Date of Issue: October 2012

Federal Employees Health Benefits (FEHB) Open Season

The 2013 Federal Employees Health Benefits (FEHB) Program Open Season will take place November 12, 2012 through December 10, 2012. During the Federal Benefits Open Season, any eligible employee may:

- Enroll in a FEHB Program.
- Change from one health plan to another.
- Cancel FEHB enrollment.
- Change enrollment from Self Only to Self and Family or from Self and Family to Self Only.
- Change participation in premium conversion (waive or begin).

Children will be covered under their parent's FEHB health plan's Self and Family enrollment until age 26. Employees with existing Self and Family plans should contact their FEHB carrier to add an eligible child to their coverage.

All Open Season FEHB changes will become effective on January 13, 2013. You may view the 2013 health insurance rates posted at: http://www.opm.gov/insure/health/rates/. Outside of the Open Season, you can enroll or make changes in a FEHB Program only in connection with Qualifying Life Events (QLEs). For additional FEHB information, visit: http://www.opm.gov/insure/health/index.asp.

Note: FEHB coverage will automatically continue from year to year for current enrollees who do not wish to make any changes as long as their health plan continues to participate. If you have received correspondence that your plan is no longer participating, you <u>must</u> choose and enroll in another plan during Open Season to be covered in 2013.

How Do I Enroll or Make an Enrollment Change? Employees wishing to enroll or change their enrollment during Open Season must do so through Employee Express online at: http://www.employeeexpress.gov; or by telephone voice response system at 1-888-880-0412 (TDD); or by calling 1-478-757-3117.

Note: The NASA Shared Services Center (NSSC) does not accept Standard Form (SF) 2809, Health Benefits Election Form – FEHB for open season changes. These changes must be made through Employee Express.

As changes are made in Employee Express, a record of the change will automatically be sent to your eOPF. You will receive an e-mail stating that a new document was added to your eOPF. The attached file (Benefits Change Form.pdf) is a sample of the document you will find in your eOPF.

What is Employee Express? Employee Express is an automated system that puts you in control of processing your own health benefits, along with other discretionary personnel and payroll actions. Use of Employee Express is mandatory to make FEHB changes during the Federal Benefits Open Season. If you have lost or forgotten your Employee Express password, you may obtain a new one by clicking on the Forgot Login ID or Password link on the Employee Express home page.

What is Premium Conversion? Premium conversion uses Federal tax rules to let employees deduct their share of health insurance premiums from their taxable income, thereby reducing their taxes. All employees are automatically enrolled in premium conversion. Employees wanting to waive premium conversion during open season must do so through Employee Express at: http://www.employeeexpress.gov. To access the premium conversion module in Employee Express, from the Employee Express Main Menu, under the Payroll-Personnel Actions heading, click the FEHB Premium Conversion link.

What is PlanSmartChoice™? To assist you in making an informed decision when selecting benefit options for you and your family, you may access the online PlanSmartChoice™ health care decision solution tool. You may access the PlanSmartChoice™ tool during Open Season at: https://www.plansmartchoice.com/.

Any questions concerning this notice, contact:

NSSC Customer Contact Center

1-877-677-2123 (1-877-NSSC123) or nssc-contactcenter@nasa.gov

NSEN-3000-0067

Employee Express

Health Benefits History Report

This is an official document to be filed on the right side of the employee's official Personnel Folder.

Effective Date:									
Employee Name (Last, First, MI):					SSN	Gender	DOB		Married
Home Mailing Address				Nature of Transaction:					
				New Enrollment Code:					
				New Plan Name:					
Name of Family Members		Zip	Date of Birth		Gender	Relationship		SSN	
Medicare Coverage A?		Medicare Coverage B?				TRICARE?			
Other Insurance?	Other Private Insurance: Other Insurance Policy #:								
Present Plan Name			Enrollment Code		Event Code		Date of Event		
Acceptance Date	CPDF Code			Personnel Office ID			Payroll Office Number		