October 26, 2015

The 2016 High Option Health Plan

Dear High Option Member:

This letter is to inform you about some important changes to your health plan for 2016. The table below shows your premium for the 2016 High Option Plan.

**Self Plus One Enrollment**

Self Plus One is a new enrollment type for 2016 that allows you to cover yourself and one eligible family member, either your spouse or a child under age 26. If you wish to switch to the Self Plus One enrollment type for next year, you must do so during this year’s Open Season, which runs from November 9, 2015 to December 14, 2015. To make a change, active employees must contact their agency’s HR office. Annuitants must contact OPM. SAMBA cannot make the change for you. For more information about the Self Plus One enrollment type, please see the enclosed Self Plus One Frequently Asked Questions.

<table>
<thead>
<tr>
<th>2016 High Option Premium</th>
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<tbody>
<tr>
<td>Type</td>
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<tr>
<td>Self Only (code 441)</td>
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<tr>
<td>(code 443)</td>
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<tr>
<td>Self Plus One</td>
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<tr>
<td>(code 442)</td>
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<tr>
<td>Self &amp; Family</td>
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<td>(code 444)</td>
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If you are in a special enrollment category (such as postal employees), please contact the agency which maintains your health benefits enrollment for exact rates.

**Pharmacy Benefit Changes**

Our current Pharmacy Benefit Manager, CVS/Caremark, will be replaced next year by Express Scripts. Members will have access to the Express Scripts retail network of over 68,000 pharmacies where they can obtain a 30-day supply of medications and one 30-day refill. Members will also be able to use either the Express Scripts mail order pharmacy or a retail drug store participating in the Express Scripts Smart90 program to fill 90-day prescriptions. The Smart90 program provides access to over 29,000 retail pharmacies nationwide. Please note that CVS drug stores do not participate in the Express Scripts Smart90 program.

In 2016, SAMBA will use the Express Scripts National Preferred Formulary for prescribed drugs. Drugs that were considered “preferred” by CVS/Caremark may not be on the Express Scripts preferred list and vice versa. Moreover, certain drugs will require prior authorization for medical necessity based on objective clinical evidence. Drugs which are excluded from the formulary will not be covered unless there is a medical necessity. We are working closely with Express Scripts to keep member disruption to a minimum during the transition. Please carefully read the enclosed Transitioning to Express Scripts Frequently Asked Questions document for important information concerning how this change may affect you.

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Other Plan Changes

- We have added the Express Scripts RationalMed Program to promote patient safety. Through review and analysis of integrated pharmacy and medical data, the program helps identify and resolve potential safety issues that could cause increased risks of hospitalizations and other adverse events.

- We have changed the incentive for completing a Health Risk Assessment (HRA). Next year we will apply a $25 credit toward your 2016 calendar year deductible when you complete a HRA. The incentive is limited to no more than two covered individuals over age 18 per calendar year.

- We no longer provide benefits for allogeneic transplants for chronic inflammatory demyelination polyneuropathy (CIDP) and autologous transplants for multiple sclerosis and systemic sclerosis. These treatments are considered experimental or investigational.

Express Scripts will mail a Welcome Package containing your 2016 SAMBA ID cards in late December. Watch your mail for information from Express Scripts. Please call SAMBA if you do not receive your new ID cards by December 28, 2015.

SAMBA members have access to several excellent resources and interactive tools to improve their health and maintain a healthy lifestyle. We urge you to take advantage of the health and wellness programs SAMBA offers. Visit www.SambaHealth.com or call us at 1-800-638-6589 for more information.

The official 2016 SAMBA Health Benefit Plan Brochure and the Summary of Benefits and Coverage documents are available on our website for viewing or downloading. You may also request paper copies of either document by visiting our web site (click on the Open Season link) or calling us at 1-800-638-6589.

Sincerely,

Walter E. Wilson
Executive Director

Enclosures

This communication is a summary. For complete information on benefits, see the Plan’s 2016 Federal brochure (RI-71-015). All benefits are subject to definitions, limitations, and exclusions set forth in the Federal brochure.

Required Notice of Summary of Benefits and Coverage:
Availability of Summary Health Information: The Federal Employees Health Benefits (FEHB) Program offers numerous health benefits plans and coverage options. Choosing a health plan and coverage option is an important decision. To help you make an informed choice, each FEHB plan makes available a Summary of Benefits and Coverage (SBC) about each of its health coverage options, online in early October. The SBC summarizes important information in a standard format to help you compare plans and options. A paper copy of the SAMBA SBC is available, free of charge, by calling 1-800-638-6589. To find out more information about plans available under the FEHB Program, including SBCs for other FEHB plans, please visit www.opm.gov/insure.