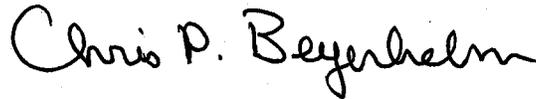


For: FSA and RMA Employees

2016 Open Season: Federal Employees Health Benefits (FEHB), Flexible Spending Account Program (FSAP), and Federal Employees Dental/Vision Insurance Program (FEDVIP)

Approved by: Associate Administrator for Operations and Management



1 Overview

A Purpose

This notice announces and provides guidance about the 2016 FEHB, FSAP, and FEDVIP Open Season and FEHB Program significant plan changes. The 2016 Open Season period:

- begins Monday, **November 14, 2016**, and continues through Monday, **December 12, 2016**
- allows employees to enroll, cancel enrollment, or make changes to the following:
 - FEHB Program
 - FSAP - health care and dependent care
 - FEDVIP.

B FEHB Program Changes and Frequently Asked Questions

Employees currently enrolled in terminating plans and service area reductions, displayed in **Exhibit 1**, must enroll in a new plan during Open Season if they want to continue health insurance coverage in 2017. Exhibit 1 also contains FEHB Program changes.

Exhibit 2 provides FEHB Fast Facts, which includes questions and answers.

Disposal Date	Distribution
February 1, 2017	All FSA and RMA employees; State Offices relay to County Offices

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1 Overview (Continued)

C Employee Information for Specific Tasks

Employees shall use the following table for additional information.

IF employees need to...	THEN...
enroll, add to, or change information on their Employee Personal Page (EPP)	go to NFC's web site at www.nfc.usda.gov and under "Applications" , CLICK "MyEPP".
verify enrollment	use contact information under subparagraph C.
review:	access the following web sites:
<ul style="list-style-type: none"> • FEHB PLAN information • FEDVIP PLAN information • FSAP program information 	<ul style="list-style-type: none"> • for FEHB - https://www.opm.gov/healthcare-insurance/open-season/ • for FEDVIP - http://www.opm.gov/healthcare-insurance/dental-vision/plan-information/ • for FSAFEDS - https://www.fsafeds.com/.

D Servicing Personnel Office Contacts

Contact the appropriate servicing personnel office according to this table.

Location/Office	SPO Contact
Southwest Area State or County Offices (AZ, CA, CO, HI, KS, NV, NM, OK, TX, UT)	Southwest Area Regional Service Office Human Resources Team by e-mail to HRM.SWARSO@FSA.USDA.GOV
FSA State or County Office	State Administrative Officer
National Office Employees HR Contacts	
DACO, KCCO, and DAFP	Dana Candler by any of the following:
RMA: OA, Southwest (CA, KS, OK) and Western Compliance (CA)	<ul style="list-style-type: none"> • e-mail at dana.candler@kcc.usda.gov • telephone at 816-926-6117 • FAX at 816-926-6156.
DAM	Patty Gepford by any of the following:
RMA: Product Management, Southeast Regional (GA, MS, NC) and Eastern Compliance (NC)	<ul style="list-style-type: none"> • e-mail at patricia.gepford@kcc.usda.gov • telephone at 816-926-6259 • FAX at 816-926-6156.

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1 Overview (Continued)

D Servicing Personnel Office Contacts (Continued)

Location/Office	SPO Contact
ITSD	Ernest Kary by any of the following: <ul style="list-style-type: none">• e-mail at ernest.kary@kcc.usda.gov• telephone at 816-926-6225• FAX at 816-926-6156.
DAFO and OBF RMA: WDC Compliance and Insurance Services	Karen Williams by any of the following: <ul style="list-style-type: none">• e-mail at karen0.williams@kcc.usda.gov• telephone at 816-926-2670, or• FAX at 816-926-6156.
OA, DAFLP, and APFO RMA: Midwest (IL, MN)/Northwest (MT, WA), Regional and Compliance (IN, KCMO), and Southwest Compliance (TX)	Kedra Watts by any of the following: <ul style="list-style-type: none">• e-mail at kedra.watts@wdc.usda.gov,• telephone at 202-401-0678, or• FAX at 202-205-9146.

E Office of Management and Budget (OMB) Notification

Information provided by enrolling in the FEHB Program may also be used for computer matching with Federal, State, or local agencies' files to determine whether employees qualify for benefits, payments, or eligibility in the FEHB Program, Medicare, or other Government benefits programs.

2 FEHB Eligibility and Effective Dates

A Actions During Open Season

Eligible employees may enroll in the FEHB Program during Open Season. Employees already enrolled in the FEHB Program may take the following actions during Open Season:

- change from one plan or option to another
- elect or waive FEHB-Premium Conversion (FEHB-PC) (35-PM, paragraph 62).

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2 FEHB Eligibility and Effective Dates (Continued)

B Effective Dates of Enrollments and Changes

This table provides effective dates of enrollments and changes.

If there is a....	THEN the effective date is...
premium rate change	January 8, 2017.
change in enrollment	January 8, 2017.
new enrollment	January 8, 2017, if the employee is in pay status for any part of the previous pay period. Otherwise, enrollment will become effective in the pay period after the first pay period in pay status.

Note: Enrollment in current plans will continue until 11:59 p.m. on **January 7, 2017**.

3 2017 Benefits and FEHB Guide and Individual Plan Brochures

A FEHB Guide

OPM is no longer producing the Guide to Federal Benefits (Guide) beginning with the 2017 benefit year. This includes both the printed and online versions of the Guide. Most of the information printed in the Guide is located on OPM’s federal benefits programs’ web site at www.opm.gov/insure, including the following:

- specific plan information on FEHB and FEDVIP
- premium charts
- information on eligibility, enrolling in, or applying for all of the federal benefits programs, including the Federal Employees’ Group Life Insurance Program (FEGLI), Federal Flexible Spending Account Program (FSAFEDS), and the Federal Long Term Care Insurance Program (FLTCIP).

B Individual Plan Brochures

Employees interested in enrolling or changing plans should review the individual plan brochures for a complete description of benefits to make an informed decision. Employees may access all FEHB brochures at <https://www.opm.gov/healthcare-insurance/open-season>.

C Going Green Initiative

To help protect natural resources and lower administrative costs, employees are encouraged to view FEHB brochures online. Paper copies of health plan brochures will **not** be provided. The health plan brochure web site is located at www.opm.gov/FEHBbrochures.

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4 Employee Action

A Action Required by Employees

Employees must take the following actions.

Step	Action
1	Immediately review Exhibit 1 for significant plan changes to determine whether to take any further action. Note: Exhibit 1 assists employees in identifying nonparticipating plans and other significant plan changes that may affect them.
2	Access NFC's EPP at https://www.nfc.usda.gov to make Open Season elections.

B Enrollees Who Continue Their Current Enrollment

Employees who want to continue enrollment in their current FEHB plan, elect, or change their FEHB plan should verify that their current plan is available for 2017, and review any plan changes. Enrollees **must** enroll in a different plan to continue FEHB coverage in 2017, if their plan:

- will not be participating in the FEHB Program in 2017 (Exhibit 1)
- is reducing their service area and terminating enrollment codes (Exhibit 1).

Note: See Exhibit 1 for a list of plans and codes with significant changes or that are terminating.

C Continuing FEHB Coverage After Retirement

To continue FEHB coverage after retirement, employees **must** have been continuously enrolled, or covered as a family member, under the FEHB Program for either of the following:

- 5 years immediately before retirement
- if eligible for less than 5 years, for all service since the employee was eligible for FEHB Program benefits, unless the FEHB Program benefit requirements are waived.

D Dependent Coverage Under Affordable Care Act

For information on changes in dependent coverage and/or eligibility, access www.opm.gov/healthcare-insurance/healthcare/eligibility/.

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5 Health Savings Accounts (HSA's)

A Definition of HSA

HSA means tax-sheltered trust account that employees own to pay qualified medical expenses for themselves, their spouse, and their dependents. Employees may enroll in a high deductible health plan (HDHP) that determines whether employees are eligible for HSA or health reimbursement arrangements, based on the information provided.

Note: More information on HSA is provided at www.opm.gov/insure/health/hsa/.

B HSA Features

HSA features include the following:

- administration by a trustee/custodian
- employee-owned HSA that is theirs to keep even if they change plans or retire
- tax-free interest
- tax-free withdrawals for qualified medical expenses
- unused funds and interest that are carried over, without limit, from year to year
- voluntary contributions that are tax-deductible.

C HSA Benefits

HSA's may save employees money through lower premiums, tax savings, and money deposited in their account that may be used to pay the deductible and other out-of-pocket medical expenses in current or future years.

6 Flexible Spending Account Plan (FSAP)

A Definition of FSAP

Flexible Spending Account Plan (FSAP) means tax-favored plan that allows employees to set aside pretax money from their paychecks to pay for a variety of eligible expenses. Eligible employees may choose to make a voluntary allotment from their salary to their FSAP during the Open Season.

Employees:

- do **not** pay employment taxes on FSAP allotments
- shall communicate, enroll, and file claims directly with the FSAP Administrator, Wage Works, through their web site at www.fsafeds.com or by telephone at 877-372-3337.

Note: FSAP contributions **must** come from an employee's salary through allotments.

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6 Flexible Spending Account Plan (FSAP) (Continued)

A Definition of FSAP (Continued)

Because of the tax advantages of FSAPs, IRS has strict guidelines for their use. One of these guidelines is commonly known as the “use or lose” rule. According to this rule, if an employee has not incurred enough eligible expenses during the benefit year to equal the annual amount contributed to FSAP, the employee loses the balance remaining in the accounts when the benefit year ends.

Carryover has been adopted for health care and limited expense health care FSAPs. Participants that are enrolled in one of these FSAP’s in 2016 will be able to bring up to \$500 of unspent funds from 2016 into 2017. **Participants must re-enroll for the 2017 Benefit Period to be eligible for carryover.** Remember, there is no longer a grace period for these two accounts.

Employees who are unfamiliar with FSAP benefits and risks are strongly urged to consult with their accountant, tax advisor, or tax preparer before electing FSAP or benefit amount. FSAP contributions do **not** count toward the IRS yearly maximum, nontaxable contribution limit. OPM’s FSAP web site (www.opm.gov/insure) provides overall FSAP information.

B Two FSAP Accounts

The following two FSAP accounts are available to eligible employees that allow employees to pay either medical or dependent care expenses using pretax dollars:

- health care flexible spending account
- dependent care flexible spending account.

Eligible employees may choose to participate in either or both accounts. There are no Government contributions to FSAP. Employees are encouraged to review OPM’s “Frequently Asked Questions on FSAP” located at <https://www.fsafeds.com/support/faq> .

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6 Flexible Spending Account Plan (FSAP) (Continued)

C FSAP Enrollment

Unlike FEHB or FEHB-PC, participation in FSAP is **not** automatic. Employees must make a voluntary election on an annual basis. If an employee does **not** make an election during the open enrollment, they will not have FSAP in the new benefit year and will not carryover up to \$500. Employees need to make the following decisions:

- whether they want to have coverage in 1 or both of the FSAP accounts
- the annual amount to contribute to their FSAP.

The amount an employee can contribute to the health care and limited expense health care flexible spending accounts has increased for the current open season (2017 benefit year). The new maximum contribution will increase \$50 to \$2,600, to match the IRS cap for this coming year.

The minimum election for the flexible spending accounts is \$100 for the 2017 benefit period.

The maximum annual election for a Dependent Care Flexible Spending Account is \$5,000 per household for the 2017 benefit period. There is no carryover for this account, but there is still a grace period.

D Eligibility

Any employee eligible for FEHB is eligible to enroll in FSAP. Employees do **not** need to be enrolled in FEHB to participate.

Note: Employee may **not** have HSA and FSAP at the same time.

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7 Federal Employees Dental/Vision Insurance Program (FEDVIP)

A Types of Enrollment

There are 3 types of enrollment available under FEDVIP. The following table provides information on the enrollment types.

Types of Enrollment	Description
Self Only	Covers only the enrolled employee. An eligible employee may enroll in Self Only even though he or she has a family, but the family members are not covered.
Self Plus One	Covers the enrolled employee or annuitant plus 1 eligible family member. Eligible individuals may enroll in Self Plus One even though they have more than 1 eligible family member, but the additional family members are not covered. The enrollee must specify during the enrollment process which 1 eligible family member he or she wants to cover under Self Plus One. The enrollee may change the covered family member to another eligible family member during Open Season or because of a qualifying life event.
Self and Family	Covers the enrolled employee and all eligible family members. Enrollees should list all eligible family members when they enroll through www.benefeds.com to ensure timely claim payments. All the enrollee's eligible family members are automatically covered, even if the enrollee fails to list all of them when enrolling on www.benefeds.com , but claim payments may be delayed for family members who were omitted.

B Eligible Employees

Federal and County Office employees are eligible to enroll in FEDVIP, if they are eligible to enroll in the FEHB Program. Employees do not need to be enrolled in FEHB, just meet the FEHB eligibility criteria to enroll in FEDVIP.

C How to Enroll

Employees must create a "benefeds" account by providing demographic and employment information at **www.benefeds.com**.

Note: Access **www.benefeds.com** for an online tutorial, extensive online help, and a "Frequently Asked Questions" section to assist enrollees through the enrollment process.

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7 Federal Employees Dental/Vision Insurance Program (FEDVIP) (Continued)

D FEDVIP and FEHB

FEDVIP and FEHB are entirely separate programs. Some FEHB plans will:

- continue to offer coverage of some dental and vision services
- offer non-FEHB dental and vision services.

FEDVIP provides supplemental dental and vision insurance coverage. Some carriers participate in both FEHB and FEDVIP. Individuals eligible to enroll in both programs may choose to enroll in 1 of the following:

- FEHB **only**
- FEDVIP **only**
- both
- neither.

Note: Individuals eligible may choose different enrollment types for each program. An individual might be enrolled in FEHB Self and Family, but be enrolled in Self Only in FEDVIP.

E Re-Enrollment

Re-enrollment is automatic each year, unless an enrollee chooses to make a change during Open Season or a plan terminates its participation in FEDVIP. Employees are encouraged to view plan changes and premium changes during Open Season. Copies of all FEDVIP brochures are at www.opm.gov/healthcare-insurance/dental-vision/plan-information/ .

F Effective Date of Coverage

The effective date of FEDVIP coverage for 2017 is January 1, 2017.

Plans or Codes With Significant Changes or That Are Terminating

Following are the plans or codes with significant changes or that are terminating.

ATTACHMENT 1 – FEHB PROGRAM

**TABLE 1
PLANS LEAVING THE FEHB PROGRAM**

Enrollees in these terminating plans must make a positive election into another FEHB plan during Open Season or they will be enrolled in the Standard Option of the GEHA Benefit Plan (the lowest-cost nationwide plan option for 2017 as determined by OPM).

State	Plan Name	2016 Enrollment Code	General Location
Iowa	Sanford Health Plan	AU1, AU3, AU2, AU4, AU6, AU5	Northwestern Iowa
Michigan	Grand Valley Health Plan	RL1, RL3, RL2, RL4, RL6, RL5	Grand Rapids Michigan Area
North Dakota	Sanford Health Plan	C91, C93, C92, C94, C96, C95	North Dakota
South Dakota	Sanford Health Plan	AU1, AU3, AU2, AU4, AU6, AU5	South Dakota's Central and Eastern regions and Rapid City Area
Texas	FirstCare Health Plan	CK1, CK3, CK2	West and Central Texas

**TABLE 2
PLAN REDUCING SERVICE AREAS
AND TERMINATING ENROLLMENT CODES**

Enrollees in these terminating enrollment codes must make a positive election into another FEHB plan during Open Season or they will be enrolled in the Standard Option of the GEHA Benefit Plan (the lowest-cost nationwide plan option for 2017 as determined by OPM).

State	Plan Name	2016 Enrollment Code	Area Dropped
Virginia	Actna Whole Health	D91, D93, D92	Roanoke area: Cities of Bedford, Lexington, Martinsville, Radford, Roanoke and Salem Counties of Bedford, Bland, Botetourt, Carroll, Craig, Floyd,

Plans or Codes With Significant Changes or That Are Terminating (Continued)

			Franklin, Giles, Henry, Montgomery, Pulaski, Roanoke, Tazewell, and Wythe
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**TABLE 3
PLANS REDUCING SERVICE AREAS
WITHOUT TERMINATING ENROLLMENT CODES**

Enrollees in the areas being dropped who do not change health plans during Open Season will only have emergency services where they live and they will have to travel to their plan’s remaining service area to obtain medical care in order to receive full benefits from the plan in 2017.

State	Plan Name	2016 Enrollment Code	Area Dropped
California	Kaiser Northern California-Fresno Region	NZ1, NZ3, NZ2, NZ4, NZ6, NZ5	County of Tulare – Zip Codes 93238, 93261
Ohio	HealthSpan Integrated Care	641, 643, 642, 644, 646, 645	Counties of Adams, Allen, Ashland, Ashtabula, Auglaize, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Darke, Defiance, Erie, Fayette, Fulton, Greene, Hamilton, Hancock, Hardin, Henry, Highland, Holmes, Huron, Logan, Lucas, Madison, Mercer, Miami, Montgomery, Ottawa, Paulding, Pike, Preble, Putnam, Ross, Sandusky, Scioto, Seneca, Shelby, Tuscarawas, Union, VanWert, Warren, Williams, Wood

**TABLE 4
PLANS TERMINATING OPTION AND ENROLLMENT CODES**

Enrollees in the plan’s terminating option will be automatically enrolled into their plan’s remaining option that is identified in the table below unless they enroll in another plan during Open Season.

State	Plan Name	Terminating Options (end of 2016)	Terminating Codes (end of 2016)	Remaining Option and Codes for 2017
Arizona	Health Net of Arizona	High	A71, A73, A72	A74, A76, A75 Standard

Plans or Codes With Significant Changes or That Are Terminating (Continued)

Illinois	Health Alliance HMO	High	FX1, FX3, FX2	K84, K85, K86 Standard
Indiana	Health Alliance HMO	High	FX1, FX3, FX2	K84, K85, K86 Standard
Iowa	Health Alliance HMO	High	FX1, FX3, FX2	K84, K85, K86 Standard

**TABLE 5
PLAN CONTRACT AND ENROLLMENT CODE MERGER WITH TERMINATING ENROLLMENT CODES**

The payroll office must automatically move enrollees into their plan's surviving 2017 codes unless the enrollees select another health plan during Open Season.

State	2016 Plan Name	Terminating Plan Codes (2016)	2017 Surviving Plan	2017 Surviving Codes
Michigan	Health Plus	X51, X53, X52	Health Alliance Plan (HAP)	521, 523, 522

**TABLE 6
PLANS ADDING NEW OPTIONS AND ENROLLMENT CODES**

State	Plan Name	New Option	2017 Enrollment Codes	General Location
Illinois	Blue Preferred Plus POS	Standard	9G4, 9G5 9G6	St. Clair and Madison, IL
Missouri	Blue Preferred Plus POS	Standard	9G4, 9G5 9G6	St. Louis, Central and Southwest Missouri
New Mexico	New Mexico BlueHMO Preferred	Standard	Q14, Q16, Q15	All of New Mexico
Oklahoma	GlobalHealth, Inc.	Standard	IM4, IM6, IM5	All of Oklahoma

**TABLE 7
SERVICE AREA EXPANSIONS WITHOUT NEW ENROLLMENT CODES**

State	Plan Name	Plan Option	2017 Enrollment Codes	Location of Areas
California	Kaiser Northern California	High, Standard, Basic	591,593,592, 594,596,595, KC1, KC3, KC2	County of Santa Cruz - 95001, 95003, 95005, 95006, 95007, 95010, 95017, 95018, 95019, 95033, 95041, 95060, 95061, 95062, 95063, 95064, 95066,

Plans or Codes With Significant Changes or That Are Terminating (Continued)

				95067, 95073, 95076, 95077
California	Kaiser Southern California	High, Standard	621, 623, 622, 624, 626, 625	County of Tulare – 93238, 93261
Colorado	Kaiser Foundation Health Plan Colorado	High, Standard, Basic,	651, 653, 652, 654, 656, 655, N41, N43, N42	County of Summit - All County of Eagle - 80423, 80426 80463, 81620, 81631, 81632, 81637, 81645, 81649, 81655, 81657, 81658 County of Garfield - 81637 County of Grand - 80498 County of Routt - 80463
Idaho	Aetna HealthFund CDHP/Aetna Value Plan	CDHP Value	H41, H43, H42, H44, H46, H45,	Counties of Camas and Clark
Idaho	Aetna HealthFund HDHP/Aetna Direct Plan	HDHP Direct	224, 226, 225, N61, N63, N62	Counties of Camas and Clark
Illinois	Aetna HealthFund CDHP/Aetna Value Plan	CDHP Value	H41, H43, H42, H44, H46, H45	Counties of Adams, Carroll, Dewitt, Hancock, Pike, Shelby
Illinois	Aetna HealthFund HDHP/Aetna Direct Plan	HDHP Direct	224, 226, 225, N61, N63, N62	Counties of Adams, Carroll, Dewitt, Hancock, Pike, Shelby
Illinois	MercyCare	High	EY1, EY3, EY2	Counties of Boone and Winnebago
Kentucky	Aetna HealthFund CDHP/Aetna Value Plan	CDHP Value	H41, H43, H42, H44, H46, H45	Counties of Bath, Fleming, Menifce, Nicholas, Powell, Rowan, Wolfe
Kentucky	Aetna HealthFund HDHP/Aetna Direct Plan	HDHP Direct	224, 226, 225, N61, N63, N62	Counties of Bath, Fleming, Menifce, Nicholas, Powell, Rowan, Wolfe
Louisiana	Aetna HealthFund CDHP/Aetna Value Plan	CDHP Value	F51, F53, F52, F54, F56, F55	County of Vernon
Louisiana	Aetna HealthFund HDHP/Aetna Direct Plan	HDHP Direct	224, 226, 225, N61, N63, N62	County of Vernon

Plans or Codes With Significant Changes or That Are Terminating (Continued)

Michigan	Blue Care Network	High	LX1, LX3, LX2	County of Lenawee
Michigan	Health Alliance Plan (HAP)	High Standard	521, 523, 522, GY4, GY6, GY5	Counties of Arenac, Bay, Huron, Iosco, Jackson, Saginaw, Tuscola
Montana	Aetna HealthFund CDHP/Aetna Value Plan	CDHP Value	H41, H43, H42, H44, H46, H45	Counties of Carter, Garfield, Madison, McCone, Roosevelt, Wibaux
Montana	Aetna HealthFund HDHP/Aetna Direct Plan	HDHP Direct	224, 226, 225, N61, N63, N62	Counties of Carter, Garfield, Madison, McCone, Roosevelt, Wibaux
West Virginia	Aetna HealthFund CDHP/Aetna Value Plan	CDHP Value	F51, F53, F52, F54, F56, F55	Counties of Grant, Hardy, Pendleton, Pocahontas, Randolph, Tucker
West Virginia	Aetna HealthFund HDHP/Aetna Direct Plan	HDHP Direct	224, 226, 225, N61, N63, N62	Counties of Grant, Hardy, Pendleton, Pocahontas, Randolph, Tucker

TABLE 8
SERVICE AREA EXPANSIONS WITH NEW OPTIONS AND ENROLLMENT CODES
 Blue Preferred Plus POS has added a new Standard option with a new enrollment code (See Table 6) and is expanding its service area in Missouri.

State	Plan Name	Plan Type	Plan Code	Location of Areas
Missouri	Blue Preferred Plus POS	HMO	9G1, 9G3, 9G2, 9G4, 9G5, 9G6	Adair, Bollinger, Butler, Cape Girardeau, Carter, Clark, Dent, Dunklin, Howell, Iron, Knox, Lewis, Linn, Marion, Mississippi, New Madrid, Oregon, Pemiscot, Perry, Putnam, Ralls, Reynolds, Ripley, Schuyler, Scotland, Scott, Shannon, Shelby, Stoddard, Sullivan, and Wayne counties.

TABLE 9
SERVICE AREA EXPANSIONS ADDING NEW ENROLLMENT CODES

State	FEHB Plan Name	Plan Option	2017 New Enrollment Codes	Location of Areas
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Plans or Codes With Significant Changes or That Are Terminating (Continued)

Texas	Scott and White	Standard	P84, P86, P85	Counties of Collin, Dallas, Denton, Ellis, Erath, Head, Johnson, Rockwall, Somervell, Tarrant
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Federal Benefits FastFacts

Following are Federal Benefits FastFacts.

Federal Benefits FastFacts

What to do When Your Health Plan is Terminating Coverage in Your Area or Leaving the Federal Employees Health Benefits (FEHB) Program.

There are four ways your plan's enrollment can be affected. Each may require a different response, so be sure to identify your situation.

1. Plan leaves FEHB Program entirely;
2. Plan reduces its service area and eliminates its enrollment code;
3. Plan reduces its service area and keeps its enrollment code; or
4. Plan drops an option.

*** How will I know if my enrollment is affected?** You will receive a letter from your plan stating that it is no longer participating in the FEHB Program, dropping an option, or that it is no longer providing services in your area. You can contact your Human Resources (HR) office with additional questions.

*** What do I do now that I know my enrollment is affected?** You may need to change your enrollment to another plan during Open Season or during the time period set by OPM. Follow the instructions in the letter you received from your plan.

*** My plan is leaving the FEHB Program entirely. What happens if I don't change to another plan?** If you are a Federal employee, annuitant, or Tribal employee and you do not change plans, you will be automatically enrolled into the lowest-cost nationwide plan option available as designated by OPM.

*** My plan is reducing its service area AND eliminating my enrollment code. What happens if I don't change to another plan?** If you are a Federal employee, annuitant, or Tribal employee and you do not change plans, you will be automatically enrolled into the lowest-cost nationwide plan option available as determined by OPM.

*** My plan is reducing its service area where I live/work but keeping my enrollment code. What happens if I don't change to another plan?** You will only have coverage in your area for emergency care services in the new plan year. You must travel to the plan's remaining service area to receive full coverage for your care.

*** My plan is eliminating my option. What happens if I don't change to a remaining option or to another plan?** You will be automatically enrolled into one of the plan's options that remain. If no options remain that are not High Deductible Health Plans (HDHP), you will be automatically enrolled into the lowest cost nationwide plan option as indicated by OPM. Please refer to the letter you received from your plan for more information.

*** If my High Deductible Health Plan (HDHP) is terminating coverage in my service area or is leaving the FEHB Program, what happens to my Health Savings Account (HSA) or my Health Reimbursement Arrangement (HRA)?** If you wish to continue contributing to your HSA, you must enroll in another HDHP. If you do not enroll in another HDHP, you can withdraw money from your HSA for qualified medical expenses. You should check Internal Revenue Service (IRS) guidance on use of HSA dollars for non-qualified medical expenses. You should work directly with your fiduciary to make decisions regarding your HSA.

Unless you use your HRA credits, they will be forfeited once the plan you've elected becomes effective.

*** How do I change my enrollment to another plan?** If you are a Federal employee, use your agency's online self-service system such as Employee Express, MyPay, Employee Personal Page, EBIS, etc. If you need additional help, contact your HR office.

If you are a Tribal employee, contact your Tribal Employer.

If you are a Civil Service Retirement System (CSRS) or Federal Employees Retirement System (FERS) retiree, call Open Season Express at 1.800.332.9798 or access Open Season Online at <https://retireeFEHB.opm.gov>.

Federal Benefits FastFacts (Continued)

If you receive an annuity from another retirement system, please visit www.opm.gov/healthcare-insurance/healthcare/plan-information/enroll/#annuitants for information on how to change your enrollment.

*** When does my old plan or option stop providing coverage and my new plan or option begin?** Your old plan will continue to provide benefits until the plan you've elected during Open Season or during the time period provided by OPM becomes effective. There will be no gaps in coverage

*** What are my rights if I'm pregnant or I have a chronic or disabling condition?** Under the Patients' Bill of Rights, enrollees who are seeing a specialist for a chronic or disabling condition or who are in the second or third trimester of a pregnancy have a right to continued treatment for up to 90 days of care (or treatment through the end of post-partum care) following notice that a health plan is leaving the FEHB Program.

*** How can I compare the different health plans available to me?** There are several resources available to help you compare plans.

- Compare Health Plans www.opm.gov/fehbcompare
- Health Plan Brochures - www.opm.gov/FEHBbrochures; or for Tribal employees www.opm.gov/healthcare-insurance/tribal-employers/plan-information
- Consumer's Checkbook - www.checkbook.org/newhig2/hig.cfm

*** Where can I find the plan brochures?**

- Visit www.opm.gov/FEHBbrochures; or for Tribal employees www.opm.gov/healthcare-insurance/tribal-employers/plan-information
- Call the plan directly
- Contact your HR office or Tribal Employer

*** How do I find out if my doctor is part of the health plan?** You can find provider directories at www.opm.gov/FEHBbrochures or; for Tribal employees www.opm.gov/healthcare-insurance/tribal-employers/plan-information, or call your plan, or contact your provider.

*** I have a supplemental dental plan offered through my old FEHB plan. What happens to that coverage?** Since your plan is terminating coverage, any supplemental dental and/or vision coverage that you have through your plan will also terminate. The Federal Employees Dental and Vision Insurance Program (FEDVIP)¹ offers dental and vision insurance for eligible Federal employees and retirees. To find more information about dental insurance, please visit www.opm.gov/dental. To find more information about vision insurance, please visit www.opm.gov/vision. If you are currently enrolled in FEDVIP, your FEHB plan's termination will not affect your FEDVIP enrollment.

*** I have other supplemental coverage through my old FEHB plan. What happens to that coverage?** Since your plan is terminating coverage, any supplemental coverage that you have through your plan may also terminate. Please contact your plan for more information about your supplemental coverage.

*** Where can I go for more information on Open Season?**

Visit www.opm.gov/openseason; or for Tribal employees www.opm.gov/healthcare-insurance/tribal-employers/open-season. The Open Season website will be updated with information by early November.

*** Who can I contact with additional questions?**

If you have additional questions, you can contact your carrier directly or your local HR office or Tribal employer.

¹ Tribal employees are not eligible for FEDVIP.