STEPS TO COMPARE PLANS

Access https://www.opm.gov/healthcare-insurance/tribal-employers/ website
Click on Tribal Employers
Click on Compare Plans

Tribal Employers

Welcome Tribal Employers, Tribes, Urban Indian Organizations, and Tribal Grant Schools

Welcome to the Tribal Federal Employees Health Benefits (FEHB) Program website. This site provides details on the FEHB Program, eligibility, enrollment, plan information, premium rates, and more.

The Patient Protection and Affordable Care Act, Public Law 111-148, incorporated and enacted S. 1790, the Indian Health Care Improvement Reauthorization and Extension Act of 2009, resulting in the addition of section 409 to the IHCA (codified at 25 U.S.C. 1647b). Under IHCA section 409, an Indian tribe or tribal organization carrying out programs under the Indian Self Determination and Education Assistance Act (ISDEAA), or an urban Indian organization carrying out programs under title V of IHCA, is entitled to purchase coverage, rights, and benefits under the Federal Employees Health Benefits Program (FEHB) Program for their employees.


Contact us at 202-606-2530 or email us at tribalprograms@opm.gov for assistance with your questions on Tribal employer FEHB eligibility.

* Note: The term tribal employers is used to designate tribes, tribal employers, urban Indian organizations and tribal grant schools.

Where to go for more information
Healthcare
COMPARE 2023 PLANS

The information contained in this comparison tool is not the official statement of benefits. Before making your final enrollment decision, always refer to the individual FEHB brochures. Each plan's FEHB brochure is the official statement of benefits. If you decide to enroll, change health plans or plan options, or change enrollment type, please visit the Enroll page for information on submitting a change.

Search by one of the following:

Items marked with an * are required.

Enter your home or work zip code. To enroll, you must live or work in a plan's geographic service area.

5-Digit Zip Code*

☐ I live overseas or outside the Continental United States. (Selecting this option will set the zip code to 99999)

The current Plan selection below is disabled until you enter a Zip Code, Enrollee Type, and Pay Frequency. Pay Frequency depends on the Enrollee Type and may be restricted depending on Enrollee Type selected.

FEHB-eligible career USPS Employees should use the Federal & U.S. Postal Service Enrollee Type for 2023.

Enrollee Type*

☐ Federal & U.S. Postal Service Employee
☐ Federal Deposit Insurance Corporation Employee
☐ Certain Temporary Employee
☐ Tribal Employee (Monthly)
☐ Annuity (Monthly)
☐ Former Spouse Enrollee (Monthly)
☐ Temporary Continuation of Coverage Employee (TCC) (Monthly)
☐ Workers Compensation Recipient (Monthly)

Pay Frequency* (May be restricted with certain Enrollee Types)

☐ Bweekly
☐ Every Four Weeks
☐ Semi-Monthly
☐ Monthly

Your Current Plan (if applicable)

(This option is disabled until all required options are selected.)

Select your current plan (optional)

Search
2023 FEHB Plan Results

Results for coverage in **58504** for Tribal Employee paid Monthly

Please note the benefits displayed on this page are for in-network benefits only! To see out-of-network benefits, please select up to 3 plans to compare.

The amounts displayed on this page represent the member's liability for each service.

You may only select 3 plans to compare at once

<table>
<thead>
<tr>
<th>Select Plan</th>
<th>Plan Name (Plan Code) - Enrollment Code</th>
<th>Enrollee Premium</th>
<th>Annual Deductible</th>
<th>Annual Out of Pocket Maximum</th>
<th>Medical Account (HRA/HSA)</th>
<th>Primary Care Office Visit</th>
<th>Specialist Office Visit</th>
<th>Doctor Cost - Inpatient Surgery</th>
<th>Retail Generic</th>
<th>Retail Brand</th>
<th>Plan Requires Referral to See Certain Specialists</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Aetna Advantage Plan - Advantage (Z2) - ZZ4</td>
<td>$125</td>
<td>$2000</td>
<td>$7500</td>
<td>N/A</td>
<td>30%</td>
<td>30%</td>
<td>30%</td>
<td>Tier 1: $10</td>
<td>Tier 2: 45%</td>
<td>No</td>
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<tr>
<td></td>
<td>Aetna Advantage Plan - Advantage (Z2) - ZZ6</td>
<td>$275</td>
<td>$4000</td>
<td>$15000</td>
<td>N/A</td>
<td>30%</td>
<td>30%</td>
<td>30%</td>
<td>Tier 1: $10</td>
<td>Tier 2: 45%</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Aetna Advantage Plan - Advantage (Z2) - ZZ6</td>
<td>$331.25</td>
<td>$4000</td>
<td>$15000</td>
<td>N/A</td>
<td>30%</td>
<td>30%</td>
<td>30%</td>
<td>Tier 1: $10</td>
<td>Tier 2: 45%</td>
<td>No</td>
</tr>
</tbody>
</table>