	●	●	●	●	●	●	✓	★	
NYLCare/Mid-Atlantic-High	17	42	23	●	●	●	●	●	●	●	●	●	●		★	
NYLCare/Mid-Atlantic-Std	11	41	31	●	●	●	●	●	●	●	●	●	●		★	
Florida																
Aetna U.S. Healthcare															★	
Av-Med Health Plan	25	42	21	●	●	●	●	●	●	●	●	●	●	✓	★●	
Av-Med Health Plan	24	35	23	●	●	●	●	●	●	●	●	●	●		★●	
Av-Med Health Plan	19	37	27	●	●	●	○	●	●	○	○	●	●		★●	
Av-Med Health Plan	27	43	16	●	●	●	●	●	●	●	●	●	●		★●	
Av-Med Health Plan	26	45	17	●	●	●	●	●	●	●	●	●	●	✓	★●	
Beacon Health Plan																
Capital Health Plan	39	37	13	●	●	●	●	●	●	●	●	●	●		●	

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Florida (continued)					
Foundation Health - Northern Florida	800/441-5501	5C1	5C2	36.62	103.38
Foundation Health - Central Florida	800/441-5501	5D1	5D2	40.06	130.60
Foundation Health - Southern Florida	800/441-5501	5E1	5E2	34.58	95.10
Health Options - Tampa Bay area	800/583-9072	D71	D72	44.02	146.52
Health Options - Palm Beach/Martin Counties	800/964-6595	FN1	FN2	39.08	104.60
Health Options - Broward/Dade Counties	800/964-6595	FR1	FR2	34.60	93.40
HIP Health Plan of FL - South Florida/Tampa Bay areas	800/385-4447	K71	K72	39.30	118.48
Humana Medical Plan - Orlando/Gainesville areas	888/393-6765	7F1	7F2	36.56	102.38
Humana Medical Plan - Southeast/Southcentral/Southwest Florida	888/393-6765	EE1	EE2	41.82	104.54
Humana Medical Plan - Tampa Bay area	888/393-6765	JH1	JH2	42.40	106.00
Humana Medical Plan - Jacksonville area	888/393-6765	P51	P52	46.52	144.38
Humana Medical Plan - Daytona area	888/393-6765	P71	P72	46.46	143.94
PCA Family Health Plan of FL - Most of Florida	888/393-6765	FQ1	FQ2	30.96	92.88
PCA Health Plans of Florida - Most of Florida	888/393-6765	PJ1	PJ2	30.96	92.88
Prudential HealthCare HMO - Jacksonville area	904/351-8386	EC1	EC2	33.06	90.90
Prudential HealthCare HMO - Central Florida area	800/628-3801	EH1	EH2	36.92	103.36
Prudential HealthCare HMO - Broward/Dade/Palm Beach Counties	800/457-3885	HE1	HE2	42.86	159.22
United HealthCare of Florida - South Florida/Tampa areas	800/543-3145	QK1	QK2	45.12	157.54
Georgia					
Aetna U.S. Healthcare - Atlanta/Augusta/Athens/Macon areas	800/537-9384	2U1	2U2	41.76	109.96
Athens Area Health Plan Select - Athens metro area	706-549-0549	8Y1	8Y2	39.00	100.10
Kaiser Permanente - Atlanta area	800/255-0568	F81	F82	42.10	106.88
Prudential HealthCare HMO - Atlanta/Macon areas	800/738-1728	EZ1	EZ2	34.76	95.12
Guam					
Guam Memorial Health Plan-High - Guam/Palau/N. Mariana Islands	671/646-4647	ZA1	ZA2	58.98	194.06
Guam Memorial Health Plan-Std - Guam/Palau/N. Mariana Islands	671/646-4647	ZA4	ZA5	37.24	106.06
Health Maintenance Life - Guam	671/646-7826	281	282	30.74	91.80
PacifiCare Asia Pacific - Guam	671/647-3471	JK1	JK2	42.88	131.32
Hawaii					
Kaiser Permanente-High - Islands of Hawaii/Maui/Oahu/Kauai	808/597-5955	631	632	79.00	158.94
Kaiser Permanente-Std - Islands of Hawaii/Maui/Oahu/Kauai	808/597-5955	634	635	47.08	101.24
Idaho					
Group Health Cooperative - Benewah/Bonner/Kootenai/Latah/Shoshone	800/497-2210	VR1	VR2	58.50	200.86
HealthPlus - Washington border counties	800/527-6675	8F1	8F2	44.58	124.20

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCAQA JCAHO	Web site
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)			
																
Plan name																
Florida (continued)																
Foundation Health															★	
Foundation Health															★	
Foundation Health															★	
Health Options	13	34	33	●	●	●	●	●	●	●	●	●	●		★	
Health Options															★	
Health Options	10	35	34	●	●	●	●	○	●	○	○	○	○		★	
HIP Health Plan of FL	14	34	25	●	●	●	●	○	○	○	○	○	○		★	
Humana Medical Plan	10	34	33	●	○	○	○	○	○	○	○	○	○		★	
Humana Medical Plan	14	30	33	○	○	○	○	○	○	○	○	○	○		★	
Humana Medical Plan	14	37	26	●	○	●	○	○	○	○	○	○	○		★	
Humana Medical Plan	13	37	30	●	●	●	○	○	●	●	●	●	●		★	
Humana Medical Plan	12	31	30	●	●	●	○	○	●	○	○	○	○		★	
PCA Family Health Plan of FL															●	
PCA Health Plans of Florida	10	25	27	○	○	●	○	○	●	○	○	○	○		●	
Prudential HealthCare HMO	30	35	21	●	●	●	●	●	●	●	●	●	●		★	
Prudential HealthCare HMO	19	42	23	●	●	●	●	○	●	●	●	●	●		★	
Prudential HealthCare HMO	16	28	34	●	○	●	●	○	●	○	○	○	○		★	
United HealthCare of Florida																
Georgia																
Aetna U.S. Healthcare	15	35	27	●	●	●	●	●	●	●	●	●	●			
Athens Area Health Plan Select																
Kaiser Permanente	22	40	25	●	●	●	●	●	○	●	●	●	●	✓	★	
Prudential HealthCare HMO	11	34	32	●	○	○	○	○	○	○	●	●	●		●	
Guam																
Guam Memorial Health Plan-High	7	32	43	○	○	○	●	○	○	○	○	○	○			
Guam Memorial Health Plan-Std																
Health Maintenance Life*	15	47	25	○	○	○	●	●	○	●	○	●	●			
PacifiCare Asia Pacific*	12	33	35	○	○	○	○	○	○	○	○	○	○			
Hawaii																
Kaiser Permanente-High	26	40	22	●	●	●	●	●	●	●	●	●	●	✓	★	
Kaiser Permanente-Std	16	36	35	●	●	●	●	●	●	●	●	●	●		★	
Idaho																
Group Health Cooperative	15	33	31	●	●	●	●	●	●	●	●	●	●		★	
HealthPlus																

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Illinois					
Aetna U.S. Healthcare - Chicago area	800/537-9384	XC1	XC2	35.76	130.64
BCI HMO, Inc. - Chicago/Rockford/Springfld/Downstate Cos	800/772-6897	3B1	3B2	66.24	209.84
Group Health Plan - Southern/Metro East/Central	800/743-3901	MM1	MM2	52.72	171.24
Health Alliance HMO - Central/E.Central/N.West/South/West IL	800/851-3379	FX1	FX2	59.06	153.46
Health Partners of the Midwest - St. Louis area	800/338-4123	RN1	RN2	66.38	135.96
Heritage National Healthplan - Bloomingt n/Joliet/Moline/Peoria/RockIsld	800/247-9110	3J1	3J2	45.48	170.30
Humana Health Plan Inc. - Chicago area	888/393-6765	751	752	48.22	140.84
John Deere Family Healthplan - Quad Cities	800/247-9110	1J1	1J2	40.54	117.16
Mercy Health Plans/Premier - Southwest Illinois	800/327-0763	7M1	7M2	44.08	102.54
OSF HealthPlans - Central/Northern Illinois	800/673-5222	9F1	9F2	40.72	107.66
PersonalCare's HMO - East Central Illinois	800/431-1211	GE1	GE2	38.58	99.20
Principal St.Louis - St. Louis area	800/966-3938	121	122	74.18	155.08
Prudential HealthCare HMO - Southern Illinois	800/298-7625	VZ1	VZ2	35.02	88.48
Rush Prudential HMO - Chicago area	312/234-7747	171	172	42.88	103.16
Union Health Service - Chicago area	312/829-4224	761	762	40.04	99.32
United HealthCare Select - St. Louis and Metro East	800/627-0607	H81	H82	47.38	115.22
Indiana					
Aetna U.S. Healthcare - Southern Indiana	800/537-9384	RD1	RD2	48.00	149.20
Aetna U.S. Healthcare - Lake/Porter Counties	800/537-9384	XC1	XC2	35.76	130.64
Arnett HMO - Lafayette area	765/448-7440	G21	G22	58.66	206.46
BCI HMO, Inc. - Lake County	800/772-6897	3B1	3B2	66.24	209.84
Health Alliance HMO - Fountain/Vermillion/Warren Counties	800/851-3379	FX1	FX2	59.06	153.46
Humana Care Plan - Southern Indiana	888/393-6765	181	182	49.94	164.40
Humana Health Plan Inc. - Lake and Porter Counties	888/393-6765	751	752	48.22	140.84
Humana Health Plan - Southern Indiana	888/393-6765	D21	D22	50.78	166.46
Maxicare Indiana - Most of Indiana	800/441-3355	GK1	GK2	43.14	101.56
PARTNERS Nat'l HPs of IN - Northern Indiana	800/967-5439	MC1	MC2	40.26	105.04
Physicians HP of N. Indiana - Northern Indiana	219/432-6690	DQ1	DQ2	58.50	136.26
Prudential HealthCare Midwest - Dearborn County	800/932-7478	S31	S32	38.50	99.96
Rush Prudential HMO - Lake/Porter Counties	888/234-7747	171	172	42.88	103.16
The M*Plan - Central/Northeast/Southwest Indiana	800/816-7526	IN1	IN2	46.02	99.28
United HealthCare of Kentucky - Clark/Floyd/Harrison Counties	800/495-5283	DU1	DU2	46.24	137.56
Welborn HMO - Evansville area	812/426-6600	H31	H32	41.92	112.66

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average, ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)				
	% Extremely satisfied	% Very satisfied	% Somewhat satisfied														
Plan name																	
Illinois																	
Aetna U.S. Healthcare	5	30	32	●	●	○	○	●	●	●	●	○	○		★		
BCI HMO, Inc.	13	36	31	●	●	●	●	●	●	●	●	●	●				
Group Health Plan*	15	48	25	●	●	●	●	●	●	●	●	●	●		●		
Health Alliance HMO	25	46	15	●	●	●	●	●	●	●	●	●	●				
Health Partners of the Midwest	18	43	23	●	●	●	●	●	●	●	●	●	●				
Heritage National Healthplan																	
Humana Health Plan Inc.	13	29	37	○	○	○	○	○	○	○	○	○	○		★		
John Deere Family Healthplan																	
Mercy Health Plans/Premier																	
OSF HealthPlans																	
PersonalCare's HMO	17	40	34	●	●	●	●	●	●	●	●	●	●	✓			
Principal St.Louis	20	45	25	●	●	●	●	●	●	●	●	●	●	✓	●		
Prudential HealthCare HMO															★		
Rush Prudential HMO	17	37	26	●	●	○	●	○	●	●	●	●	●		★		
Union Health Service																	
United HealthCare Select	17	41	27	●	●	●	●	●	●	●	●	●	●				
Indiana																	
Aetna U.S. Healthcare	11	29	30	●	●	●	●	●	●	●	●	●	●				
Aetna U.S. Healthcare	5	30	32	●	●	○	○	●	●	●	○	○					
Arnett HMO																	
BCI HMO, Inc.	13	36	31	●	●	●	●	●	●	●	●	●	●				
Health Alliance HMO	25	46	15	●	●	●	●	●	●	●	●	●	●				
Humana Care Plan	15	37	28	●	●	●	○	●	●	●	●	●	●				
Humana Health Plan Inc.	13	29	37	○	○	○	○	○	○	○	○	○	○		★		
Humana Health Plan	15	42	28	●	●	●	●	●	●	●	●	●	●				
Maxicare Indiana	16	41	23	●	●	●	●	●	●	●	●	●	●		⊗		
PARTNERS Nat'l HPs of IN															●		
Physicians HP of N. Indiana																	
Prudential HealthCare Midwest	12	46	27	●	●	●	●	●	●	●	●	●	●		★		
Rush Prudential HMO	17	37	26	●	●	○	●	○	●	●	●	●	●		★		
The M*Plan	22	47	19	●	●	●	●	●	●	●	●	●	●	✓	★		
United HealthCare of Kentucky																	
Welborn HMO	34	39	20	●	●	●	●	●	●	●	●	●	●	✓	●		

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Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Iowa					
Care Choices - Northwest Iowa	800/535-6252	FA1	FA2	44.74	160.74
Exclusive Healthcare - Council Bluffs/Sioux City areas	800/456-9292	9Y1	9Y2	44.38	161.54
Health Alliance HMO - Central Iowa	888/536-5300	7X1	7X2	41.18	99.90
Heritage National Healthplan - Central/Eastern Iowa	800/247-9110	3J1	3J2	45.48	170.30
John Deere Family Healthplan - Des Moines/Waterloo/Quad Cities areas	800/247-9110	1J1	1J2	40.54	117.16
Principal Health Care of Iowa - Des Moines/Central Iowa/Waterloo	800/257-4692	SV1	SV2	40.38	115.36
SecureCare of Iowa - Central and Eastern Iowa areas	888/881-8820	3Q1	3Q2	34.42	90.18
United HealthCare/Midlands - Western Iowa	402/445-5700	NF1	NF2	44.34	100.34
Kansas					
Humana Kansas City, Inc.-High - Kansas City area	888/393-6765	MS1	MS2	46.14	122.28
Humana Kansas City, Inc.-Std - Kansas City area	888/393-6765	MS4	MS5	42.98	103.16
Kaiser Permanente - Kansas City area	913/642-2662	HA1	HA2	35.04	90.42
Preferred Plus of Kansas - S. Central & Jefferson/Shawnee Counties	800/660-8114	VA1	VA2	46.42	173.24
Principal Health Care of KC - Wichita/Salinas areas	800/969-3343	7W1	7W2	45.58	144.16
Prudential HealthCare HMO - Kansas City/Topeka areas	800/441-5588	1K1	1K2	45.06	111.04
United HealthCare MidWest - Kansas City/Topeka areas	800/357-0975	4M1	4M2	57.80	187.24
Kentucky					
Advantage Care, Inc. - Central/Eastern Kentucky	800/850-8585	XW1	XW2	58.74	206.20
Aetna U.S. Healthcare - Lexington/Louisville areas	800/537-9384	RD1	RD2	48.00	149.20
Bluegrass Family Health - Central/Eastern Kentucky	606/269-4475	2B1	2B2	43.04	102.26
Humana Care Plan - Louisville area	888/393-6765	181	182	49.94	164.40
Humana Care Plan - Lexington area	888/393-6765	HR1	HR2	44.46	123.84
Humana Health Plan - Lexington/Louisville	888/393-6765	D21	D22	50.78	166.46
PacifiCare of Ohio, Inc. - Northern Kentucky	800/824-0428	R81	R82	44.42	104.40
Prudential HealthCare Midwest - Northern Kentucky	800/932-7478	S31	S32	38.50	99.96
United Health Care of Ohio - Northern Kentucky	800/231-2918	3U1	3U2	59.56	147.62
United HealthCare of Kentucky - Most of Kentucky	800/495-5283	DU1	DU2	46.24	137.56
Louisiana					
Aetna U.S. Healthcare - New Orleans area	800/537-9384	NG1	NG2	40.40	105.04
Aetna U.S. Healthcare - Baton Rouge/Lafayette areas	800/537-9384	TK1	TK2	33.38	113.08
Gulf South Health Plan, Inc. - Baton Rouge/New Orleans/Lafayette area	504/237-1700	LY1	LY2	44.22	125.78
Smartplan - All of Louisiana	800/259-7370	8D1	8D2	40.02	104.58
Vantage Health Plan - Monroe/North Louisiana	318/323-9779	7V1	7V2	44.96	134.52

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)			
	% Extremely satisfied	% Very satisfied	% Somewhat satisfied													
Plan name																
Iowa																
Care Choices																
Exclusive Healthcare	15	40	29	●	●	●	●	●	●	●	●	●	●			
Health Alliance HMO																
Heritage National Healthplan																
John Deere Family Healthplan																
Principal Health Care of Iowa*	17	36	30	●	●	●	●	●	●	●	●	●	●		●	
SecureCare of Iowa																
United HealthCare/Midlands	20	33	28	●	●	●	●	●	●	●	●	●	●		★	
Kansas																
Humana Kansas City, Inc.-High	22	37	24	●	●	●	●	●	●	●	●	●	●		★	
Humana Kansas City, Inc.-Std															★	
Kaiser Permanente	18	35	25	●	●	○	○	●	○	○	○	○	○		★	
Preferred Plus of Kansas																
Principal Health Care of KC															●	
Prudential HealthCare HMO	11	42	24	●	●	●	●	●	●	●	●	●	●		★	
United HealthCare MidWest*	13	46	24	●	●	●	●	●	●	●	●	●	●			
Kentucky																
Advantage Care, Inc.															★	
Aetna U.S. Healthcare	11	29	30	●	●	●	●	●	●	●	●	●	●			
Bluegrass Family Health	21	39	26	●	●	●	●	●	●	●	●	●	●			
Humana Care Plan	15	37	28	●	●	●	○	●	●	●	●	●	●			
Humana Care Plan	20	36	26	●	●	●	●	●	○	●	●	●	●			
Humana Health Plan	15	42	28	●	●	●	●	●	●	●	●	●	●			
PacifiCare of Ohio, Inc.	9	37	28	○	●	●	●	●	●	●	●	●	●			
Prudential HealthCare Midwest	12	46	27	●	●	●	●	●	●	●	●	●	●		★	
United Health Care of Ohio	12	40	30	●	●	●	●	●	●	●	●	●	●		★	
United HealthCare of Kentucky																
Louisiana																
Aetna U.S. Healthcare	14	42	27	●	●	●	●	○	●	●	●	●	●			
Aetna U.S. Healthcare																
Gulf South Health Plan, Inc.															★	
Smartplan																
Vantage Health Plan																

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Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Maine					
Harvard Community Hlth Plan - Southeastern Maine	888/333-4742	681	682	65.12	233.74
NYLCare Health Plans of Maine - All of Maine	800/895-6667	9M1	9M2	57.26	128.30
Maryland					
Aetna U.S. Healthcare - North/Central MD & Washington, DC area	800/537-9384	V81	V82	68.50	198.92
CapitalCare - South/Central Maryland	800/680-9495	2G1	2G2	52.46	219.84
George Washington Univ HP-High - Central/Southern Maryland	301/941-2000	E51	E52	68.08	143.38
George Washington Univ HP-Std - Central/Southern Maryland	301/941-2000	E54	E55	39.02	84.96
Kaiser Permanente - Baltimore/Washington, DC areas	301/468-6000	E31	E32	43.66	110.54
MD-IPA - All of Maryland	800/331-2102	JP1	JP2	46.58	126.38
NYLCare/Mid-Atlantic-High - North/Central/Southern Maryland	800/635-3121	JN1	JN2	46.58	117.20
NYLCare/Mid-Atlantic-Std - North/Central/Southern Maryland	800/635-3121	JN4	JN5	32.92	77.38
Massachusetts					
Aetna U.S. Healthcare - Central/Eastern MA/Hampden	800/537-9384	NE1	NE2	67.98	252.16
Fallon Community Health Plan - Central/Eastern Massachusetts	800/868-5200	JV1	JV2	40.02	103.24
Harvard Community Hlth Plan - Eastern/Western Massachusetts	888/333-4742	681	682	65.12	233.74
Harvard Pilgrim Hlth Care-NE - Southeastern Massachusetts	888/333-4742	701	702	43.40	104.14
Health New England - Western Massachusetts	413/787-4004	DJ1	DJ2	59.42	129.04
Kaiser Permanente - Western Massachusetts	800/597-3872	K11	K12	41.84	114.32
Michigan					
Aetna U.S. Healthcare - Greater Detroit Metro area	800/537-9384	8Z1	8Z2	41.34	110.72
Blue Care Network - East MI - East Michigan Region	800/890-0871	K51	K52	43.78	118.02
Blue Care Network - East MI - East Michigan Region	800/890-0871	KN1	KN2	40.62	165.44
Blue Care Network Mid MI Reg - Mid Michigan	888/227-2345	LN1	LN2	45.82	120.72
Blue Care Network SE Michigan - Southeast MI	800/662-6667	LX1	LX2	30.80	101.90
Blue Care Network West MI - Western Michigan	800/775-2583	G71	G72	82.48	252.44
Blue Care Network West MI - Western Michigan	800/775-2583	KF1	KF2	39.98	120.22
Blue Care Network West Region - Western Michigan	800/775-2583	KR1	KR2	39.24	133.38
Grand Valley Health Plan - Grand Rapids area	616/949-2410	RL1	RL2	43.22	116.32
Health Alliance - Southeastern Michigan/Flint area	313/872-8100	521	522	40.16	106.42
HealthPlus MI - Flint/Saginaw areas	800/332-9161	X51	X52	65.10	192.12
M-Care - Mid/Southeastern Michigan	800/658-8878	EG1	EG2	38.18	101.28
Medical Value Plan - Lenawee/Monroe Counties	419/245-5135	EV1	EV2	50.82	193.86
OmniCare - Southeastern Michigan	313/259-4000	KA1	KA2	36.86	92.14
Physicians Health Plan - Lansing/Mid-Michigan	517/349-1976	U51	U52	46.18	122.60

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site		
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)					
	27	43	19															
Plan name	27	43	19	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Maine																		
Harvard Community Hlth Plan	27	43	19	●	●	●	●	●	●	●	●	●	●	●	✓	★	🌐	
NYLCare Health Plans of Maine																		🌐
Maryland																		
Aetna U.S. Healthcare	11	36	31	●	●	●	●	●	●	●	●	●	●			★	🌐	
CapitalCare	20	36	29	●	●	●	●	●	●	●	●	●	●					🌐
George Washington Univ HP-High	18	40	25	●	●	●	●	○	○	○	○	○	○			●		
George Washington Univ HP-Std	13	31	33	●	●	○	○	○	○	○	○	○	○			●		
Kaiser Permanente*	23	39	24	●	●	○	○	○	○	○	○	○	○			★	🌐	
MD-IPA	15	45	30	●	●	●	●	●	●	●	●	●	●	✓		★	🌐	
NYLCare/Mid-Atlantic-High	17	42	23	●	●	●	●	●	●	●	●	●	●			★	🌐	
NYLCare/Mid-Atlantic-Std	11	41	31	●	●	●	●	●	●	●	●	●	●			★	🌐	
Massachusetts																		
Aetna U.S. Healthcare	12	36	27	●	●	●	●	●	●	●	●	●	●			★	🌐	
Fallon Community Health Plan	29	49	13	●	●	●	●	●	●	●	●	●	●	✓		★	🌐	
Harvard Community Hlth Plan	27	43	19	●	●	●	●	●	●	●	●	●	●	✓		★	🌐	
Harvard Pilgrim Hlth Care-NE	25	40	20	●	●	●	●	●	●	●	●	●	●			★	🌐	
Health New England	13	53	24	●	●	●	●	●	●	●	●	●	●	✓		●		
Kaiser Permanente	15	40	30	●	●	●	●	●	●	●	●	●	●			★	🌐	
Michigan																		
Aetna U.S. Healthcare																		🌐
Blue Care Network - East MI	13	39	26	●	●	●	○	○	○	○	○	○	○			★	🌐	
Blue Care Network - East MI																★	🌐	
Blue Care Network Mid MI Reg	15	41	22	●	●	●	●	●	●	●	●	●	●			★	🌐	
Blue Care Network SE Michigan	15	38	29	○	○	○	○	○	○	○	○	○	○			★	🌐	
Blue Care Network West MI																★	🌐	
Blue Care Network West MI	20	43	26	●	●	●	●	●	●	●	●	●	●	✓		★	🌐	
Blue Care Network West Region	15	49	27	●	●	●	●	●	●	●	●	●	●	✓		★	🌐	
Grand Valley Health Plan																		
Health Alliance	18	48	22	●	●	●	●	●	●	●	●	●	●	✓		★	🌐	
HealthPlus MI																★	🌐	
M-Care	32	40	17	●	●	●	●	●	●	●	●	●	●	✓		●	🌐	
Medical Value Plan																★		
OmniCare	15	32	29	○	○	○	○	○	○	○	○	○	○			●	🌐	
Physicians Health Plan	20	45	26	●	●	●	●	●	●	●	●	●	●	✓				

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Michigan (continued)					
Physicians Health Plan - Jackson/South Michigan	517/787-6865	U61	U62	47.50	135.20
Physicians Health Plan - Kalamazoo/Southwest Michigan	616/341-7250	U71	U72	41.18	98.82
Physicians Health Plan - Muskegon/Western Michigan	616/728-6333	U81	U82	43.60	104.66
Priority Health - West Michigan	616/942-1221	BQ1	BQ2	40.96	142.14
SelectCare - Southeast Michigan	800/332-2365	K61	K62	36.82	103.14
The Wellness Plan - Southeastern Michigan	800/875-9355	K31	K32	37.26	101.70
Total Health Care - Greater Detroit/Flint areas	800/826-2862	N21	N22	39.00	98.20
Minnesota					
Altru Health Plan - Northwest Minnesota	701/780-1600	2R1	2R2	32.82	94.50
HealthPartners Classic-High - Minneapolis/St. Paul areas	612/883-5000	531	532	52.46	150.98
HealthPartners Classic-Std - Minneapolis/St. Paul areas	612/883-5000	534	535	41.58	99.80
HealthPartners Health Plan - Minneapolis/St. Paul/St. Cloud areas	612/883-5000	HQ1	HQ2	62.90	176.10
Mississippi					
PrimeHealth of Alabama, Inc. - Southern Mississippi	800/236-9421	AA1	AA2	45.24	125.86
Prudential HealthCare HMO - Desoto/Marshall/Tate/Tunica Cos.	901/541-9400	UB1	UB2	34.22	104.32
Missouri					
BlueCHOICE - StLouis/Central/SW/Poplar Bluff area	800/634-4395	9G1	9G2	61.74	124.88
Group Health Plan - St. Louis area	800/743-3901	MM1	MM2	52.72	171.24
Health Partners of the Midwest - St. Louis/Columbia/Jefferson City areas	800/338-4123	RN1	RN2	66.38	135.96
Humana Kansas City, Inc.-High - Central Missouri/Springfield area	888/393-6765	7S1	7S2	47.16	132.02
Humana Kansas City, Inc.-Std - Central Missouri/Springfield area	888/393-6765	7S4	7S5	43.40	104.16
Humana Kansas City, Inc.-High - Kansas City area	888/393-6765	MS1	MS2	46.14	122.28
Humana Kansas City, Inc.-Std - Kansas City area	888/393-6765	MS4	MS5	42.98	103.16
Kaiser Permanente - Kansas City area	913/642-2662	HA1	HA2	35.04	90.42
Mercy Health Plans/Premier - East/Central/Southwest Missouri	800/327-0763	7M1	7M2	44.08	102.54
Principal St.Louis - St. Louis area	800/966-3938	121	122	74.18	155.08
Prudential HealthCare HMO - Kansas City area	800/441-5588	1K1	1K2	45.06	111.04
Prudential HealthCare HMO - St. Louis area	800/298-7625	VZ1	VZ2	35.02	88.48
United HealthCare MidWest - Kansas City area	800/357-0975	4M1	4M2	57.80	187.24
United HealthCare Select - St. Louis/Central/Northeast/Southeast	800/627-0607	H81	H82	47.38	115.22
Montana					
Yellowstone Community Health - Billings area	406/238-6868	2Y1	2Y2	39.72	103.00
Nebraska					
Care Choices - Northeastern Nebraska	800/535-6252	FA1	FA2	44.74	160.74

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)				
	1-5	6-10	11-15														
Plan name																	
Michigan (continued)																	
Physicians Health Plan																	
Physicians Health Plan																	
Physicians Health Plan																	
Priority Health	22	54	16	●	●	●	●	●	●	●	●	●	●	✓	★	🌐	
SelectCare	7	39	29	●	○	○	○	●	○	○	○	○	○		●		
The Wellness Plan																	
Total Health Care																	
Minnesota																	
Altru Health Plan																🌐	
HealthPartners Classic-High	11	44	23	●	●	●	●	●	○	●	●	●	●		★		
HealthPartners Classic-Std*	25	45	16	●	●	●	●	●	●	●	●	●	●		★		
HealthPartners Health Plan	14	39	27	●	●	●	●	●	○	●	●	●	●		★		
Mississippi																	
PrimeHealth of Alabama, Inc.	11	36	28	○	●	●	●	○	●	●	●	●	●			🌐	
Prudential HealthCare HMO	10	37	34	○	○	○	○	○	○	○	●	●	○		●	🌐	
Missouri																	
BlueCHOICE	13	31	38	●	●	●	●	●	●	●	●	●	●				
Group Health Plan*	15	48	25	●	●	●	●	●	●	●	●	●	●		●	🌐	
Health Partners of the Midwest	18	43	23	●	●	●	●	●	●	●	●	●	●				
Humana Kansas City, Inc.-High	16	39	29	●	●	●	●	●	●	●	●	●	●		★	🌐	
Humana Kansas City, Inc.-Std															★	🌐	
Humana Kansas City, Inc.-High	22	37	24	●	●	●	●	●	●	●	●	●	●		★	🌐	
Humana Kansas City, Inc.-Std															★	🌐	
Kaiser Permanente	18	35	25	●	●	○	○	●	○	○	○	○	○		★	🌐	
Mercy Health Plans/Premier																	
Principal St.Louis	20	45	25	●	●	●	●	●	●	●	●	●	●	✓	●		
Prudential HealthCare HMO	11	42	24	●	●	●	●	●	●	●	●	●	●		★	🌐	
Prudential HealthCare HMO															★	🌐	
United HealthCare MidWest*	13	46	24	●	●	●	●	●	●	●	●	●	●				
United HealthCare Select	17	41	27	●	●	●	●	●	●	●	●	●	●			🌐	
Montana																	
Yellowstone Community Health																	
Nebraska																	
Care Choices																🌐	

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Nebraska (continued)					
Exclusive Healthcare - Omaha/Lincoln areas	800/456-9292	9Y1	9Y2	44.38	161.54
United HealthCare/Midlands - Lincoln/Omaha/Northeast areas	402/445-5700	NF1	NF2	44.34	100.34
Nevada					
Aetna U.S. Healthcare - Southern Nevada/Las Vegas area	800/537-9384	8L1	8L2	37.72	98.80
Hometown Health Plan - Northern Nevada	702/325-3000	4H1	4H2	41.38	98.68
Humana Health Plan, Inc. - Las Vegas areas	888/393-6765	TL1	TL2	31.46	90.56
PacifiCare of Nevada - LasVegas/Carson City/Reno	800/811-7305	K91	K92	36.26	91.82
New Hampshire					
Aetna U.S. Healthcare - Chshre/Hillsbrgh/Rckngnm/Stafford Cos.	800/537-9384	UJ1	UJ2	46.94	180.90
Harvard Community Hlth Plan - Southern New Hampshire	888/333-4742	681	682	65.12	233.74
Kaiser Permanente - Southwestern New Hampshire	800/597-3872	K11	K12	41.84	114.32
New Jersey					
Aetna U.S. Healthcare-High - All of New Jersey	800/537-9384	P31	P32	120.22	336.12
Aetna U.S. Healthcare-Std - All of New Jersey	800/537-9384	P34	P35	43.60	135.62
AmeriHealth HMO, Inc. - All of New Jersey	800/454-7651	FK1	FK2	69.70	227.96
CIGNA CoMED HealthCare - All of New Jersey	800/462-6633	P41	P42	99.60	191.02
First Option Hlth Plan of NJ - All of New Jersey	800/555-2605	2F1	2F2	86.62	237.56
HIP Health Plan of NJ - Most of New Jersey	732/937-7600	P91	P92	49.34	160.98
Prudential HealthCare HMO - All of New Jersey	800/422-7399	8P1	8P2	46.18	145.18
QualMed Plans for Health - Burlington/Camden/Gloucester Counties	800/998-2840	271	272	67.86	172.10
New Mexico					
HMO New Mexico - Most of New Mexico	800/423-1630	5H1	5H2	34.96	90.20
Lovelace Health Plan - All of New Mexico	505/262-7363	Q11	Q12	41.66	112.56
Presbyterian Health Plan - All NM counties except Otero & S. Eddy	505/923-5678	P21	P22	34.02	88.74
QualMed Plans for Health - Albuquerque/Santa Fe areas	800/365-0009	PX1	PX2	34.68	91.50
New York					
Aetna U.S. Healthcare - NYC area and Dutchess/Sullivan/Ulster	800/537-9384	JC1	JC2	46.16	146.88
Blue Choice - Rochester area	716/238-4300	MK1	MK2	39.30	98.20
BlueChoice HMO - MidHudson area	800/453-0113	5K1	5K2	36.06	94.30
BlueChoice HMO - Albany area	800/453-0113	5L1	5L2	41.00	107.82
BlueChoice HMO - Downstate area	800/453-0113	S71	S72	46.40	164.24
C.D.P.H.P. - Capital District area	518/862-3750	SG1	SG2	37.64	96.38
CIGNA HealthCare of NY - New York City area	800/345-9458	HU1	HU2	45.66	166.96
Harvard Community Hlth Plan - New York adjacent to Massachusetts	888/333-4742	681	682	65.12	233.74

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)				
	% Extremely satisfied	% Very satisfied	% Somewhat satisfied														
Plan name																	
Nebraska (continued)																	
Exclusive Healthcare	15	40	29	●	●	●	●	●	●	●	●	●	●				
United HealthCare/Midlands	20	33	28	●	●	●	●	●	●	●	●	●	●		★		
Nevada																	
Aetna U.S. Healthcare																	
Hometown Health Plan	16	39	21	●	○	●	○	○	●	○	○	●	●				
Humana Health Plan, Inc.																	
PacifiCare of Nevada	8	24	31	○	○	○	○	○	○	○	○	○	○		★		
New Hampshire																	
Aetna U.S. Healthcare																	
Harvard Community Hlth Plan	27	43	19	●	●	●	●	●	●	●	●	●	●	✓	★		
Kaiser Permanente	15	40	30	●	●	●	●	●	●	●	●	●	●		★		
New Jersey																	
Aetna U.S. Healthcare-High	14	38	28	●	●	●	●	●	●	●	●	●	●		★		
Aetna U.S. Healthcare-Std	9	42	34	●	●	●	●	●	●	●	●	●	●		★		
AmeriHealth HMO, Inc.	10	37	30	●	●	●	●	●	●	●	●	●	●		●		
CIGNA CoMED HealthCare	10	34	34	●	●	●	●	●	●	●	●	●	●		★		
First Option Hlth Plan of NJ	14	30	32	●	●	●	●	●	●	●	●	●	●				
HIP Health Plan of NJ	13	30	35	●	○	●	○	●	○	○	○	●	●		●		
Prudential HealthCare HMO															★		
QualMed Plans for Health*	12	33	32	●	○	○	○	○	●	○	○	○	○		●		
New Mexico																	
HMO New Mexico																	
Lovelace Health Plan*	24	38	29	●	●	●	●	●	○	●	●	●	●	✓	★ ★		
Presbyterian Health Plan	8	29	32	○	○	○	○	○	○	○	○	○	○				
QualMed Plans for Health	20	46	22	●	●	●	●	○	●	●	●	●	●	✓			
New York																	
Aetna U.S. Healthcare	17	35	32	●	●	●	●	●	●	●	●	●	●		★		
Blue Choice	22	45	21	●	●	●	●	●	●	●	●	●	●	✓	★		
BlueChoice HMO															●		
BlueChoice HMO															●		
BlueChoice HMO*	17	33	25	●	●	●	●	●	●	●	●	●	●		●		
C.D.P.H.P.	25	47	21	●	●	●	●	●	●	●	●	●	●	✓	★		
CIGNA HealthCare of NY																	
Harvard Community Hlth Plan	27	43	19	●	●	●	●	●	●	●	●	●	●	✓	★		

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
New York (continued)					
HealthCarePlan - Western New York	716/847-0881	Q81	Q82	32.56	92.32
Healthsource HMO of NY - Syracuse/Central NY area	315/449-1100	XL1	XL2	45.72	170.30
HIP of Greater New York - New York City area	800/HIP-TALK	511	512	42.04	102.88
HMO Blue - Utica/Rome/Central New York areas	315/731-2547	AH1	AH2	42.62	113.10
HMO-CNY - Syracuse/Binghamton/Elmira areas	800/447-6269	EB1	EB2	43.96	145.04
Independent Health Assoc - Metro Hudson	800/486-5840	C11	C12	55.26	209.48
Independent Health Assoc - Western New York	800/453-1910	QA1	QA2	28.48	80.04
Kaiser Permanente - Albany/Cooperstown areas	800/597-3872	PW1	PW2	41.48	105.64
Kaiser Permanente - Hudson Valley area	800/597-3872	QB1	QB2	43.86	135.46
Kaiser Permanente - Westchester County	800/597-3872	QH1	QH2	42.10	102.76
MDNY Healthcare, Inc. - Nassau/Suffolk Counties	516-454-1900	5Y1	5Y2	57.80	187.40
MVP Health Plan - Eastern Region	888/687-6277	GA1	GA2	40.26	102.56
MVP Health Plan - Central Region	888/687-6277	M91	M92	36.46	92.88
MVP Health Plan - Mid-Hudson Region	888/687-6277	MX1	MX2	43.76	124.96
Partners Health Plans - Northern/Capital/Mid-Hudson areas	800-447-8610	7Y1	7Y2	44.24	137.96
PHP/Mohawk Valley Region - Utica area	315/797-7019	SH1	SH2	43.76	143.76
Preferred Care - Rochester area	716/325-3113	GV1	GV2	37.76	95.80
Prepaid Health Plan - Syracuse/Southern Tier areas	315/638-2133	QE1	QE2	46.22	169.58
Prudential HealthCare HMO - NYC/Long Island/Hudson Valley Cos.	800/422-7399	9P1	9P2	40.84	97.92
Vytra Health Plans - Queens/Nassau/Suffolk Counties	516/694-4000	J61	J62	54.16	197.64
WellCare of New York - Bronx/Brklyn/Manhattan/Queens/Westchster	800/438-9269	6V1	6V2	52.44	101.42
WellCare of New York - Capital/Hudson Valley Regions	800/438-9269	X41	X42	39.28	98.66
North Carolina					
Aetna U.S. Healthcare - Charlotte/Metrolina area	800/537-9384	3G1	3G2	42.88	127.46
Doctors Health Plan, Inc. - Greater Tri/Char/Up-Low Cape Fear areas	800/476-2303	6D1	6D2	41.28	125.24
Generations Family Health Plan - Tri. area:Raleigh/Durham/Chapel Hill	888/256-5563	8B1	8B2	42.14	105.34
Kaiser Permanente - Charlotte/Triangle areas	800/755-1925	QT1	QT2	36.04	111.70
PARTNERS NHP of NC - Most of North Carolina	800/942-5695	EQ1	EQ2	47.18	106.18
Personal Care Plan of NC - Charlotte/Durham/Greensboro/Raleigh	800/755-0817	4X1	4X2	62.26	162.66
Prudential HealthCare HMO - Charlotte/Raleigh areas	800/643-3609	Q41	Q42	34.70	97.10
UHC of North Carolina - Central/Eastern/Western	800/999-1147	XM1	XM2	51.00	119.62
WellPath Select - Charlotte/Triangle/surr. area	800/935-7284	2E1	2E2	42.52	121.06
North Dakota					
Altru Health Plan - Northeast North Dakota	701/780-1600	2R1	2R2	32.82	94.50

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status		Web site
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)		NCQA	JCAHO	
	23	47	17														
Plan name	23	47	17	●	●	●	●	●	○	●	●	●	●	✓	★	🌐	
New York (continued)																	
HealthCarePlan	23	47	17	●	●	●	●	●	○	●	●	●	●	✓	★	🌐	
Healthsource HMO of NY															★		
HIP of Greater New York	10	32	37	●	○	○	○	○	○	○	○	○	○		★	🌐	
HMO Blue																	
HMO-CNY*	23	46	27	●	●	●	●	●	●	●	●	●	●	✓	●	🌐	
Independent Health Assoc	14	43	27	●	●	●	●	●	●	●	●	●	●		⊗	🌐	
Independent Health Assoc	11	47	32	●	●	●	●	●	●	●	●	●	●	✓	★	🌐	
Kaiser Permanente	16	44	23	●	●	●	●	●	●	●	●	●	●		★	🌐	
Kaiser Permanente	22	40	21	●	●	●	●	●	●	●	●	●	●		★	🌐	
Kaiser Permanente																🌐	
MDNY Healthcare, Inc.																	
MVP Health Plan	17	46	23	●	●	●	●	●	●	●	●	●	●		★	🌐	
MVP Health Plan	11	44	29	○	●	●	●	●	●	●	●	●	●		★	🌐	
MVP Health Plan	22	43	21	●	●	●	●	●	●	●	●	●	●		★	🌐	
Partners Health Plans																	
PHP/Mohawk Valley Region*	24	43	20	●	●	●	●	●	●	●	●	●	●			🌐	
Preferred Care	20	50	20	●	●	●	●	●	●	●	●	●	●	✓	★		
Prepaid Health Plan	15	45	25	●	●	●	●	●	●	●	●	●	●			🌐	
Prudential HealthCare HMO															★	🌐	
Vytra Health Plans	23	43	19	●	●	●	●	●	●	●	●	●	●			🌐	
WellCare of New York															●	🌐	
WellCare of New York															●	🌐	
North Carolina																	
Aetna U.S. Healthcare	13	29	31	●	●	●	●	●	●	●	●	●	●			🌐	
Doctors Health Plan, Inc.	9	36	31	○	●	●	●	●	●	●	●	●	●			🌐	
Generations Family Health Plan																	
Kaiser Permanente	21	37	26	●	●	●	●	●	●	●	●	●	●		★	🌐	
PARTNERS NHP of NC	15	43	26	●	●	●	●	●	●	●	●	●	●		●	🌐	
Personal Care Plan of NC	18	42	23	●	●	●	●	●	●	●	●	●	●		★		
Prudential HealthCare HMO	13	36	28	●	●	●	●	●	○	●	●	●	●		●	🌐	
UHC of North Carolina	19	40	26	●	●	●	●	●	●	●	●	●	●			🌐	
WellPath Select																🌐	
North Dakota																	
Altru Health Plan																🌐	

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
North Dakota (continued)					
HealthPartners Health Plan - Eastern North Dakota	612/883-5000	HQ1	HQ2	62.90	176.10
Heart of America HMO - Northcentral North Dakota	701/776-5848	RU1	RU2	41.78	105.68
Ohio					
Aetna U.S. Healthcare - Most of Ohio	800/537-9384	RD1	RD2	48.00	149.20
AultCare HMO - Stark/Carroll/Holmes/Tuscarawas/Wayne Co	330/438-6360	3A1	3A2	44.44	115.64
CHP of Ohio - Northeastern/Central/Southern Ohio	740/348-1449	MG1	MG2	39.62	159.16
DayMed Hlth Maintenance Plan - Dyton/Cincinnati/Columbs/Cleve/Akrn	937/847-5646	Q31	Q32	45.78	125.10
Health Maintenance Plan(HMP) - Most of Ohio	800/228-4375	R51	R52	47.54	108.94
Health Plan Upper OH Valley - Eastern Ohio	800/624-6961	U41	U42	38.14	95.34
Health Power HMO - Columbus/Cincinnati/Dayton areas	800/338-6207	XR1	XR2	44.32	122.48
HealthAssurance HMO - Eastern Ohio	800/735-2202	5X1	5X2	42.36	98.54
HMO Health Ohio - Northeast Ohio	800/258-3466	L41	L42	43.80	127.38
Kaiser Permanente - Akron/Cleveland areas	216/621-7100	641	642	44.48	102.30
Medical Value Plan - Toledo area	419/245-5135	EV1	EV2	50.82	193.86
PacifiCare of Ohio, Inc. - Cincinnati/Dayton areas	800/824-0428	R81	R82	44.42	104.40
Paramount Health Care - Northwest/North Central Ohio	800/462-3589	U21	U22	44.42	149.96
Prudential HealthCare Midwest - Central Ohio	800/452-3094	AY1	AY2	43.94	96.50
Prudential HealthCare Midwest - Cleveland/Akron/Youngstown areas	800/458-3941	Q91	Q92	36.58	85.78
Prudential HealthCare Midwest - Cincinnati/Southwest areas	800/932-7478	S31	S32	38.50	99.96
QualMed Plans for Health OH/WV - Eastern Ohio	800/333-3930	QJ1	QJ2	42.82	122.48
SummaCare Health Plan - Northern Ohio	330/996-8700	5W1	5W2	36.76	101.06
Super Med HMO - Northeast Ohio	800/574-2583	5M1	5M2	40.30	103.08
United Health Care of Ohio - Cincinnati/Dayton/Springfield/Toledo	800/231-2918	3U1	3U2	59.56	147.62
United Health Care of Ohio - Central/South Central Ohio	800/225-7951	VC1	VC2	54.30	135.60
Oklahoma					
Aetna U.S. Healthcare - Northeast Oklahoma	800/537-9384	8V1	8V2	38.06	99.36
BlueLines HMO - OK City/Tulsa/Lawton/SW Oklahoma areas	800/722-5675	N51	N52	42.76	100.12
CommunityCare HMO - Oklahoma City/Tulsa areas	800/777-4890	7C1	7C2	38.32	98.78
Healthcare Oklahoma - Oklahoma City/Lawton/Tulsa/Enid areas	800/535-2244	6W1	6W2	39.24	101.94
PacifiCare OK - Okla Cty/Southwestern OK and Tulsa area	800/735-5052	2N1	2N2	36.58	100.92
Prudential HealthCare HMO - Central/Western/Southern Oklahoma	800/416-3206	RR1	RR2	35.64	94.84
Prudential HealthCare HMO - Tulsa area	800/345-8310	RS1	RS2	41.60	92.06
Oregon					
Kaiser Permanente-High - Portland/Salem areas	503/813-2000	571	572	56.68	140.08

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)				
	14	39	27														
North Dakota (continued)																	
HealthPartners Health Plan	14	39	27	●	●	●	●	●	○	●	●	●	●		★		
Heart of America HMO																	
Ohio																	
Aetna U.S. Healthcare	11	29	30	●	●	●	●	●	●	●	●	●	●		★	📄	
AultCare HMO	19	39	24	●	●	●	●	●	●	●	●	●	●				
CHP of Ohio	24	45	21	●	●	●	●	●	●	●	●	●	●	✓			
DayMed Hlth Maintenance Plan*	15	34	27	●	●	●	●	●	●	●	●	●	●				
Health Maintenance Plan(HMP)	11	41	26	●	●	●	●	●	●	●	●	●	●		★		
Health Plan Upper OH Valley	15	37	25	○	●	●	●	●	●	●	●	●	●		★	📄	
Health Power HMO															★		
HealthAssurance HMO																	
HMO Health Ohio																	
Kaiser Permanente	16	43	21	●	●	●	●	○	○	●	○	●	●		★	📄	
Medical Value Plan															★		
PacifiCare of Ohio, Inc.	9	37	28	○	●	●	●	●	●	●	●	●	●			📄	
Paramount Health Care															★		
Prudential HealthCare Midwest	11	38	30	●	●	●	●	●	●	●	●	●	●		●	📄	
Prudential HealthCare Midwest	10	32	29	●	●	●	●	●	●	●	●	●	●		★	📄	
Prudential HealthCare Midwest	12	46	27	●	●	●	●	●	●	●	●	●	●		★	📄	
QualMed Plans for Health OH/WV																📄	
SummaCare Health Plan																📄	
Super Med HMO																	
United Health Care of Ohio	12	40	30	●	●	●	●	●	●	●	●	●	●		★	📄	
United Health Care of Ohio	17	37	27	●	●	●	●	●	●	●	●	●	●		★	📄	
Oklahoma																	
Aetna U.S. Healthcare																	📄
BlueLines HMO	12	37	35	●	●	○	○	●	●	○	●	○	●		★	📄	
CommunityCare HMO															★	📄	
Healthcare Oklahoma	15	43	23	●	●	●	●	○	●	●	●	●	●			📄	
PacifiCare OK*	17	27	31	●	○	○	○	○	○	○	○	○	○		★	📄	
Prudential HealthCare HMO	24	37	21	●	●	●	●	●	●	●	●	●	●		★	📄	
Prudential HealthCare HMO	23	40	21	●	●	●	●	●	●	●	●	●	●		★	📄	
Oregon																	
Kaiser Permanente-High	20	44	22	●	●	●	●	●	○	●	●	●	●		★	📄	

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Oregon (continued)					
Kaiser Permanente-Std - Portland/Salem areas	503/813-2000	574	575	41.96	96.28
PacifiCare of Oregon - Counties along I-5 Corridor	800/932-3004	SS1	SS2	44.64	98.88
Providence Health Plan - Western Oregon/I-5(Rosebrg-Salem) Coast	800/421-0544	SD1	SD2	45.56	121.02
Regence Hlth Maintenance of OR - Portland area	800/278-5331	6B1	6B2	52.72	115.02
Regence HMO Oregon - Portland area/I-5 Corridor/Western OR	800/278-5331	7A1	7A2	52.72	115.02
Pennsylvania					
Aetna U.S. Healthcare-High - Southwestern and Central PA	800/537-9384	KL1	KL2	43.00	137.70
Aetna U.S. Healthcare-Std - Southwestern and Central PA	800/537-9384	KL4	KL5	39.44	105.26
Aetna U.S. Healthcare-High - Southeastern PA	800/537-9384	SU1	SU2	62.72	228.42
Aetna U.S. Healthcare-Std - Southeastern PA	800/537-9384	SU4	SU5	43.02	131.86
First Priority Hlth - Northeastern Pennsylvania	800/822-8753	C81	C82	42.56	118.18
HealthAmerica Pennsylvania - Pittsburgh/Northeast/Central/S. Central	800/788-8445	261	262	41.56	111.44
HealthGuard - Berks/Cmbrlnd/Dauphine/Lanc/Lebanon/York	800/822-0350	NQ1	NQ2	41.46	113.82
HIP Health Plan of Penn. - Bucks/Chester/Delaware/Montgomery/Phila	215/633-2265	5J1	5J2	42.96	136.30
Keystone Health Plan Central - Harrisburg/Norther Region/Lehigh Valley	800/622-2843	S41	S42	50.34	151.56
Keystone Health Plan East - Philadelphia area	800/227-3115	ED1	ED2	45.18	155.94
KeystoneBlue - Pittsburgh/Altoona/Erie areas	800/KHP-WEST	EF1	EF2	34.78	103.20
Prudential HealthCare HMO - Philadelphia/Lehigh Valley areas	800/648-4478	VV1	VV2	37.94	104.34
QualMed Plans for Health -Pa. - Pittsburgh area	800/333-3930	241	242	44.02	137.06
QualMed Plans for Health - Southern Pennsylvania	800/998-2840	271	272	67.86	172.10
QualMed Plans for Health - Scranton/Wilkes Barre	800/998-2840	2K1	2K2	42.40	102.94
Rhode Island					
Aetna U.S. Healthcare - All of Rhode Island	800/537-9384	5U1	5U2	37.44	101.50
Harvard Pilgrim Hlth Care-NE - All of Rhode Island	888/333-4742	701	702	43.40	104.14
South Carolina					
Aetna U.S. Healthcare - Portions of South Carolina	800/537-9384	3G1	3G2	42.88	127.46
Doctors Health Plan, Inc. - York County	800/476-2303	6D1	6D2	41.28	125.24
Kaiser Permanente - Rock Hill area	800/755-1925	QT1	QT2	36.04	111.70
PARTNERS NHP of NC - Upstate South Carolina	800/942-5695	EQ1	EQ2	47.18	106.18
Prudential HealthCare HMO - York County	800/643-3609	Q41	Q42	34.70	97.10
WellPath Select - Chest/Grnvill/Lancst/Pickns/Sprtnbrg/Yrk	800/935-7284	2E1	2E2	42.52	121.06
South Dakota					
Care Choices - Clay/Union Counties	800/535-6252	FA1	FA2	44.74	160.74

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average, ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)			
	% Extremely satisfied	% Very satisfied	% Somewhat satisfied													
Plan name																
Oregon (continued)																
Kaiser Permanente-Std	16	41	28	●	●	●	●	●	○	●	●	●	●		★	
PacifiCare of Oregon*	12	48	24	○	●	●	●	●	●	●	●	●	●		●	
Providence Health Plan	16	35	27	○	●	●	○	○	●	○	●	○	○			
Regence Hlth Maintenance of OR																
Regence HMO Oregon	12	42	25	○	●	●	●	●	●	●	●	●	●			
Pennsylvania																
Aetna U.S. Healthcare-High	13	38	32	●	●	●	●	●	●	●	●	●	●		★	
Aetna U.S. Healthcare-Std	10	33	30	●	●	●	●	●	●	●	●	●	●		★	
Aetna U.S. Healthcare-High	23	30	32	●	●	●	●	●	●	●	●	●	●		★	
Aetna U.S. Healthcare-Std	13	42	32	●	●	●	●	●	●	●	●	●	●	✓	★	
First Priority Hlth	13	43	29	●	●	●	●	●	●	●	●	●	●		●	
HealthAmerica Pennsylvania	10	32	31	○	○	○	●	●	○	●	●	●	●		★	
HealthGuard	17	47	27	●	●	●	●	●	●	●	●	●	●	✓	★	
HIP Health Plan of Penn.																
Keystone Health Plan Central	19	37	30	●	●	●	●	●	●	●	●	●	●		★	
Keystone Health Plan East	12	44	30	●	●	●	●	●	●	●	●	●	●		★	
KeystoneBlue	13	41	28	●	●	●	●	●	●	●	●	●	●		●	
Prudential HealthCare HMO	11	34	25	○	●	●	●	●	●	●	●	●	●		★	
QualMed Plans for Health -Pa.																
QualMed Plans for Health*	12	33	32	●	○	○	○	○	●	○	○	○	○		●	
QualMed Plans for Health															●	
Rhode Island																
Aetna U.S. Healthcare																
Harvard Pilgrim Hlth Care-NE	25	40	20	●	●	●	●	●	●	●	●	●	●		★	
South Carolina																
Aetna U.S. Healthcare	13	29	31	●	●	●	●	●	●	●	●	●	●			
Doctors Health Plan, Inc.	9	36	31	○	●	●	●	●	●	●	●	●	●			
Kaiser Permanente	21	37	26	●	●	●	●	●	●	●	●	●	●		★	
PARTNERS NHP of NC	15	43	26	●	●	●	●	●	●	●	●	●	●		●	
Prudential HealthCare HMO	13	36	28	●	●	●	●	●	○	●	●	●	●		●	
WellPath Select																
South Dakota																
Care Choices																

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Tennessee					
Aetna U.S. Healthcare - Nashville/Middle Tennessee areas	800/537-9384	6J1	6J2	32.38	90.10
American Healthcare Trust, Inc - Knoxville/Memphis/Nashville areas	888/523-9527	4U1	4U2	32.18	89.26
Heritage National Healthplan - Chattanooga/Kingsprt/Knoxville/Grnville	800/247-9110	4T1	4T2	44.92	164.38
Prudential HealthCare HMO - Nashville area	800/770-4778	UA1	UA2	36.32	102.38
Prudential HealthCare HMO - Memphis area	901/541-9400	UB1	UB2	34.22	104.32
Texas					
Aetna U.S. Healthcare - Houston area	800/537-9384	5B1	5B2	49.30	220.00
Aetna U.S. Healthcare - San Antonio area	800/537-9384	8X1	8X2	46.60	200.60
Aetna U.S. Healthcare - Dallas/Ft. Worth areas	800/537-9384	TS1	TS2	37.84	216.44
Certus HealthCare - Cameron/Hidalgo/Nueces area	888/423-7887	3Y1	3Y2	41.68	97.46
FIRSTCARE - Waco area	800/884-4901	6U1	6U2	39.58	85.02
FIRSTCARE - West Texas	800/884-4901	CK1	CK2	95.36	193.64
HealthFirst HMO - East Texas	800/365-2892	8E1	8E2	45.32	97.78
HMO Blue/Rio Grande - Austin/Beaumont/Houston/San Antonio/S.TX	800/336-5696	4Y1	4Y2	40.54	109.34
HMO Blue/Rio Grande - Dallas/Fort Worth/Tyler areas	800/554-6321	4Z1	4Z2	38.82	103.70
HMO Blue - West Texas	806/798-6362	5Q1	5Q2	42.12	128.66
HMO Blue - Southwest Texas	800/468-2602	5R1	5R2	39.54	105.48
HMO Texas, L.C. - Dallas/Ft. Worth areas	972/458-5000	UK1	UK2	40.50	100.06
Humana Health Plan of Texas - Austin/Dallas/Hstn/S.Ant/C.Christi	888/393-6765	TW1	TW2	40.90	105.12
Humana Health Plan of Texas - Houston area	888/393-6765	UE1	UE2	35.30	98.98
Humana Health Plan of Texas - San Antonio area	888/393-6765	UR1	UR2	38.22	98.24
Humana of Corpus Christi - Corpus Christi area	888/393-6765	TX1	TX2	46.92	129.64
NYLCare Health Plans SW - Dallas/Ft. Worth/East & West Texas	972/791-3910	V21	V22	46.36	101.78
NYLCare HP of the Gulf Coast - Houston area	800/833-5318	UM1	UM2	45.42	151.66
NYLCare HP of the Gulf Coast - Austin/C.Christi/S.Antonio/Victoria	800/833-5318	ZE1	ZE2	33.74	87.82
NYLCare HP of the Gulf Coast - Beaumont/Lufkin areas	800/833-5318	ZF1	ZF2	42.22	94.42
PacifiCare of Texas - S Ant/Hstn/Glvston/Da/Ft Wor/Glf Coast	800/825-9355	GF1	GF2	35.88	96.56
Prudential HealthCare HMO - El Paso County	800/778-1148	6P1	6P2	41.22	90.74
Prudential HealthCare HMO - Austin area	800/261-2645	UN1	UN2	33.52	90.44
Prudential HealthCare HMO - Houston area	800/876-7778	UP1	UP2	35.30	102.60
Prudential HealthCare HMO - San Antonio area	800/657-5959	VX1	VX2	37.56	97.56
Scott and White - Austin/Bryan/ColSta./Killeen/Temple/Waco	254/298-3000	UF1	UF2	68.92	232.56
WellChoice - San Antonio area	800/559-9355	3Z1	3Z2	32.44	84.36

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average, ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)				
	%																
	Extremely satisfied	Very satisfied	Somewhat satisfied														
Plan name																	
Tennessee																	
Aetna U.S. Healthcare																	
American Healthcare Trust, Inc																	
Heritage National Healthplan																	
Prudential HealthCare HMO	18	37	25	●	●	●	●	●	●	●	●	●	●			★	
Prudential HealthCare HMO	10	37	34	○	○	○	○	○	○	○	●	●	○			●	
Texas																	
Aetna U.S. Healthcare																	
Aetna U.S. Healthcare																	
Aetna U.S. Healthcare	14	32	26	●	●	●	●	●	●	○	●	●	○			★	
Certus HealthCare																	
FIRSTCARE																	
FIRSTCARE	23	46	15	●	●	●	●	●	●	●	●	●	●				
HealthFirst HMO																	
HMO Blue/Rio Grande	18	27	33	●	○	●	●	●	●	●	○	○	●				
HMO Blue/Rio Grande																	
HMO Blue																	
HMO Blue																	
HMO Texas, L.C.	19	37	27	●	●	○	○	●	○	○	○	○	○			★	
Humana Health Plan of Texas	14	40	23	●	●	●	○	●	●	●	●	●	●			★	
Humana Health Plan of Texas	12	29	31	●	○	●	○	○	●	●	○	●	●			★	
Humana Health Plan of Texas	14	35	32	●	○	○	○	○	○	○	○	○	○			★	
Humana of Corpus Christi	16	33	30	○	○	○	○	○	○	○	○	●	○				
NYLCare Health Plans SW	18	38	27	●	○	●	●	○	●	○	●	●	○			★	
NYLCare HP of the Gulf Coast*	19	37	25	●	●	●	●	○	●	●	●	●	●			★	
NYLCare HP of the Gulf Coast*	3	39	28	●	●	●	●	○	●	●	●	●	●			★	
NYLCare HP of the Gulf Coast																★	
PacifiCare of Texas*	20	35	26	●	○	○	○	○	○	○	○	○	○				
Prudential HealthCare HMO																★	
Prudential HealthCare HMO	19	38	23	●	●	●	●	●	○	●	●	○	●			★	
Prudential HealthCare HMO	16	35	33	●	○	●	●	○	○	○	●	●	○			★	
Prudential HealthCare HMO	24	39	25	●	●	●	●	●	●	●	●	●	●			★	
Scott and White	26	41	19	●	●	●	●	○	●	●	●	●	●			●	
WellChoice																	

1997 Survey data

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Utah					
PacifiCare of Utah - Wasatch Front	800/377-4161	9K1	9K2	43.20	102.10
Vermont					
Harvard Community Hlth Plan - Southern Vermont	888/333-4742	681	682	65.12	233.74
Kaiser Permanente - All of Vermont	800/597-3872	8M1	8M2	41.98	115.82
MVP Health Plan - Bennington/Chittenden/Rutland/Wash. Cos.	888/687-6277	VW1	VW2	47.94	158.54
Virginia					
Aetna U.S. Healthcare - Northern Virginia area	800/537-9384	V81	V82	68.50	198.92
Aetna U.S. Healthcare - Richmond/Central/Tri-City areas	800/537-9384	Z11	Z12	47.06	151.86
CapitalCare - Northern Virginia	800/680-9495	2G1	2G2	52.46	219.84
CIGNA HealthCare of VA - Southeastern Virginia	800/533-1708	W21	W22	45.14	99.12
CIGNA HealthCare of VA - Central Virginia	800/533-1708	W31	W32	44.24	99.98
George Washington Univ HP-High - N. Virginia/Fredericksburg/Winchester	301/941-2000	E51	E52	68.08	143.38
George Washington Univ HP-Std - N. Virginia/Fredericksburg/Winchester	301/941-2000	E54	E55	39.02	84.96
Healthkeepers - Peninsula/Richmond/Frdburg/Roanoke areas	800/421-1880	X81	X82	64.70	209.52
Heritage National Healthplan - Bristol/Roanoke areas	800/247-9110	4T1	4T2	44.92	164.38
Kaiser Permanente - Washington, DC area	301/468-6000	E31	E32	43.66	110.54
MD-IPA - N.VA/Cntrl VA/Richmond/Tidewater/Roanoke	800/331-2102	JP1	JP2	46.58	126.38
NYLCare/Mid-Atlantic-High - N.VA/Fredericksburg/Richmond/Tri-Cities	800/635-3121	JN1	JN2	46.58	117.20
NYLCare/Mid-Atlantic-Std - N.VA/Fredericksburg/Richmond/Tri-Cities	800/635-3121	JN4	JN5	32.92	77.38
OPTIMA Health Plan - Peninsula/Southside Hampton Roads	757/552-7500	9R1	9R2	46.78	121.94
PARTNERS NHP of NC - Southwest Virginia	800/942-5695	EQ1	EQ2	47.18	106.18
Priority Health Care, Inc. - Southside Hampton Rds.(excl. Peninsula)	800-640-0007	W71	W72	44.16	162.14
Prudential HealthCare HMO - Richmond/Tri-City areas	800/323-0467	V61	V62	35.80	96.64
Washington					
Aetna U.S. Healthcare - Western/Southeast Washington	800/537-9384	8J1	8J2	38.64	101.18
First Choice Health Plan - Greater Seattle area	800/783-7312	5G1	5G2	41.12	106.80
Group Health Cooperative - Most of Western Washington	206/448-4140	541	542	50.68	118.76
Group Health Cooperative - Central WA/Spokane/Colville/Pullman	800/497-2210	VR1	VR2	58.50	200.86
HealthPlus - Most of Washington state	800/527-6675	8F1	8F2	44.58	124.20
Kaiser Permanente-High - Vancouver/Longview	503/813-2000	571	572	56.68	140.08
Kaiser Permanente-Std - Vancouver/Longview	503/813-2000	574	575	41.96	96.28
Kitsap Physicians Service-High - Kitsap/Mason/Jefferson Counties	800/552-7114	VT1	VT2	171.92	355.18
Kitsap Physicians Service-Std - Kitsap/Mason/Jefferson Counties	800/552-7114	VT4	VT5	47.02	102.76
NYLCare Northwest - Puget Sound/Much of Westn/Centr/Eastn WA	800/654-6506	8N1	8N2	41.00	98.94

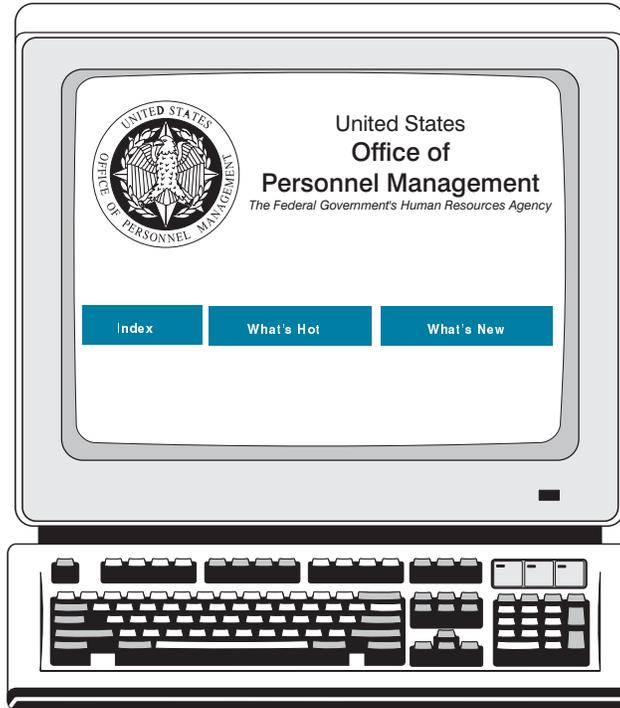
Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average; ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)				
	9	35	29														
Plan name																	
Utah																	
PacifiCare of Utah	9	35	29	●	●	○	●	●	○	●	●	●	●		●		
Vermont																	
Harvard Community Hlth Plan	27	43	19	●	●	●	●	●	●	●	●	●	●	✓	★		
Kaiser Permanente	13	45	29	●	●	●	●	●	●	●	●	●	●	✓	★		
MVP Health Plan*	14	45	25	●	●	●	●	●	●	●	●	●	●		●		
Virginia																	
Aetna U.S. Healthcare	11	36	31	●	●	●	●	●	●	●	●	●	●		★		
Aetna U.S. Healthcare	11	32	27	●	●	●	●	●	●	●	●	●	●		●		
CapitalCare	20	36	29	●	●	●	●	●	●	●	●	●	●				
CIGNA HealthCare of VA	16	42	25	●	●	●	●	●	●	●	●	●	●		★		
CIGNA HealthCare of VA	26	42	23	●	●	●	●	●	●	●	●	●	●	✓	★		
George Washington Univ HP-High	18	40	25	●	●	●	●	●	○	●	●	●	●		●		
George Washington Univ HP-Std	13	31	33	●	●	○	●	●	○	●	●	●	●		●		
Healthkeepers	13	36	35	●	●	●	●	●	●	●	●	●	●		●		
Heritage National Healthplan																	
Kaiser Permanente*	23	39	24	●	●	○	●	●	○	○	●	○	●		★		
MD-IPA	15	45	30	●	●	●	●	●	●	●	●	●	●	✓	★		
NYLCare/Mid-Atlantic-High	17	42	23	●	●	●	●	●	●	●	●	●	●		★		
NYLCare/Mid-Atlantic-Std	11	41	31	●	●	●	●	●	●	●	●	●	●		★		
OPTIMA Health Plan	21	36	27	●	●	●	●	●	●	●	●	●	●		●		
PARTNERS NHP of NC	15	43	26	●	●	●	●	●	●	●	●	●	●		●		
Priority Health Care, Inc.	14	38	28	●	●	●	●	●	●	●	●	●	●				
Prudential HealthCare HMO	15	38	31	●	●	●	●	●	●	●	●	●	●		★		
Washington																	
Aetna U.S. Healthcare																	
First Choice Health Plan																	
Group Health Cooperative	19	36	32	●	●	●	●	●	○	●	●	●	○	✓	★		
Group Health Cooperative	15	33	31	●	●	●	●	●	●	●	●	●	●		★		
HealthPlus																	
Kaiser Permanente-High	20	44	22	●	●	●	●	●	○	●	●	●	●		★		
Kaiser Permanente-Std	16	41	28	●	●	●	●	●	○	●	●	●	●		★		
Kitsap Physicians Service-High	24	45	19	●	●	●	●	●	●	●	●	●	●	✓			
Kitsap Physicians Service-Std	24	43	21	●	●	●	●	●	●	●	●	●	●	✓			
NYLCare Northwest																	

Health Maintenance Organization (HMO) Plans by State (Also check POS Section)	Telephone number	Enrollment code		Twice-Biweekly Premium Your Share	
		Self only	Self & family	Self only	Self & family
Plan name – location					
Washington (continued)					
PacifiCare of Oregon - Clark County	800/932-3004	SS1	SS2	44.64	98.88
PacifiCare of Washington - Puget Sound/Most West WA/Parts East WA	800/932-3004	WB1	WB2	39.64	102.56
Providence Health Plan - Lower Columbia Basin	800/421-0644	SD1	SD2	45.56	121.02
QualMed WA Health Plan - Most of Washington	800/869-7165	TM1	TM2	46.38	129.70
Regence Hlth Maintenance of OR - Clark County	800/278-5331	6B1	6B2	52.72	115.02
West Virginia					
Carelink Health Plans - Northern/Central/Southern West Virginia	800/348-2922	4C1	4C2	39.76	147.78
Health Plan Upper OH Valley - Northern/Central West Virginia	800/624-6961	U41	U42	38.14	95.34
HealthAssurance HMO - North Central/Panhandle	800/735-2202	6L1	6L2	39.76	100.38
PrimeONE - All of West Virginia	800/607-7461	9W1	9W2	41.36	105.58
QualMed Plans for Health OH/WV - Panhandle/N. Central/Charleston area	800/333-3930	QJ1	QJ2	42.82	122.48
SuperBlue HMO - Chas/Pkg/Mgmt/Beck/Clkb/Whlg/Lew/Fmt/Blu	800/391-4441	8T1	8T2	46.80	149.96
Wisconsin					
Compcare Health Services - Southeastern Wisconsin	414/226-6744	691	692	47.80	174.02
Compcare Health Services - Northcentral/Northwest Wisconsin	800/242-9635	6X1	6X2	47.16	167.72
DEAN HEALTH PLAN - South Central Wisconsin	800/279-1301	WD1	WD2	45.62	172.00
Family Health Plan - Milwaukee area	414/256-0040	WH1	WH2	68.98	231.58
Group Health Coop - Greater Dane and Jefferson Counties	608/251-3356	WJ1	WJ2	41.58	122.46
Group Hlth Coop/Eau Claire - West Central Wisconsin	715/836-8552	WT1	WT2	61.60	209.94
HealthPartners Classic-High - Pierce/St. Croix Counties	612/883-5000	531	532	52.46	150.98
HealthPartners Classic-Std - Pierce/St. Croix Counties	612/883-5000	534	535	41.58	99.80
HealthPartners Health Plan - West Central Wisconsin	612/883-5000	HQ1	HQ2	62.90	176.10
Humana Wisconsin Hlth Org. - Southeastern Wisconsin	888/393-6765	X11	X12	61.28	191.74
Physicians Plus HMO - South Central/Southeastern Wisconsin	608/282-8920	7P1	7P2	45.50	148.84
Unity Health Plans - Southern/Central Wisconsin	800/362-3310	W41	W42	47.26	161.76
Valley Health Plan - Western Wisconsin	715/832-3235	VH1	VH2	71.54	231.30

Health Maintenance Organization (HMO) Plans by State	Quality Indicators - Plan performance based on enrollee ratings: ● above average; ● average, ○ below average (Numeric average for all HMO plans in heading)													Top rated plans	Accreditation status NCQA JCAHO	Web site	
	% satisfied with plan			Coverage (77%)	Access to care (81%)	Access to care in an emergency (86%)	Choice of doctor (73%)	When sick, can get appointment (79%)	Seeing same doctor on most visits (84%)	Quality of care (76%)	Provider thorough and competent (82%)	Explanation of care (80%)	Results of care (74%)				
	% Extremely satisfied	% Very satisfied	% Somewhat satisfied														
Plan name																	
Washington (continued)																	
PacifiCare of Oregon*	12	48	24	○	●	●	●	●	●	●	●	●	●		●		
PacifiCare of Washington*	17	37	32	●	●	●	●	●	●	●	●	○					
Providence Health Plan	16	35	27	○	●	●	○	○	●	○	●	○					
QualMed WA Health Plan	16	35	30	●	●	●	●	●	●	●	●	●		●			
Regence Hlth Maintenance of OR																	
West Virginia																	
Carelink Health Plans																	
Health Plan Upper OH Valley	15	37	25	○	●	●	●	●	●	●	●	●		★			
HealthAssurance HMO																	
PrimeONE																	
QualMed Plans for Health OH/WV																	
SuperBlue HMO																	
Wisconsin																	
Compcare Health Services*	11	37	32	●	●	●	●	●	●	●	●	●					
Compcare Health Services																	
DEAN HEALTH PLAN	22	45	22	●	●	●	●	●	●	●	●	●	✓	●			
Family Health Plan	12	35	27	●	●	●	○	●	○	○	●	○		●			
Group Health Coop	37	44	16	●	●	●	●	●	●	●	●	●	✓	★			
Group Hlth Coop/Eau Claire																	
HealthPartners Classic-High	11	44	23	●	●	●	●	●	○	●	●	●		★			
HealthPartners Classic-Std*	25	45	16	●	●	●	●	●	●	●	●	●		★			
HealthPartners Health Plan	14	39	27	●	●	●	●	●	○	●	●	●		★			
Humana Wisconsin Hlth Org.	14	41	26	●	●	●	●	●	●	●	●	●					
Physicians Plus HMO																	
Unity Health Plans	19	36	25	●	●	●	●	●	○	●	●	●					
Valley Health Plan																	

1997 Survey data

Notes



*Visit our
web site at*
www.opm.gov/insure

Addressing the Postcard

Instructions for addressing the Postcard on the Back of this Booklet

Listed below are the OWCP District Office addresses. To identify the district office serving your compensation case file, look at the address label on the back of this booklet. Locate the two digit identifier which corresponds with the two digit identifier below. *(Please note: The two digit identifier is not part of the case file number. The identifier stands alone.)* Print the address shown next to that two digit identifier on the front of the postcard.

- | | |
|--|---|
| 01 Fiscal Officer
US DEPARTMENT OF LABOR,OWCP
JFK Federal Building, Room E260
Boston, MA 02203 | 11 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
City Center Square, Suite 750
1100 Main Street
Kansas City, MO 64105 |
| 02 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
P.O. Box 566
New York, NY 10014-0566 | 12 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
1801 California Street, Suite 915
Denver, CO 80202 |
| 03 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
3535 Market Street, Room 15100
Philadelphia, PA 19104 | 13 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
P.O. Box 193769
San Francisco, CA 94119-3769 |
| 06 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
214 North Hogan, Suite 1006
Jacksonville, FL 32202 | 14 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
1111 - 3rd Avenue, Suite 650
Seattle, WA 98101 |
| 09 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
1240 East Ninth Street, Room 865
Cleveland, OH 44199 | 16 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
525 Griffin Square, Room 100
Dallas, TX 75202 |
| 10 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
230 South Dearborn Street, 8th Floor
Chicago, IL 60604 | 25 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
800 N. Capitol Street, NW
Washington, DC 20211 |
| | 50 Fiscal Officer
US DEPARTMENT OF LABOR, OWCP
National Office
P.O. Box 37117
Washington, DC 20013-7117 |

DETACH

RETURN ADDRESS

NAME _____

STREET _____

CITY _____

STATE _____

Address of OWCP Office:

Place
postage
stamp
here

DETACH

Request for Registration Form or Brochures

U.S. Department of Labor
 Employment Standards Administration
 Office of Workers' Compensation Programs
 Washington, DC 20210

Official Business

Penalty for Private Use, \$300

Forwarding and Address Correction Requested

DETACH

Request For Registration Form Or Brochures

This special postcard has been prepared to speed the return of health benefits open season information to you. Mail this form to the proper OWCP office (see page 58.) Do not use it for any other purpose.

- I want to make a change during open season and know what plan or option I wish to enroll in. I have the brochure of that plan and don't need brochures. Please send me a registration form (SF 2809) only.
- I am considering making a change during open season but would like more information. Please send me a registration form (SF 2809) and a brochure for each of the plans I have listed below.

List enrollment codes of plans for the brochures you want. Codes for each FEHB plan appear in the plan comparison chart.	CODE	CODE	CODE
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Print or type your full name and mailing address here. Address the other side and add a stamp. Then drop card in mail box.	CODE	CODE	CODE
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Name		
Street address			
City, state, and ZIP code			
Check here if we need to change your mailing (home) address in our records. <input type="checkbox"/>	Signature		Date

IMPORTANT

HMOs and plans with a point of service product are open to compensationers in the plan's area.

Managed fee-for-service plans sponsored by employee organizations have specific membership requirements. Some are restricted and open only to compensationers who are already members of the sponsoring organization.

Do not send this card to OPM.

Keep a record of the date you mail this.

DETACH