Federal Benefits
FastFacts for Certain
Full-time Temporary
Employees and Certain
Full-time Employees on
Intermittent and
Seasonal Work Schedules

The Federal Employees Health Benefits (FEHB) Program

- * What is the FEHB Program?
 FEHB provides comprehensive health insurance. You can choose from fee-for-service (FFS) plans, health maintenance organizations (HMOs), consumer-driven health plans (CDHPs) and high deductible health plans (HDHPs). Find more information on types of plans at www.opm.gov/insure/health/planin fo/ty pes.asp.
- * When can I enroll? New employees and employees who are newly eligible, may enroll within 60 days of becoming eligible.
- * How do I enroll? Some agencies use the Health Benefits Election Form (SF 2809) while others use an online self-service system such as Employee Express, MyPay, Employee Personal Page, EBIS, etc. Contact your HR office for details.
- * How much do I pay? What you pay is based on the plan and option you choose. Generally, premiums are shared by you and your Federal agency.

Premiums vary by plan but generally you pay about 30% and your agency pays about 70%.

You can find health insurance premiums in these materials from your HR office:

- health plan brochures
- the Guide to Federal Benefits

These materials are also available on our website at www.opm.gov/insure/health

- * Can I pay my premiums pretax? Paying premiums pre-tax (known as premium conversion) allows Federal employees to use pre-tax dollars to pay premiums for the FEHB Program. You will automatically be under premium conversion unless you elect to waive it. Federal retirees are not eligible to pay premiums with pre-tax dollars.
- * What enrollment restrictions will I have under premium conversion? You will not be allowed to change your enrollment to Self Only or cancel outside of Open Season or experiencing an FEHB-specific QLE.

* What are some important things I should know?

- There are no pre-existing condition limitations, even if you change plans;
- Each plan contracts with doctors and hospitals (known as a provider network). Your doctor may participate in one or more provider networks;
- You will reduce your out-ofpocket costs by visiting doctors and hospitals who contract with your plan. Visit your plan's website to determine

- which providers participate in the plan's network;
- FEHB coverage automatically continues each year; you do not have to reenroll;
- If you are enrolled in the Federal Flexible Spending Account Program, you may submit your health benefits copayments, coinsurance and deductibles as eligible expenses for your FSA account.
- * Are there resources I can use to help me find the right health plan? Yes, the list of resources below can help you. You can find these on our website at

www.opm.gov/insure/health

- Compare Health Plans, a tool that allows comparison of benefits of up to four plans in one view
- The Guide to Federal Benefits contains information about the FEHB Program to support your decision making process:
- Information on plan quality
 - Satisfaction ratings of customers enrolled in each plan
 - Plan effectiveness of patient care measures

* Where can I go for more details or additional information?

- Your health plan's brochure
- The Guide to Federal Benefits
- Our website at:

www.opm.gov/insure/health

Other Benefits Programs

* Am I eligible to enroll in a healthcare flexible spending account (FSAFEDS)? Yes, temporary employees and employees on seasonal or intermittent schedules who are eligible for FEHB are eligible to enroll in a healthcare flexible spending account under FSAFEDS.

For more information about FSAFEDS visit www.fsafeds.com

* Am I eligible to apply for coverage under the Federal Long Term Care Insurance Program (FLTCIP)? Yes, temporary employees and employees on seasonal or intermittent schedules who are eligible for FEHB are eligible to apply for coverage under FLTCIP.

For more information about FLTCIP visit www.ltcfeds.com

- * Am I eligible to enroll in the Federal Employees' Group Life Insurance Program (FEGLI)? No, temporary employees and employees on seasonal and intermittent schedules are not eligible to enroll in FEGLI.
- * Am I eligible to enroll in the Federal Employees Dental Vision Program (FEDVIP)? No, temporary employees and employees on seasonal and intermittent schedules are not eligible to enroll in FEDVIP.

Additional Information

What happens if I enter a Leave Without Pay or insufficient pay status?

If you enter a status in which your salary is insufficient to cover the employee share of your premium, you have two options: you may continue enrollment for up to 365 days or terminate enrollment. If you do nothing, your enrollment will continue and you will incur a debt for the premiums missed. If you choose to terminate your enrollment, please complete the SF2809, which can be found at: http://www.opm.gov/forms/pdf_fill/sf2809.pdf

If you choose to continue enrollment, you will incur a debt that is payable upon your return to duty or you may pay the premiums directly to NFC. You can find further information

here: http://www.opm.gov/healthcare-insurance/healthcare/reference-materials/reference/leave-without-pay-status-and-insufficient-pay/

What happens if LWOP lasts more than one year?

Your enrollment will terminate at the end of the pay period which includes the 365th day in consecutive leave without pay status. You will have a 31-day extension of coverage and be provided the option of converting to an individual policy offered by the carrier of your plan. You are not eligible for temporary continuation of coverage (TCC) when your coverage terminates during leave without pay status or insufficient pay. TCC is only available when your coverage terminates because of separation from employment.

You can find more information here: http://www.opm.gov/healthcare-insurance/healthcare/reference-materials/reference/termination-conversion-and-temporary-continuation-of-coverage/#convrights

What happens if I leave service?

If you lose your FEHB coverage because you separate from federal service, you may enroll under the Temporary Continuation of Coverage (TCC) provision of the FEHB law to continue your coverage for up to 18 months. Exception: you are not eligible for TCC if your separation is due to gross misconduct. Your family members who lose coverage because they are no longer eligible family members may enroll under TCC to continue FEHB coverage for up to 36 months.

What if I want to cancel my coverage?

If you participate in premium conversion, you may cancel your enrollment during open season or if you have a qualifying life event (see http://www.opm.gov/healthcare-insurance/healthcare/reference-materials/reference/enrollment/#qle for examples). You may cancel or change your enrollment at any time if you do not participate in premium conversion. You do not need to wait for the next Open Season or for you to experience a qualifying life event.

Do you want more information? Plan on joining our live webinars!

January 6 8 a.m. CST https://foodshield.connectsolutions.com/fehbexpansion_1-6-2015/
January 14 1 p.m. CST https://foodshield.connectsolutions.com/fehbexpansion_1-6-2015/

If you have been deemed eligible for Federal Employee Health Benefit (FEHB), you will receive this letter in the mail.

The Office of Personnel Management (OPM) issued a rule modifying the eligibility for enrollment under the Federal Employee Health Benefits Program (FEHB) to certain temporary, seasonal, and intermittent employees who are identified as full-time employees based on current Internal Revenue Code definitions. You are receiving this memo because the agency has reviewed employment records and determined that you are one of the temporary, seasonal, and/or intermittent employees who qualify for an offer of FEHB coverage. As a newly eligible employee, you will receive the same government contribution as full-time permanent employees receive. In addition, you will be eligible to enroll in the Flexible Spending Accounts (FSA) and Long Term Care coverage (LTC). You have 60 days from receipt of this letter to enroll in FEHB and FSA.

<u>Please Note</u>: If you are newly eligible but are presently in LWOP status, you may not enroll in FEHB until you transition to pay status. In the attached information you will find more details related to LWOP or insufficient pay status and its effect on your FEHB coverage.

If you would like to take advantage of this new opportunity, please follow the instructions on the attached flyer to complete and return a <u>SF-2809</u> to the HRO Benefits Team in Minneapolis. You can find this form and plan information and options at the <u>OPM Healthcare Plan Information website</u> or you can find a plan using the <u>PlanSmartChoice</u> websites.

If you have coverage through the Healthcare Marketplace and elect to decline FEHB, premium tax credits may be reduced. You can find further information at https://www.healthcare.gov/get-coverage/

Once you determine which plan is right for you, you can either send the form to us by fax at (612) 336-3545 or by regular mail to:

USDA APHIS MRPBS HRO Attn: Benefits 100 North 6th St, Suite 510C Minneapolis MN 55403-1588

Additional information about how to find resources and complete the form is available on the <u>HRO Benefits</u> <u>website</u>. If you still have questions, please call Earl Bilek at (612) 336-3365 or email him at Earl.E.Bilek@aphis.usda.gov.

More information can be found at the addresses below::

- SF-2809 Health Benefits Election Form www.opm.gov/forms/pdf fill/sf2809.pdf
- OPM Healthcare plan page <u>www.opm.gov/healthcare-insurance/healthcare/plan-information/compare-plans/</u>
- PlanSmartChoice <u>www.plansmartchoice.com</u>
- Flexible Spending Accounts <u>www.fsafeds.com</u>
- Long Term Care www.ltcfeds.com