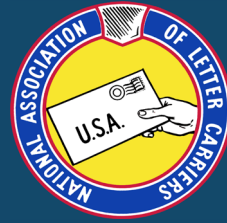
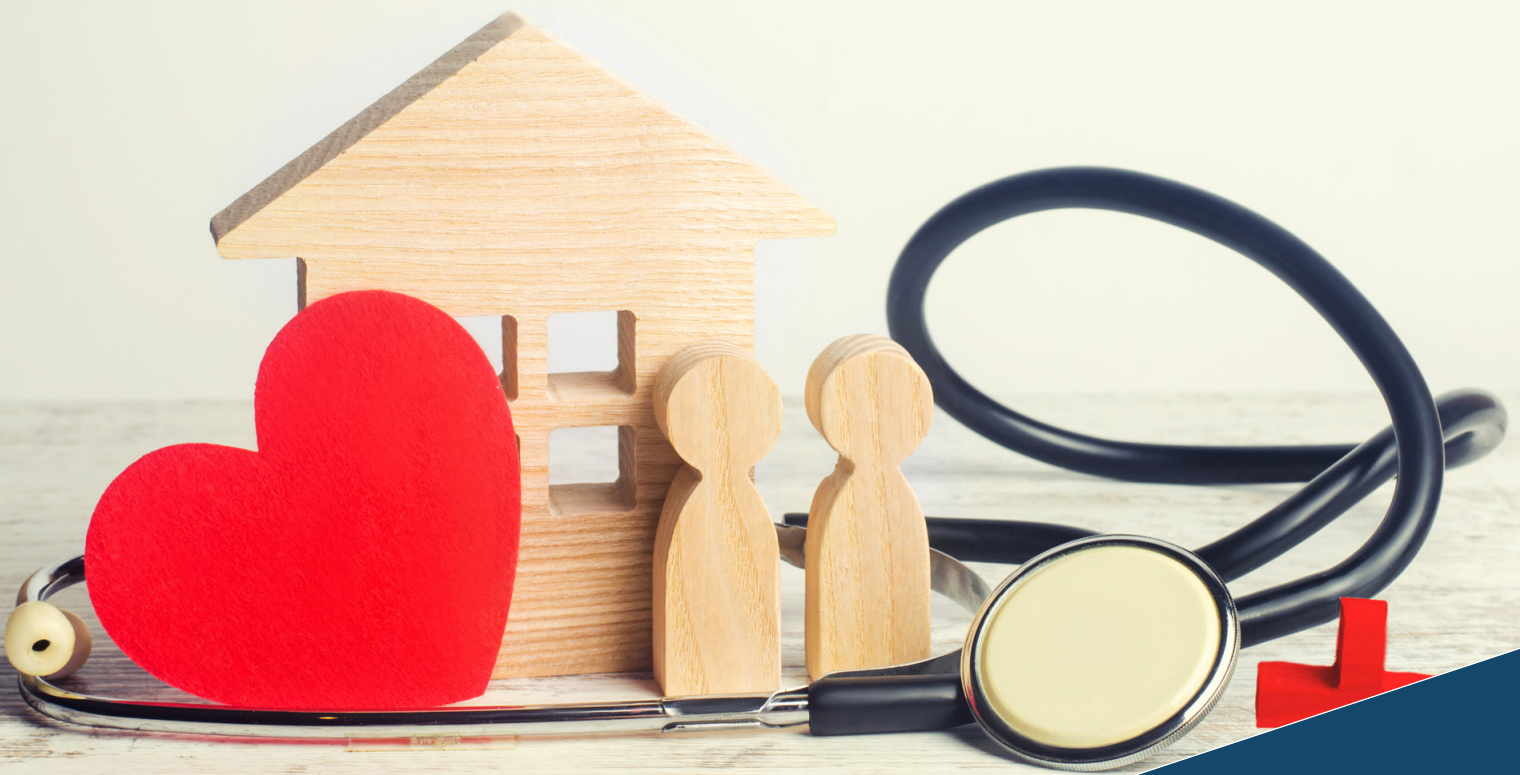


The NALC Health Benefit Plan



**HBR Report
May/June 2026
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**Brian L. Renfroe, President
Stephanie M. Stewart, Director**

**Board of Trustees:
Lawrence D. Brown, Jr., Chairman
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Director's Report



Dear Health Benefit Representative:

At the mid-year mark, there is no better time than now to remind letter carriers why the NALC Health Benefit Plan is the right choice for their health needs. While Open Season is a critical time for awareness, it is equally important to note that continuous effort throughout the year is essential for success.

How can you do this? Regular engagement or communication with your branch members allows the audience to become familiar and better understand the topic. From speaking at branch events, writing newsletter articles, sharing success stories, and knowing the competitive benefits and wellness programs offered by the Plan, a foundation is laid.

I encourage you to keep reading as we discuss why the NALC Health Benefit Plan should be first choice for you and all NALC members. After all, it is your health plan, not-for-profit, union-owned and union-operated. Learn about the Plan history, how benefits are decided and continue to evolve, our relationship with OPM and the importance of the official contract (the NALC Health Benefit Plan Brochure).

74th Biennial NALC Convention

The 74th Biennial National Convention is right around the corner. It will be held in Los Angeles, CA from August 3-7, 2026. Stop by our booth to learn about the Plan's benefits. Have claims questions? Stop by the office and talk with Heather. Refer to the last page for details on our partners that will be attending the Convention.

We look forward to seeing you in Los Angeles.



The Plan History

Our Mission:

To provide our members with access to quality medical care – while maintaining a comprehensive and affordable benefit package.

Beginning in 1950, the National Association of Letter Carriers began its own independent health benefit plan. The Health Benefit Plan staff consisted of two clerks on loan from NALC Headquarters. The location was one small room on H Street, NW, in Washington, D.C. Letter Carriers paid 100% of the premium out of their own pockets, and at the close of the initial open enrollment period in April 1950, the total Plan membership was 4,116.

Some of the benefits for that time included:

- Family plan premium \$6.35.
- Daily hospital room payment \$10.00.
- Miscellaneous benefits \$200.00 (x-rays, lab fees, etc.).
- Surgical schedule \$200.00 limit.
- Total maternity benefits \$50.00.

1960 - Celebrating 10 years. We were excited to mark our 10th anniversary. Our membership was at 30,000, and we were now occupying 3 floors of the NALC building; however, to say things were becoming quiet and routine would be an understatement, as another big change was knocking on the door. That change was the NALC Health Benefit Plan becoming part of the Federal Employees Health Benefit (FEHB) Program. Once again, our numbers increased as Letter Carriers joined the Plan bringing us to a grand total of 101,503 members.

1970 to 1990 – In the seventies, eighties, and early nineties the Plan continued to do well; however, building space was an issue and two more moves would be needed. By the end of 1972 the first move was to a warehouse on Sunset Hill Rd in Reston, VA. With a little remodeling, the warehouse became home, and business continued.

1990 – We continued to grow over the following years, and once again a move became necessary. That relocation led us to where we continue to operate today in Ashburn, Virginia.

2026 – Sadly, time and space do not permit me to recap a year-by-year account of all details; however, from 1950 our mission has not changed. Fast forward, over 35 years from 1990 or over 75 years from 1950, and here we are continuing the journey serving our members.

From preventive care, mental health services, to wellness programs to other essential health benefits our plan has continued to evolve, ensuring that we meet the needs of letter carriers and their families while remaining true to our mission.

When union members are not aware of the NALC Health Benefit Plan, our experience, the competitive benefits offered, and why they should enroll, then we have fallen short of our goal.



The Plan Submission with OPM

The Plan negotiates new benefits and signs an annual contract to renew our participation in the PSHB Program.

Each year OPM issues a Call Letter that sets out new and/or continuing initiatives and objectives sought for the next benefit year. The Plan must submit a proposal for benefits and rates based upon the initiatives and objectives in the Annual Call Letter. The Plan does take into consideration the requests we receive from our members during the year regarding benefits. Keep in mind each benefit must have a cost analysis and unless it is stipulated in the Call letter the Plan must submit a cost neutral proposal.

The Submission timeline and process is listed below:

May 31	The Benefit and Rate Submission proposal is due.
June	The Contract Specialist reviews the proposed benefits and: Clarifies and confirms how initiatives are addressed Obtains further explanation of the intent of the benefits A call is scheduled to review what will be accepted or declined
July/August	The benefit negotiations will typically conclude and a formal benefit “close out” letter is sent by the Contract Specialist.
August/ September	The rate negotiations conclude and are followed by the drafting and finalization of all brochure language.

The Plan Brochure

The NALC's Plan Brochure is the most important document produced every year and it's the end result of the submission process. Every question you have about the Plan or your benefits has an answer within its pages. If you have questions or are unable to find what you are looking for within the brochure's 200+ pages, we have a dedicated staff of Customer Service Representatives who are always willing to help. Our Customer Service Representatives are available from 8am until 6pm ET.

We frequently get asked how the Plan brochure is created. In late March/early April, the Office of Personnel Management or OPM puts out a Call Letter outlining their objectives for the coming Plan year. The Call Letter will have things that must be included in the Plan's new benefit package and things that they feel should be strongly considered for inclusion. The Call Letter can also have an overriding theme or call to action. This year's Call Letter focuses on supporting our members becoming the healthiest version of themselves. The Plan is challenged to deliver a benefit proposal that will meet all OPM's objectives in the Call Letter, add things that are important to our members, while remaining cost neutral. This means for everything we add; we must find a way to balance it with cost savings in other areas.

The language in the brochure is also largely dictated by OPM. When the Plan adds a new benefit or changes an existing benefit, we provide OPM with the language we want to use, and it must be approved. Occasionally, we will find areas where the Plan feels members could use clarification of an existing benefit. As part of our benefit proposal, the Plan must submit any clarifications we want to make to the existing language or structure.

When the brochure comes out, there are two things people want to know; what's new and what are the premiums for the new year. Section 2., or the "New For" section, can usually be found with the first 20 pages and this section lays out all the changes the Plan made for the coming benefit year. For example, in 2026 the plan added coverage for vaccinations and immunizations related to travel and this is the first place it's mentioned. The premium information is found on the back cover of the brochure or the very last page if you are looking at it digitally.

The creation of the brochure is the culmination of many months of hard work by our dedicated team here at the Plan. As shown in the chronological list of benefit changes, we review benefit suggestions we receive and implement those suggestions where possible. Our mission is to provide our members with access to quality medical care—while maintaining a comprehensive and affordable benefits package. The Plan brochure is the written document that reaffirms our commitment to our mission every year.

Supporting Letter Carriers

Need a few more reasons why letter carriers should choose the NALC Health Benefit Plan?

On the Job Injury

The NALC Health Benefit Plan (the Plan) understands that letter carriers may face injuries on the job leading to lengthy workers' compensation claim acceptance or resolution processes.

To support letter carriers during this period, the Plan will work with the member and provider to pay claims in good faith until the Office of Workers' Compensation Program makes a final determination.



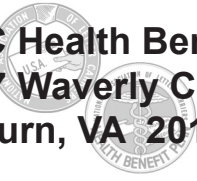
We Hear You

Over the years many letter carriers have written to the Plan or personally spoken with staff and/or the Health Benefit Plan Director concerning benefit changes they would like to see implemented.

We appreciate this input and with guidance from the governing board, actuaries, and brochure committee, we carefully review each submission, as our goal is to serve the needs of members.

Highlights of suggested benefit changes throughout the years

- 2013 - Added Custom Functional Foot Orthotic benefit
- 2014 - Started covering office visits related to acupuncture
- 2015 - Mail-Order copayments counted toward Rx maximum
- 2016 - Added back the PSA test for men
- 2017 - Increased the chiropractic visits to 24 visits
- 2018 - Started covering 3-D mammograms
- 2019 - Removed prior auth on the shingles vaccination
- 2020 - Increased Foot Orthotics benefit to every 2 years
- 2021 - Removed limitations on ABA therapy
- 2022 - Added Skilled Nursing benefit for members without Medicare
- 2023 - Added coverage for Fertility Drugs
- 2024 - Expanded Custom Functional Foot Orthotics benefit to 2 pair a year
- 2025 - Extended core hours

**NALC Health Benefit Plan**
20547 Waverly Court
Ashburn, VA 20149

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The NALC Convention

Heading to the national convention? Please make sure to stop by our booth and say hello or learn more about what we offer.

Our staff along with several of the Health Benefit Plan partners will be onsite throughout the event.



NALC Health Benefit Plan
888-636-NALC
PPO Network Providers
877-220-NALC
Mental Health / Substance Use Disorder
877-468-1016
Prescription Drug Program
800-933-NALC
CVS Specialty™ Pharmacy
800-237-2767
Precertification
877-220-NALC
Fraud Hot Line
888-636-NALC