



**Retirement and Insurance Service  
Benefits Administration Letter**

Number: 00-219

Date: October 30, 2000

**Subject: Federal Employees Health Benefits (FEHB) Program: Opportunity for Enrollees of Family Health Plan Cooperative, Enrollment Code WH, to Change Enrollment - CORRECTION**

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This is to advise you that Family Health Plan Cooperative, enrollment code WH, in the state of Wisconsin, is liquidating and will no longer participate in the FEHB Program after October 31, 2000.

We are authorizing an opportunity for Family Health Plan Cooperative enrollees to change their enrollment to another participating plan. The opportunity to change enrollment will begin immediately and continue through November 13, 2000. If enrollees do not change plans during this special period, their 2000 enrollment (rates and benefits) will remain the same except that their provider network will change and Compcare Health Services Insurance Corporation ("CompcareBlue") will administer the Family Health Plan contract. **Do not allow members to enroll in other HMO's that notified us that they are terminating December 31, 2000.**

**Enrollees wishing to change plans will have until November 13, 2000 to submit a Standard Form (SF) 2809. The effective date of new coverage should be made retroactive to the pay period beginning on October 22, 2000. Enrollees who do not change will continue to receive benefits under CompcareBlue only for the remainder of the 2000 contract year. These enrollees must make a regular open season election in order to continue to receive benefits under the FEHB Program for the 2001 contract year. The 2000 open season is scheduled for November 13, 2000 – December 11, 2000.**

The Plan will send enrollees a letter to advise them of this opportunity to change enrollment. We have attached a copy of that letter for your information.

Thank you for your cooperation in this matter.

A handwritten signature in black ink, reading "Abby L. Block". The signature is written in a cursive style with a long horizontal flourish at the end.

Abby L. Block, Chief  
Insurance Policy  
and Information Division



United States  
**Office of  
Personnel Management**

Washington, D.C. 20415

In Reply Refer To:

Your Reference:

October 13, 2000

**TO ALL FEDERAL ENROLLEES OF  
FAMILY HEALTH PLAN COOPERATIVE**

**OCTOBER 16-NOVEMBER 12, 2000**

Family Health Plan is sending you this important notice at the request of the United States Office of Personnel Management (OPM). Family Health Plan, enrollment code WH, will not be offered through the Federal Employees Health Benefits (FEHB) Program after October 31, 2000 in the State of Wisconsin.

You must change plans during this special enrollment opportunity or during the regular Open Season beginning November 13, 2000. If you do not change plans now your 2000 enrollment will remain the same except your provider network will change and Compcare Health Services Insurance Corporation ("CompcareBlue") will administer the contract. When you change plans, please be sure to select a plan that will be available in 2001. Your agency will not accept enrollments in plans that are not available in 2001.

Please contact your personnel office or visit the FEHB web site ([www.opm.gov/insure](http://www.opm.gov/insure)) to see plan brochures and obtain valuable information to help you choose a health plan.

**TRANSITIONAL CARE UNDER THE PATIENTS' BILL OF RIGHTS**

If you (or a family member) have a chronic or disabling condition, or are in the second or third trimester of pregnancy, you have a right to continue seeing your specialist for up to 90 days from this notice or through the end of your post-partum care. Contact your new plan so it can help coordinate your transitional care.

**IF YOU ARE AN EMPLOYEE**

You should contact your personnel office and enroll in a new plan before the last day of the pay period that. Coverage under your new plan may be effective retroactive to October 16, 2000. If you do not enroll by the Special Open Season date, you will not have any health benefits coverage.

**IF YOU ARE AN ANNUITANT**

Annuitants under the Civil Service Retirement System (CSRS) or Federal Employees Retirement System (FERS), should call the toll-free number at 1-888-767-6738 to make your enrollment change, as soon as possible. Please have your CSRS or FERS annuity claim number and your Social Security Number available when calling the toll-free number. If you do not elect a new plan for 2001 OPM will deem that you have elected to enroll in the standard option of the Blue Cross and Blue Shield Service Benefit Plan. This will ensure your continued coverage and eligibility to participate in the FEHB Program. If Blue Cross and Blue Shield is the plan you want, don't wait for OPM to enroll you. You should make your selection now to avoid a delay in receiving your plan identification card. If you are an annuitant of another Federal retirement system, you must contact that system for assistance.

Thank you for your cooperation in this matter.

U.S. Office of Personnel Management  
Office of Insurance Programs