

Federal Employees Health Benefits (FEHB) Program Open Season

The 2018 Federal Employees Health Benefits (FEHB) Program Open Season will take place Monday, November 13, 2017, through Monday, December 11, 2017. All Open Season FEHB changes will become effective on January 7, 2018. During Open Season, any eligible employee may:

- Enroll in a FEHB Program
- Change from one health plan to another
- Cancel FEHB enrollment
- Change enrollment plans
- Change participation in premium conversion (waive or begin)

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 must choose and enroll in another plan during Open Season to be covered in 2018.**

What are the 2018 Changes?

Important changes for FEHB that take effect in 2018 include the following:

- There are health care plans leaving the FEHB Program.
- Some plans are reducing service areas and/or eliminating some enrollment codes.

Important: If your 2017 health insurance carrier is not participating in the FEHB Program in 2018, you must enroll in a new plan during Open Season or you will be enrolled in the Standard Option of the GEHA Benefit Plan. If your plan is reducing its service area, you should select a new plan with services local to you or you will be required to travel to your plan provider's service area for health services in 2018. If your plan is terminating options and enrollment codes, you may choose a new plan or be switched automatically to the plan's selected code.

For information on the FEHB changes listed by state and type of change, please refer to the tables provided by the Office of Personnel Management (OPM) in Attachment 1, FEHB Program. Also refer to the other attachment entitled *Federal Benefits Fast Facts: What to do When Your Health Plan is Terminating Coverage in Your Area or Leaving the Federal Employees Health Benefits (FEHB) Program*.

What are the 2018 Premiums?

You may view the 2018 health insurance rates on the [OPM Healthcare Plan Information](#) page. You may also locate this page by visiting the OPM Healthcare Insurance page at:

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www.opm.gov/healthcare-insurance. In the left navigation pane, click the **Healthcare** drop-down menu, then click the **Plan Information** link and select the **Premiums** link.

The Office of Personnel Management said premiums for the 2018 FEHB Program will rise an average 4 percent. In 2018, the FEHB Program will offer 262 health plan choices Government-wide.

Important: If you anticipate a Qualifying Life Event (QLE), such as a loss of health insurance that may create a gap in coverage, please contact the NASA Shared Services Center (NSSC) Customer Contact Center for counseling at 1-877-677-2123 (1-877-NSSC123) or nssc-contactcenter@nasa.gov. Our benefits counselors can help you when electing new coverage using Employee Express for QLEs.

What are Recent Coverage Options?

In the past few years, the most significant change has been the addition of the Self Plus One. Self Plus One is an enrollment type in the FEHB Program that allows enrollees to cover themselves and one eligible family member they designate to be covered. Family member eligibility for a Self Plus One enrollment is the same as for a Self and Family enrollment including the following:

- A family member eligible to be covered under a Self Plus One enrollment includes either a spouse or a child under age 26.
- A child age 26 or over who is deemed incapable of self-support because of a mental or physical disability that existed before age 26 is also an eligible family member.

For additional information, you may refer to the [OPM Special Initiatives Self Plus One](http://www.opm.gov/healthcare-insurance/special-initiatives/self-plus-one) page. You may also locate this page at: www.opm.gov/healthcare-insurance/special-initiatives/self-plus-one/. Make sure to compare Self Plus One and Family rates to confirm you select the most competitive option. Some insurance carriers have higher rates for Self Plus One than for Self Plus Family.

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: www.employeeexpress.gov. If you are making a change to your FEHB during Open Season and are scheduled to retire before January 7, 2018, you must submit a Standard Form (SF) 2809, Health Benefits Election Form – FEHB directly to the NSSC with your retirement application package for processing **no later than December 11, 2017**.

Note: The NSSC does not accept Standard Form (SF) 2809, Health Benefits Election Form – FEHB, for Open Season changes for employees who anticipate remaining on the rolls beyond January 7, 2018. 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 electronic Official Personnel Folder (eOPF). You will have the opportunity to print a receipt or receive one via e-mail.

Can I Make FEHB Changes Outside of Open Season?

For additional information, you may refer to the [OPM Changes You Can Make Outside of Open Season](#) page. You may also locate this page by visiting the OPM Healthcare Insurance page at: www.opm.gov/healthcare-insurance. Click the **Healthcare** drop-down menu, then click the **Enrollment** link. Under the **Instructions for Making an Open Season Enrollment Change** heading, please click the **What Changes You Can Make Outside of Open Season** link.

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, unless you are retiring prior to January 7, 2018. If you have lost or forgotten your Employee Express password, you may obtain a new one by clicking on the **Forgot Login ID** or **Forgot Password** link on the Employee Express home page at: www.employeeexpress.gov.

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. If you waive premium conversion, the amount of taxes you pay will increase, as you will no longer benefit from pretax dollars. Employees wishing to waive premium conversion during Open Season must do so through Employee Express at: www.employeeexpress.gov. To access the premium conversion module in Employee Express, from the Employee Express **Home** screen, under the **Payroll / Personnel** heading, click the **Federal Employees Health Benefits** link. Then, click the **Federal Employees Health Benefits (FEHB) Premium Conversion** header. Instructions will auto-populate within the open box below.

Need Help Choosing an Insurance Plan?

While the Benefits Counselors at the NSSC are not permitted to make recommendations as to the best plan for you, there are two tools available to assist you in making an informed decision when selecting benefit options for you and your family during Open Season. Links to the tools are found in [Employee Express](#) at www.employeeexpress.gov.

- **OPM Health & Insurance Compare Plans** tool

You may access this tool through [Employee Express](#) by clicking the **Related Links** link, then clicking the **OPM FEHB Plan Comparison Tool** link. You can also find the tool at: <https://www.opm.gov/healthcare-insurance/healthcare/plan-information/compare-plans/>.

- **Consumers' Checkbook** tool

NASA employees must access this tool through [Employee Express](#). Click the **Related Links** link, then click the **FEHB Plan Comparison Website – Checkbook** link. After you access the link through Employee Express and select NASA as your agency, you are automatically authenticated into the tool. To ensure free access to the tool, you should not use any other public links.

For questions concerning this notice, contact:

NSSC Customer Contact Center

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

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 2018 as determined by OPM).

State	Plan Name	2017 Enrollment Code	General Location
Illinois	Blue Cross and Blue Shield of Illinois	A21, A23, A22	Chicago Illinois Area
New Mexico	New Mexico Blue HMO Preferred	Q11, Q13, Q12 Q14, Q16, Q15	All of New Mexico
Ohio	Paramount Health Care	N81, N83, N82	Northwest Ohio
Texas	Aetna Whole Health	ES1, ES3, ES2	Houston Area
Texas	United Healthcare Benefits of Texas, Inc.	GF1, GF3, GF2	San Antonio Area
Virginia	Aetna Whole Health	J91, J93, J92	Newport News Area
Virginia	Innovation Health Plan	LQ1, LQ3, LQ2	Northern Virginia
Wisconsin	Aetna Whole Health	F71, F73, F72	Milwaukee Area

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 2018 as determined by OPM).

State	Plan Name	2017 Enrollment Code	Area Dropped
Washington	Aetna Open Access	C31, C33, C32	All of Washington

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 2018.

State	Plan Name	2017 Enrollment Code	Area Dropped
Idaho	SelectHealth, Inc.	SF1, SF3, SF2, SF4, SF6, SF5	State of Idaho
Virginia	Aetna Open Access	JN1, JN3, JN2, JN4, JN6, JN5	Counties of Amelia, Charles City, Charlotte, Chesterfield, Cumberland, Dinwiddie, Goochland, Hanover, Henrico, King William, Louisa, Lunenburg, New Kent, Nottoway, Powhatan, Prince Edward, and Prince George Cities of Colonial Heights, Hopewell, Petersburg and Richmond Towns of Buckingham, Arvonnia, Dillwyn and New Canton

TABLE 4
PLANS TERMINATING OPTION AND ENROLLMENT CODES
Enrollees in the plan's terminating option will be automatically enrolled into the plan option that is identified in the table below unless they enroll in another plan during Open Season.

State	Plan Name	Terminating Options (end of 2017)	Terminating Codes (end of 2017)	Option and Codes for 2018
Florida	AvMed	High	ML1, ML3, ML2	Standard ML4, ML6, ML5
Washington	Kaiser Permanente Washington Options Federal	High	VT1, VT3, VT2	Standard Option L11, L13, L12*

***Kaiser Permanente Washington Options Federal Plan high deductible option (L14, L16, and L15) also remains.**

TABLE 5
PLANS ADDING NEW OPTIONS AND ENROLLMENT CODES

State	Plan Name	New Option	2018 Enrollment Codes	General Location
California	Health Net of California	Basic	T41, T43, T42	Northern California
Colorado	Humana Health Plan, Inc.	Basic	RZ1, RZ3, RZ2	Denver
			R21, R23, R22	Colorado Springs
Georgia	Humana Employers Health Plan of Georgia, Inc.	Basic	Q71, Q73, Q72	Atlanta
			RJ1, RJ3, RJ2	Macon
			RM1, RM3, RM2	Columbus
Illinois	Humana Health Plan, Inc.	Basic	RW1, RW3, RW2	Chicago
			AB1, AB3, AB2	Central and North Western Illinois
Maryland	Kaiser Foundation Health Plan of the Mid-Atlantic States	Basic	T71, T73, T72	Baltimore Area

Ohio	Medical Mutual of Ohio (formerly Health Span Integrated Care)*	Basic	UX1, UX3, UX2	Northeast Ohio
Texas	Humana Health Plan of Texas, Inc.	Basic	QX1, QX3, QX2	San Antonio
			QY1, QY3, QY2	Austin
			Q21, Q23, Q22	Corpus Christi
			Q61, Q63, Q62	Houston
Texas	Scott & White	Basic	A81, A83, A82	Central and West Texas area
			P81, P83, P82	North Texas area
Virginia	Kaiser Foundation Health Plan of the Mid-Atlantic States	Basic	T71, T73, T72	Northern Virginia
District of Columbia	Kaiser Foundation Health Plan of the Mid-Atlantic States	Basic	T71, T73, T72	All of District of Columbia

***Plan name also changing - see Table 8**

**TABLE 6
SERVICE AREA EXPANSIONS WITHOUT NEW ENROLLMENT CODES**

State	Plan Name	Plan Option	2018 Enrollment Codes	Location of Areas
Florida	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	LS1, LS3, LS2	Entire state of Florida
Florida	United Healthcare Insurance Company – Choice HMO	High	KK1, KK3, KK2	Entire state of Florida
Idaho	Aetna Health of Utah, dba Altius Health Plan	High, Standard, HDHP	9K1, 9K3, 9K2 9K4, 9K6, 9K5 DK4, DK6,	Counties of Blaine, Boise, Camas, Cassia, Clark, Custer, Fremont, Gooding, Jerome, Lincoln, Minidoka, Owyhee, Teton, Twin Falls and Valley

			DK5	
Illinois	Blue Preferred	High, Standard	9G1, 9G2, 9G3, 9G4, 9G5, 9G6	Monroe County
Iowa	United Healthcare Insurance Company – Choice HMO	High	LJ1, LJ3, LJ2	Entire state of Iowa
Iowa	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	N71, N73, N72	Entire state of Iowa
Kentucky	United Healthcare Insurance Company – Choice HMO	High	LJ1, LJ3, LJ2	Entire State of Kentucky
Kentucky	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	N71, N73, N72	Entire State of Kentucky
Nevada	United Healthcare Insurance Company – Choice HMO	High	KT1, KT3, KT2	Entire State of Nevada
Nevada	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	LU1, LU3, LU2	Entire state of Nevada
North Carolina	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	LS1, LS3, LS2	Entire state of North Carolina
North Carolina	United Healthcare Insurance Company – Choice HMO	High	KK1, KK3, KK2	Entire state of North Carolina
Oregon	United Healthcare Insurance Company – Choice HMO	High	KT1, KT3, KT2	Entire state of Oregon
Oregon	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	LU1, LU3, LU2	Entire state of Oregon

Pennsylvania	United Healthcare Insurance Company – Choice HMO	High	LR1, LR3, LR2	Entire state of Pennsylvania
Tennessee	United Healthcare Insurance Company – Choice HMO	High	KK1, KK3, KK2	Entire state of Tennessee
Tennessee	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	LS1, LS3, LS2	Entire state of Tennessee
Virginia	United Healthcare Insurance Company – Choice HMO	High	LR1, LR3, LR2	Entire state of Virginia
Washington	United Healthcare Insurance Company – Choice HMO	High	KT1, KT3, KT2	Entire state of Washington
Washington	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	LU1, LU3, LU2	Entire state of Washington
Wyoming	Aetna Health of Utah dba Altius Health Plan	High, Standard, HDHP	9K1, 9K3, 9K2, 9K4, 9K6, 9K5 DK1, DK3, DK2	Counties of Lincoln and Sweetwater

TABLE 7
SERVICE AREA EXPANSIONS ADDING
NEW ENROLLMENT CODES

State	FEHB Plan Name	Plan Option	2018 New Enrollment Codes	Location of Areas
Arizona	Humana Coverage First/ Humana Value Plan	CDHP Value Plan	R61, R63, R62 R64, R66, R65	Phoenix Area - Maricopa and Pinal Counties

Arizona	Humana Coverage First/ Humana Value Plan	CDHP Value Plan	R91, R93, R92 R94, R96, R95	Tucson Area - Pima County
District of Columbia	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	V41, V43, V42	All of District of Columbia
Georgia	Humana Coverage First/ Humana Value Plan	CDHP Value Plan	S91, S93, S92, S94, S96, S95	Muscogee County
Indiana	Humana Coverage First/ Humana Value Plan	CDHP	TC1, TC3, TC2	Counties of Clark, Floyd, Harrison, Scott and Washington
Kentucky	Humana Coverage First/ Humana Value Plan	CDHP	TC1, TC3, TC2	Counties of Bullitt, Carroll, Green, Hardin, Henry, Jefferson, Larue, Meade, Nelson, Marion, Oldham, Shelby, Spencer, Taylor, Trimble, and Washington
Maryland	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	V41, V43, V42	Entire state of Maryland
Pennsylvania	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	V41, V43, V42	Entire state of Pennsylvania
Tennessee	Humana Coverage First/ Humana Value Plan	CDHP Value Plan	TT1, TT3, TT2 TT4, TT6, TT5	Counties of Anderson, Blount, Campbell, Carter, Claiborne, Cocke, Grainger, Greene, Hamblen, Hancock, Hawkins, Jefferson, Johnson, Knox, Loudon, Morgan, Roane, Scott, Sevier, Sullivan, Unicoi, Union, and Washington
Texas	Humana Coverage First/ Humana Value Plan	CDHP Value Plan	T31, T33, T32 T34, T36, T35	Counties of Austin, Brazoria, Chambers, Colorado, Fayette, Fort Bend, Galveston, Harris, Liberty, Montgomery, Waller and Wharton

Virginia	United Healthcare Insurance Company, Inc. (Choice Plus HDHP)	HDHP	V41, V43, V42	Entire state of Virginia
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**TABLE 8
PLAN NAME CHANGES**

State	2017 Plan Name (Old)	2018 Plan Name (New)	Enrollment Codes	Location of Areas
Ohio	Health Span Integrated Care	Medical Mutual of Ohio	641, 643, 642 644, 646, 645	Northeast Ohio Counties of Cuyahoga, Geauga, Lake, Lorain, Mahoning, Medina, Portage, Stark Summit, Trumbull, and Wayne

**TABLE 9
NEW PLAN ENTERING THE FEHB PROGRAM**

State	FEHB Plan Name	Plan Option	2018 New Enrollment Codes	Location of Areas
Georgia	Blue Open Access POS	High	QM1, QM3, QM2	Atlanta metro area Counties: Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Hall, Haralson, Heard, Henry, Lamar, Meriwether, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, and Walton Athens area Counties: Clarke, Madison, Oconee, and Oglethorpe

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>.

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/fehcompare
- 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.

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Tribal employees are not eligible for FEDVIP.