

# Preparing Your Benefit Proposal

## 2004 FEHB Proposal Instructions

Please send the following material by **June 2, 2003**:

Your benefit proposal must be complete. The timeframes for concluding benefit negotiations are firm and we cannot consider late benefit proposals. Your actual benefit proposal should include:

- A plain language description of each proposed change (in worksheet format) and the revised language for your 2004 brochure;
- A plain language description of each proposed clarification (in worksheet format) and the revised language for your 2004 brochure; and
- A signed contracting officials form.

If there are, or you anticipate, significant changes to your benefit package, please discuss them with your OPM contract specialist before you prepare your submission.

### Benefit Changes

Your proposal must include a narrative description of each proposed benefit change. You must show all changes, however slight, that result in an increase or decrease in benefits as benefit changes, even if there is no rate change. Please answer the following questions in worksheet format for each proposed benefit change. Indicate if a particular question does not apply and use a separate page for each change you propose. We will return any incorrectly formatted submissions. ***We require the following format:***

- Describe the benefit change completely. Show the proposed brochure language, including the “How we change for 2004” section in “plain language” that is, in the active voice and from the enrollee’s perspective. Show clearly how the change will affect members. Be sure to show the complete range of the change. For instance, if you are proposing to add an inpatient hospital copay, indicate whether this change will also apply to inpatient hospitalizations under the emergency benefit. If there are two or more changes to the same benefit, please show each change clearly.
- Describe the rationale or reasoning for the proposed benefit change.
- State the actuarial value of the change, and whether the change represents an increase or decrease in (a) the existing benefit, and (b) your overall benefit package. If an increase, describe whether any other benefit offsets your proposal. Include the cost impact of this change as a biweekly amount for the Self Only and Self and Family rate. If there is no cost impact or if the proposal involves a cost trade-off with another benefit change, show the trade-off or a cost of zero, as appropriate.

## **Benefit Clarifications**

**Clarifications are not benefit changes.** Clarifications help enrollees understand how a benefit is covered. For each clarification:

- Show the current and proposed language for the benefit you propose to clarify; reference all portions of the brochure affected by the clarification. Prepare a separate worksheet for each proposed clarification. When you have more than one clarification to the same benefit you may combine them but you must present the worksheet clearly. Remember to use plain language.
- Explain the reason for the benefit clarification.

## Carrier Contracting Officials

The Office of Personnel Management (OPM) will not accept any contractual action from

\_\_\_\_\_ (Carrier),  
including those involving rates and benefits, unless it is signed by one of the persons named below (including the executor of this form), or on an amended form accepted by OPM. This list of contracting officials will remain in effect until the carrier amends or revises it.

The people named below have the authority to sign a contract or otherwise to bind the Carrier

for \_\_\_\_\_ (Plan)

Enrollment code(s): \_\_\_\_\_

Typed name	Title	Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

By: \_\_\_\_\_  
(Signature of contracting official) (Date)

\_\_\_\_\_  
(Typed name and title)

\_\_\_\_\_  
(Phone number) (FAX Number)

\_\_\_\_\_  
(Email address)