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

FEHB Program Carrier Letter All Carriers

Letter No. 1999-041 Date: August 30, 1999

Fee-for-service [35] Experience-rated HMO [34] Community-rated [33]

SUBJECT: Electronic Enrollment

This letter outlines the major changes we have made to the electronic enrollment system for the upcoming Open Season. The individual file layout OPM-Macon uses to send changes to carriers has been updated. The changes for 2000 are listed in Enclosure one.

Enclosure one also contains information on testing electronic transmissions and e-mail. This year, OPM-Macon will send you both test data files and e-mails to help you process enrollment changes. Last year, we learned that although the electronic enrollment information was successfully sent, several carriers did not process the information correctly. We expect you to process enrollment change information quickly and efficiently. It is very important that you read, understand and use the information in this letter's enclosures.

Enclosure two provides information on how data is transmitted, as well as the schedule OPM-Macon will use to transmit data this Open Season.

Enclosure three contains the layout for the file header layout. This file is used to summarize the individual file records that accompany a carrier's weekly transmission. The file header layout is the electronic version of the Standard Form 2811, the Transmittal and Summary Report to Carrier. Enclosure three also contains a question and answer section explaining the file header layout in more detail. Please note that the file header layout is not changing from last year.

Enclosure four contains the two individual file layouts that OPM-Macon uses to transmit FEHB members' enrollment changes. The individual file layouts have changed for this year; please review them carefully. Enclosure five contains a notes section and a question and answer session for the individual file layouts.

All participating carriers must be set up to process electronic enrollment transactions. If you are an existing carrier, you should have a connection already established with OPM-Macon. If you are a new carrier for contract year 2000 or need to establish a new connection, please contact Chris Selle at OPM-Macon at (912)-744-2115. Please review

Enclosure six, which outlines the technical specifications for electronic enrollment. If you are a new carrier for contract year 2000, you must have your system in place by September 6, 1999.

OPM-Macon will begin testing carriers' systems on September 6, 1999. When you have made the changes to the individual file layout, you should be able to process information that is sent to you in the format found in Enclosure six. Please contact Chris Selle of OPM-Macon sometime during the week starting September 6, 1999, to begin testing.

When you contact OPM-Macon, they will send you fictitious enrollment records for your plan's enrollment code(s). In order to prepare for the upcoming Open Season, we expect you to enter these fictitious enrollments into your enrollment system as a test, and then delete them once they have been successfully processed. Once you have successfully tested the new file layout by processing the fictitious enrollments, please notify your contract specialist at their e-mail address and Mike Hodges at millower. millower.

Enclosure seven contains information provided by a carrier that has completely automated the electronic enrollment process. We hope that this "best practice" will help you automate your electronic enrollments.

OPM-Macon will begin sending weekly reports the week beginning October 4, 1999. Enclosure eight is a list of which carriers will receive transmissions on which day of the week. If you are a new carrier, or would like to request a different day of the week to receive transmissions, please contact Chris Selle at (912) 744-2115.

Enclosure nine contains a list of Federal agencies participating in electronic enrollment, and their agency identifiers. The agency identifier field is explained in Enclosure three.

If you have further questions regarding the FEHB and Employee Express, please contact Mike Hodges or Dean Schleicher at (202) 606-0745. For information about establishing communications or testing Employee Express, please contact Chris Selle at OPM Macon at (912) 744-2115.

Sincerely,

Frank D. Titus Assistant Director for Insurance Programs

Enclosures

Enclosures

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Two -	Transmitting data (2 pages)
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Enclosure One

Electronic Enrollment Overview

OPM is making the following changes so that the attached file layout is consistent with the new Standard Form (SF) 2809. Please note that in enclosure four, any changes that are new for year 2000 are boldfaced and marked with an *.

New for FEHB 2000

- 1. We expanded the FEHB DAYTIME PHONE number field from 10 digits to 17 digits.
- 2. We added a FEHB OTHER INSURANCE POLICY HOLDER NAME data element. This field indicates the policy holder name for any other insurance an employee might have.
- 3. We added FEHB MEDICARE-A SPOUSE and FEHB MEDICARE-B SPOUSE data elements. These fields indicate whether the employee's or annuitant's spouse has Medicare coverage.
- 4. We added a Foreign/OverSeas Address Indicator data element. If an employee or annuitant has a foreign home address, this field will show a "Y". If an employee or annuitant does not have a foreign home address, this field will show a "N" or a blank space.

Purpose of electronic enrollment

OPM created file layouts to send enrollment information electronically to carriers. Our goal is to ensure that when an enrollee or annuitant makes an enrollment change, you will receive the same information both electronically and on paper. When an enrollee or annuitant makes an enrollment change, the information is sorted and stored at OPM-Macon. OPM-Macon will send you the enrollment changes that affect your plan. OPM-Macon does not verify the enrollment information they receive, other than the validity of the carriers' FEHB enrollment codes.

Testing and administration

Most carriers have established a modem connection with OPM-Macon. However, if you are a new carrier for contract year 2000 or wish to re-establish a connection, you must contact OPM-Macon. Once your connection is established and you have updated the file layout, you must contact OPM-Macon and request a test file. You should call OPM-Macon sometime during the week beginning September 6, 1999, to receive the test file.

The test file will contain individual file layouts filled with fictitious information. These files will contain start and change actions (see enclosure five for further explanation of these actions) for fictitious enrollees. It is important that you enter this fictitious information into your system during a trial run. Although the enrollment information will not be real, by treating it as if it were your plan can identify any difficulties in processing electronic enrollments. The test will also include stop actions to remove the fictitious enrollments from your system at the conclusion of your test.

Last year, many carriers tested successfully but did not attempt to process enrollments until the Open Season began. Since it took them time to learn how to process the enrollments, they were not able to process enrollee and annuitant enrollments in a timely fashion. We urge carriers not to let this occur. You will be receiving enrollment records 7-10 days after an enrollee makes a change. If you delay processing for several weeks, the purpose of sending the changes electronically is defeated. Enclosure seven contains guidelines on how one FEHB carrier was able to automate the processing of electronic enrollment transactions into their enrollment system. We are sharing this "best practice" to give you a possible solution when you attempt to automate your processes.

E-mail

Starting this year, when OPM-Macon sends electronic enrollment transaction to a carrier they will also send you an e-mail. OPM-Macon will send an e-mail to the designated plan contact, the enrollment contact, and your OPM contract specialist. Although you should check your system every week for enrollment changes, these e-mails will serve as a reminder. See Enclosure eight for when you will receive your transmissions.

Enclosure Two Transmitting data

There are three sources of electronic information that we will send to you:

- \$ Federal agencies can transmit their FEHB data directly to OPM-Macon, who then forwards these changes to you. These records are called Agency Generated Records. The abbreviation for Agency Generated Records in the file layout is AG.
- \$ Employee Express is a system that some employees can use when making enrollment changes. This system allows the employees to contact OPM-Macon directly with their enrollment changes. OPM-Macon then transfers the information to carriers. The abbreviation for Employee Express in the file layout is EE.
- \$ Open Season Express is used by annuitants. The National Computer Service (NCS) receives annuitant changes, and forwards them to OPM-Macon, who then forwards the changes to you. The abbreviation for Open Season Express in the file layout is OE.

OPM-Macon compiles all enrollment transactions from these sources, and then forwards them to carriers. OPM-Macon sends enrollment changes weekly to both the gaining (FEHB Enrollment Code) and losing (FEHB Present Enrollment Code) carrier each week.

OPM-Macon will begin transmitting files the week beginning October 4, 1999. If you do not have any changes during a given week from the week beginning October 4, 1999, through the week ending January 30, 2000, OPM-Macon will send you a "null file". From January 30, 2000 until the next Open Season, OPM-Macon will only send you a report if there is enrollment activity to report.

Each data transmission from OPM-Macon will contain a header record and will be sorted by Report Number, Payroll Office ID, and information source (i.e., Agency Generated Record, Employee Express, or Open Season Express).

The naming conventions used for the files are based on the 8 character creation date, followed by the carrier enrollment code. Please note that the naming convention itself does not appear in the file layout. Since all files are created on Sunday, here are some examples of files going to carrier codes FP and 10: 06252000.FP, 07082000.10.

Examples of file names sent:

Oct. 4 - 8	All carriers receive a file named 10032000.[carrier code]
Oct Dec.	Process continues weekly
Jan. 3 - 7	All carriers receive a file named 01022000.[carrier code]
Jan. 10 -14	All carriers receive a file named 01092000.[carrier code]
Jan. 24- 28	All carriers receive a file named 01232000.[carrier code]

Please note:

During the rest of the year, you will only receive a file when there is data to transmit.

Enclosure Three FEHB Carrier File Header Layout

Each transmission you receive will contain a FEHB Carrier File Header Layout. This is a summary report of all the individual files in a given transmission. It serves the same function as the Standard Form (SF) 2811, Transmittal and Summary report.

Batch/Header Record (replaces the 2811)

FIELD NAME	LENGTH	POSITION
Carrier Name	35	1- 35
Carrier Code	2	36- 37
Total Number of Transactions	12	38- 49
Total Number of Starts	6	50- 55
Total Number of Changes	6	56- 61
Total Number of Stops	6	62- 67
Certification Date (MMDDYYYY)	8	68- 75
Filler	630	76-705
Report Number	15	706-720

FEHB Carrier File Header Field Questions and Answers

1. What is a Certification Date?

The Certification Date is the date OPM-Macon creates the carrier file for transmission. OPM-Macon will prepare Carrier files each Sunday. OPM-Macon begins transferring files to carriers each Monday, starting at 8:00 a.m.

2. What is Filler?

Filler is blank spaces in the file. In the Header File, positions 76-705 are filler.

3. What is the Report Number?

The Report Number is generated by OPM-Macon for both Header and Individual records. It has 15 positions:

Position:	Description:	Value:
1-2	System	AG = Agency Generated Record
		EE = Employee Express
		OE =Open Season Express
3-5	Agency	Agency identifier
6-9	Fiscal Year	Numeric value
10-15	Sequential No.	Numeric value

Example: The first report for fiscal year 2000 from the Department of Transportation (in the Employee Express system) is: EEDOT200000001.

The Agency Identifier will be generated by Macon and sent to the carriers for their documentation when a new agency is added. The current list of agencies can be found in Enclosure nine.

The Sequential No. is incremented each time Macon sends a file to a carrier. The Sequential No. starts with 000001 the week beginning October 4th and is incremented each time Macon sends the carrier a file.

Sample Report Number for DoD Demo	AGDD12000000001
Sample Report Number Employee Express	EEDOD2000000001
Sample Report Number for annuitants	OEOPM2000000001

Please note: Carrier file headers will always list the three systems alphabetically, i.e., Agency Generated records will come first, followed by Employee Express records, then Open Season Express records. Please see Enclosure nine for a list of federal agencies that use electronic enrollment and the system (AG, EE, or OE) that they use.

4. How often will I receive reports?

OPM-Macon transmits data weekly to each carrier. Report number 000001 will be transmitted the week beginning October 4th. OPM-Macon will continue to send a file each week, through the week ending January 29. Each carrier, therefore, will receive report numbers 000001 through 000017. All carriers will receive these first 17 files, even though some files may contain no data.

For the rest of the year (up until the next Open Season), OPM-Macon will transmit only as needed, and the report numbers will increment each time a new file is created. Report number 18 might not come for several weeks after report 17 if no actions occurred for a particular carrier.

5. Will a carrier receive information if there is no enrollment activity to report?

Each carrier will receive a report once a week from the week beginning October 4th through the week ending January 29th. During this time frame, if a carrier has no enrollment activity, they will receive a carrier file header that contains null records. After January 29th, carriers will only receive a carrier file header from OPM-Macon if there is enrollment activity to report.

6. What do the Null records in the carrier file header look like?

If there is no data from an Agency Generated record (AG), Employee Express (EE), or Open Season Express (OE), the carrier file header will be the only record transmitted to the carrier. This is referred to as a null record. The number of transactions (positions 38-49), starts (positions 50-55), changes (positions 56-61), and stops (positions 62-67) will all contain zeros, to indicate no records.

Example: Anytown HMO, code XX, did not have any enrollment changes for the report that was prepared on November 14, 1999, the seventh report for this carrier. The carrier file header would read:

Anytown HMO, XX, (30 zeros), 11141999, (630 spaces of filler), AGNUL2000000007 Anytown HMO, XX, (30 zeros), 11141999, (630 spaces of filler), EENUL2000000007 Anytown HMO, XX, (30 zeros), 11141999, (630 spaces of filler), OENUL2000000007

Please note: Although the reports in the example above were created on November 14, 1999, the report number on the far right starts with 2000. This is because OPM-Macon's numbering system starts week number one with the beginning of the federal fiscal year. The federal fiscal year begins October 1, 1999.

7. What if a carrier receives enrollment changes from one system but not the other two? Will the carrier file header somehow show this?

Yes. Throughout the year, if a carrier has any enrollment activity to receive, the carrier file header will show information from all three systems. Please see the example below.

Example: Anytown HMO, code XX, received enrollment changes from the Employee Express system (Department of Defense), but no enrollment changes from Agency Generated records or Open Season Express. The report was created January 2, 2000, the fourteenth for this carrier. The carrier file header would read:

Anytown HMO, XX, (30 zeros), 01022000, (630 spaces of filler), AGNUL2000000014 Anytown HMO, XX, total transactions, total starts, total changes, total stops, 01022000, (630 spaces of filler), EEDOD200000014 Anytown HMO, XX, (30 zeros), 01022000, (630 spaces of filler), OENUL2000000014

Enclosure Four Individual File Layouts

We will continue to use two different address layouts, one for employees and one for annuitants. Please note the differences between the two types of layouts. Address layout 1 is used for employees, and address layout 2 is used for annuitants.

If your plan has enrollment activity, the transmission that OPM-Macon sends will contain individual records. Each individual record has an enrollee or annuitant's individual enrollment information, just like the Standard Form 2809.

Definitions and Notes:

- \$ All dates are MMDDYYYY in format
- \$ All fields are left justified, and padded right with spaces unless otherwise noted.
- \$ All character data should be in upper case.

Individual Records (This is the same for Address Layouts 1 and 2)

-	•			
Field Description	Values: Edits: Examples: Justification	Required	Length	Position
Nature of Transaction	Values: START/CHANGE/STOP Justification: Left	Y	6	1 - 6
2. Employee Name	Values: Last First Middle I Edits: No punctuation Example: JOHNSON DERRICK M Justification: Left	Y	41	7 - 47
3. Social Security Number	Edits: No dashes Example: 123456789	Y	9	48 - 56
4. Date of Birth	Edits: MMDDYYYY Example: 01011969	Y	8	57 - 64

The following sections describe the 2 different layouts that OPM-Macon uses for employees and annuitants. OPM-Macon uses Address Layout 1 for the Employee Express (EE) and Agency Generated Records (AG) systems. OPM-Macon uses Address Layout 2 for annuitant Open Season Express (OE) changes.

Address Layout 1 only:

* Used by Employee Express (EE) and Agency Generated Records (AG) systems

Field Description	Values: Edits: Examples: Justification	Required	Length	Position
5. Home Street 1	Edits: No punctuation, A - Z, 0 - 9, # Example: ROUTE 1 BOX 618B Justification: Left	Y	35	65 - 99
6. Home Street 2	Edits: Same as Home Street 1	N	35	100-134
7. Home Street 3	Edits: Same as Home Street 1	N	35	135-169
8. Home City	-Edits: Valid city name Example: MACON Justification: Left	Y	23	170-192
9. Home State	Values: Valid State Abbreviation Example: GA	Y	2	193-194
10. Home Zip	Edits: 5 Required, 4 Optional Values: Valid Zip Code or Zip+4 code Examples: 31206, 312064204	Y	11	195-205

Address Layout 2 only:

* Used by Open Season Express (OE), Annuitants

Field Description	Values: Edits: Examples:	Required	Length Position
5. Address Line 1	Edits: Justification: Left	Y	22 65- 86
6. Address Line 2	Edits: Same as Address Line 1	N	22 87-108
7. Address Line 3	Edits: Same as Address Line 1	N	22 109-130
8. Address Line 4	Edits: Same as Address Line 1	N	22 131-152
9. Address Line 5	Edits: Same as Address Line 1	N	22 153-174
10. Address Line 6	Edits: Same as Address Line 1	N	31 175-205

FEHB Carrier File Layout (Continued.) Fields 11-67 are the same for Address Layouts 1 and $2\,$

* denotes a new/changed data element

Field Description	Values: Edits: Examples: Justification	Required	Length	Position
11. Sex	Values: M/F	Y		206
12. FEHB Marriage Indicator	Values: Y/N	Y	1	207
*13. FEHB Daytime	Edits: Empty or 17 digits	N	17	208-224
Phone	Edits: Employee=s daytime phone number Values: 0 - 9 Example: 9127442286(Pad Right with Spaces)			
14. FEHB Enrollment Code	Values: Valid FEHB enrollment code of the carrier the employee or annuitant is enrolling in or changing to Edits: Required for Starts, Changes Edits: Blank for Stops Example: 104	Y/N	3	225-227
15. FEHB Family Member Name 1	Edits: Last First Middle Initial Edits: NO PUNCTUATION Edits: Occurrence 1 is required for family coverage Example: JOHNSON SUSAN	Y/N	35	228-262
16. FEHB Family Zip Code 1	Values: Valid Zip Code or Zip+4 code Edits: 5 or 9 digits Examples: 31206, 312064204	N	11	263-273
17. FEHB Family DOB 1	Edits: MMDDYYYY Edits: Occurrence 1 is required for family coverage Example: 01011996	Y/N	8	274-281
18. FEHB Family Sex Code 1	Values: M/F Edits: F = Female, M = Male Edits: Occurrence 1 is required for family coverage	Y/N	1	282
19. FEHB Family Relationship 1	Values: 1,2,3,4 Edits: See field description Edits: Occurrence 1 is required for family coverage	Y/N	1	283
20. FEHB Family SSN 1	Edits: No dashes Example: 123456789	N	9	284-292

21. FEHB Family	If family member 2 is used, Name is	Y/N	35293-327
=	required		
	See family member 1 edits for remaining		
	family member's fields.		
	Family Members 2 - 5 are optional with		
	family coverage. (Fields 21 - 44)		
	If family member 2 is used, Zip Code is	N	11328-338
	optional but recommended		
	Refer to family member 1 for edits		
23. FEHB Family	If family member 2 is used, DOB is	Y/N	8339-346
II = = = = = = = = = = = = = = = = = =	required		
	Refer to family member 1 for edits		
24. FEHB Family Sex	If family member 2 is used, Sex Code is	Y/N	1347
	required		
	Refer to family member 1 for edits		
25. FEHB Family	If family member 2 is used, Relationship	Y/N	1348
	is required		
1	Refer to family member 1 for edits		
26. FEHB Family	If family member 2 is used, SSN is	N	9349-357
SSN 2	optional but recommended		
	Refer to family member 1 for edits		
27. FEHB Family	If family member 3 is used, Name is	Y/N	35358-392
	required		
	Refer to family member 1 for edits		
	If family member 3 is used, Zip Code is	N	11393-403
Code 3	optional but recommended		
	Refer to family member 1 for edits		
29. FEHB Family	If family member 3 is used, DOB is	Y/N	8404-411
1	required		
	Refer to family member 1 for edits		
30. FEHB Family Sex	If family member 3 is used, Sex Code is	Y/N	1412
II	required		
	Refer to family member 1 for edits		
	If family member 3 is used, Relationship	Y/N	1413
II	is required		
•	Refer to family member 1 for edits		
32. FEHB Family	If family member 3 is used, SSN is	N	9414-422
SSN 3	optional but recommended		
	Refer to family member 1 for edits		
	If family member 4 is used, Name is	Y/N	35423-457
	required		
	Refer to family member 1 for edits		

34. FEHB Family Zip	If family member 4 is used, Zip Code is	N	11	458-468
Code 4	optional but recommended			
	Refer to family member 1 for edits			
35. FEHB Family	If family member 4 is used, DOB is	Y/N	8	469-476
DOB 4	required			
	Refer to family member 1 for edits			
36. FEHB Family Sex	If family member 4 is used, Sex Code is	Y/N	1	477
Code 4	required			
	Refer to family member 1 for edits			
37. FEHB Family	If family member 4 is used, Relationship	Y/N	1	478
Relationship 4	is required			
r r	Refer to family member 1 for edits			
38. FEHB Family	If family member 4 is used, SSN is	N	9	479-487
SSN 4	optional but recommended			
	Refer to family member 1 for edits			
39. FEHB Family	If family member 5 is used, Name is	Y/N	35	488-522
Member Name 5	required			
	Refer to family member 1 for edits			
40. FEHB Family Zip	If family member 5 is used, Zip Code is	N	11	523-533
Code 5	optional but recommended			
	Refer to family member 1 for edits			
41. FEHB Family	If family member 5 is used, DOB is	Y/N	8	534-541
DOB 5	required			
	Refer to family member 1 for edits			
42. FEHB Family Sex	If family member 5 is used, Sex Code is	Y/N	1	542
Code 5	required			
	Refer to family member 1 for edits			
43. FEHB Family	If family member 5 is used, Relationship	Y/N	1	543
Relationship 5	is required			
-	Refer to family member 1 for edits			
44. FEHB Family	If family member 5 is used, SSN is	N	9	544-552
SSN 5	optional but recommended			
	Refer to family member 1 for edits			
45. FEHB Other	Values: Y/N	Y	1	553
Insurance Indicator				
*46. FEHB Other	Values: Last First Middle Initial	Y/N		554-588
Insurance	Edits: NO PUNCTUATION		35	
Policy Holder Name	Edits: Indicates Policy Holder for Other			
	insurance			
	Edits: Required if FEHB Other Insurance			
	Indicator is Y			

47. FEHB Medicare	Values: Y/N	Y/N	1	589
Indicator	Edits: Indicates if the employee, spouse,	1/11	1	
	or any other eligible family members			
	have Medicare coverage			
	Edits: Required if FEHB Other Insurance			
	Indicator is Y			
48. FEHB Medicare-A	Values: Y/N	Y/N	1	590
Employee	Edits: Indicates if the employee has			
	Medicare Part-A			
	Edits: Required if FEHB Other Insurance			
	Indicator is Y			
49. FEHB Medicare-B	Values: Y/N	Y/N	1	591
Employee	Edits: Indicates if the employee has			
	Medicare Part-B			
	Edits: Required if FEHB Other Insurance			
	Indicator is Y			
*50. FEHB	Values: Y/N	Y/N	1	592
Medicare-A Spouse	Edits: Indicates if the employee=s spouse			
	has Medicare Part-A			
	Edits: Required if FEHB Other Insurance			
	Indicator is Y			
*51. FEHB	Values: Y/N	Y/N	1	593
Medicare-B Spouse	Edits: Indicates if the employee=s spouse			
	has Medicare Part-B			
	Edits: Required if FEHB Other Insurance			
	Indicator is Y			
52. FEHB TRICARE	Values: Y/N	Y/N	1	594
(formerly	Edits: Required if FEHB Other Insurance			
CHAMPUS) Indicator	Indicator is Y			
53. FEHB Other	Values: Name of any group health	Y/N	35	595-629
Insurance Name	insurance coverage the employee, the			
	employee=s spouse, or any other eligible			
	family members have other than the			
	FEHB plan in which the employee is			
	enrolling in or changing to.			
	Edits: Required if FEHB Other Insurance			
	Indicator is Y and all other types of			
	insurance are N.			
	Example: STATE FARM HEALTH			

54. FEHB Present	Values: FEHB enrollment code the	Y	3 630-632
Enrollment Code	employee or annuitant is currently	1	3030 032
Linoninent code	enrolled in		
	Edits: Blank for Starts		
	Edits: Required valid code for Stops,		
	Changes		
	Example: 451		
55 FEHR Event Code	Values: Blank, 1B, 2B, 1C etc.	Y	2633-634
55. I LIIB L vent code	depending on the time of year and type	1	2033 034
	of action		
	Edits: Refer to current FEHB		
	documentation for various Event Codes,		
	and see the Field Descriptions in this		
	document for more details		
56. Premium Effective	Values: The date Payroll or Annuity	Y	8635-642
Date	Deduction changes take affect.	-	000 0.2
	Edits: MMDDYYYY		
	Example: 01022000		
57. Coverage	Values: The date the requested Coverage	Y	8643-650
Effective Date	changes take affect		
	Edits: MMDDYYYY		
	Example: 01022000		
58. Date of Action	Values: The date of this election	Y	8 651-658
	Edits: MMDDYYYY		
	Example: 12011999		
59. Time of Action	Values: The time of this election	Y	6659-664
	Edits: HHMMSS, 24 hour time		
	Example: 162206		
60. CPDF Agency	Values: Valid Federal CPDF code for the	Y	4665-668
Code	agency the employee is serviced by.		
	Edits: Annuitants ONLY will pass 0000		
	Example: OM00 for OPM employees		
61. Personnel Office	Values: Valid Federal Personnel Office	Y	8 669-676
ID	ID		
	Edits: Annuitants ONLY will pass		
	24900002		
62. Payroll Office	Values: Valid Federal Payroll Office	Y	8 677-684
Number	Number		
	Edits: Annuitants ONLY will pass		
	24900002 for all actions.		
63. Annuity Claim	Values: Valid Annuitant Claim Number	$Y \setminus N$	9 685-693
Number	Edits: Required for annuitants Only		
	Edits: All other agencies, blank		

64. HB Identification Number	Values: SSN of the original enrollee in this FEHB plan Edits: Required for annuitants Only Edits: All other agencies, blank	Y\N	9	694-702
*65. Foreign/Over- Seas Address Indicator	Values: Y/N Edits: Y indicates that the employee has an foreign home address (not an APO/FPO address). Edits: N indicates that the employee has a US address, which includes APO/FPO addresses and US Territories.	Y/N	1	703
66. Filler	Values: Blanks		2	704-705
67. Report Number	Values: Agencies leave blank, further descriptions included in the Field Descriptions portion of this document Edits: Generated by OPM-Macon	N	15	706-720

Enclosure Five

Individual file layouts-Notes, Questions and Answers

Notes

Field 1. Nature of Transaction

- STARTS are used when a new enrollee joins the FEHB Program.
- CHANGES are used when an enrollee moves from one plan to another or makes a change within a plan.
- STOPS are used when an enrollee is no longer part of the FEHB Program.

Field 14. When an enrollee changes health plans, the enrollment code of the plan he or she is joining is shown in the FEHB Enrollment Code field. This will be blank for Stops and contain a valid enrollment code for Changes and Starts.

Enrollment codes: Positions 1 and 2 Carrier Code

Position 3 Coverage type

If Position 3 is 1, the enrollment is for High Option, Self Only. If Position 3 is 2, the enrollment is for High Option, Self & Family. If Position 3 is 4, the enrollment is for Standard Option, Self Only. If Position 3 is 5, the enrollment is Standard Option, Self & Family.

For example, if Anytown HMO has an enrollment code of ZZ, then the enrollment code for an employee in High Option Self & Family is ZZ2.

Fields 15 - 20: If an enrollee has Self and Family coverage, they must provide certain information for the person in the family member 1 position. The person listed in the family member 1 must provide their name, date of birth, sex, and family relationship (see below). They are not required to provide their SSN number or their zip code.

Fields 19, 25, 31, 37, 43: FEHB Family Relationship Codes:

- 1 = Spouse
- 2 = Unmarried dependent child under age 22 including an adopted child
- 3 = Step child, foster child, or recognized child
- 4 = Unmarried disabled child over age 22 incapable of self-support.

Fields 45 - 53, Other Insurance Field: If the employee, spouse, or other eligible family member has additional insurance outside of the FEHB Program, they will list it here.

If the FEHB Other Insurance Indicator is Y, then at least one of the following fields will contain valid coverage information:

Field 46	FEHB Other Insurance Policy Holder's Name
Field 47	FEHB Medicare Indicator
Field 52	FEHB TRICARE (formerly CHAMPUS) Indicator
Field 53	FEHB Other Insurance Name

If the FEHB Medicare Indicator is Y, then at least one of the following fields will contain a Y:

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    Field 48 FEHB Medicare-A Employee
    Field 49 FEHB Medicare-B Employee
    Field 50 FEHB Medicare-A Employee's Spouse
    Field 51 FEHB Medicare-B Employee's Spouse
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Field 54: Present Enrollment Code:

When an enrollee changes health plans, the enrollment code the enrollee is leaving is called the Present Enrollment Code. This field will be blank for Starts and contain a valid enrollment code for Changes and Stops.

Field 55: Event Codes correspond to the event that allowed the enrollee's action.

For employees, Code 1B indicates that the effective date of an enrollment change is the first day of the first full pay period in January. For annuitants, Code 2B indicates that the effective date of an enrollment change is January 1st. This field is used for Open Season starts and changes. Other codes may be valid based on existing FEHB regulations, but most Open Season starts and changes will be shown as either 1B or 2B.

When a Stop or Change to Self Only occurs, this field will be left blank.

Field 56: Premium Effective Date: Carriers can ignore this field.

Field 57: Coverage Effective Date:

The date the enrollee's change becomes effective. Carriers should use this date as the first day of an enrollee's health insurance coverage. For most Open Season Starts and Changes, (other than Changes to Self Only coverage and Stops), the Coverage Effective Date is the first day of the first full pay period in January.

For changes to Self Only coverage and Stops, regardless of the time of year, the Coverage Effective Date is different. For Stops, the effective date is either the last day of the current pay period, or the first day of the first full pay period in January. For Changes to Self Only, the effective date is either the first day of the next pay period, or the first day of the first full pay period in January.

For annuitant Changes to Self Only, and Stops, Open Season Express (OE) will calculate a date that does not follow the convention mentioned above. You should accept the Coverage Effective Date that OE provides in this field.

Field 63: The Annuity Claim Number is used to provide proper tracking of annuitant FEHB actions. This is used for annuitants only.

Field 64: The HB Identification Number is used to provide proper tracking of annuitant elections. This field contains the SSN of the retiree or in the case of a survivor annuitant, the SSN of the deceased retiree/employee. This number will be the SSN of the person to whom the policy was originally issued and it will not change. The Social Security Number field can and does change at the death of the annuitant, but the HB Identification Number does not.

Example:

Annuitant's SSN: 222222222 Spouse's SSN: 333333333

An annuitant selects an FEHB plan.

For any electronic transactions, the Social Security Number is 222222222 and HB Identification Number is 222222222.

If the annuitant dies, OPM will notify the carrier and provide them with the surviving spouse's SSN, Name, DOB, and Address.

Any subsequent electronic transactions would include 33333333333 in the Social Security Number field, and 222222222 in the HB Identification Number.

This field is used for annuitants only.

Field 65: The Foreign/OverSeas Address Indicator indicates that the employee has a foreign home address.

A "Y" indicates that the employee has a foreign home address (not an APO/FPO address). "N" indicates that the employee has a US address, which includes APO/FPO addresses and US Territories. Carriers will need to set up special processing procedures to process employees that have a "Y" in this field.

Field 67. The Report Number is generated by OPM-Macon:

Position:	Description:	Value:
1-2	System	AG = Agency Generated Record EE = Employee Express OE = Open Season Express (Annuitants)
3-5 6-9 10-15	Agency Fiscal Year Sequential No.	Agency identifier (Example): EPA Example: 2000 Example: 000001

Sample Report Number Veteran's Affairs: AGVET2000000001
Sample Report Number for Employee Express: EEDOT2000000001
Sample Report Number for annuitants: OEOPM2000000001

The Report Number will be generated for both the Header Record (a summary record that is similar to the SF 2811), and Individual data records (individual records similar to SF 2809), and sent to the carriers by OPM-Macon.

OPM-Macon will generate the Agency Identifier and send to carriers when a new agency is added to the system.

OPM-Macon will increment the Sequential No. each time they send a file to a carrier. The Sequential No. starts with 000001 and is incremented each time a carrier receives a file from Macon.

Frequently Asked Questions about Individual file layouts

Please note that annuitant requirements differ slightly from those for current Federal employees. These differences are noted in this document.

Question: The record layout has room for five dependents. Can an enrollee or annuitant with more than five dependents use the system?

Answer: No. If an enrollee or annuitant has more than five dependents, they cannot use the electronic enrollment system.

Question: Does OPM-Macon edit the files?

Answer: OPM-Macon does not edit any data.

Question: What should be reported in the FEHB Other Insurance field?

Answer: Data should include the employee's or any eligible family member's additional medical insurance. The purpose of these fields is to report what the family as a whole has. These fields may be blank.

Here's an example:

The employee's spouse has a health insurance policy through her employer. His daughter has Blue Cross insurance. The various fields would look like this:

FEHB Other Insurance Indicator:	Y
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FEHB Other Ins. Policy Holder's Name: DOE JANE R

FEHB Medicare Indicator:

FEHB Medicare - A Employee:

FEHB Medicare - B Employee:

N
FEHB Medicare - A Employee's Spouse:

N
FEHB Medicare - B Employee's Spouse:

N
FEHB TRICARE (formerly CHAMPUS):

FEHB Other Insurance Name: Anytown HMO, BLUE CROSS

Question: What is the FEHB Premium Effective Date?

Answer: The Premium Effective Date is determined by the enrollee's agency for calculating payroll deductions.

Question: What is the CPDF agency Code?

Answer: An OPM-Macon generated code that is used across the Federal Government to identify agencies and sub agencies.

Example: OPM's CPDF code is OM00
For annuitants only, the code is 0000
All other agencies will use their agency's given CPDF code.

Question: What is the Personnel Office ID?

Answer: Federal agencies have a Personnel Office Identifier that can be used to locate a specific Personnel Office.

For Annuitants this will be a duplicate of the Payroll Office ID. All other agencies will use the employee's servicing Personnel Office ID.

Question: What is the Payroll Office ID?

Answer: The Payroll Office Identifier is used to identify the office responsible for the payroll functions for a specific employee.

- o For Annuitants Only: The Payroll Office ID is 24900002.
- o For all other agencies, the number will be the employee's servicing Payroll Office ID.

Question: Does OPM-Macon keep a history of all data transferred to the Carriers?

Answer: Yes.

Enclosure Six

Electronic Transmission to the Carriers-Technical Specifications

PC-to-PC Communications

OPM-Macon will dial into the carrier's personal computer (386 or higher, DOS or WINDOWS based) that is equipped with a modem (internal or external, 19.2 baud rate or higher), phone line, and Norton-Lambert Closeup v6.0 or Closeup v6.5 communications software (Host package). The communications software allows for:

- S automated scripting so file transfers can be accomplished at scheduled times without human intervention
- S logging to provide connection feedback to determine proper file transfers and help in troubleshooting
- S password protection
- S various baud rate transfers.

The cost for the Closeup host license and manual is approximately \$75.00.

Enclosure Seven Best Practice for file automation

A carrier can use a REDEFINES function that allows them to view the same portion of a data record in more than one way. The carrier determines which way to view the data record based on the data source. Each data record has a report number field at the end of the record. The first two characters of the report number indicate the source: "AG" for Agency Generated record, "EE" for Employee Express, or "OE" for Open Season Express. The REDEFINES function allows the carrier to say, in effect, "If the source of this record is "EE" or "AG", use one view to interpret the address section. If the source is 'OE', use a second view.

The first view, "E" or "AG", tells the program to interpret the 141-character address section as being made up of these fields: Street1, Street2, Street3, City, State, Zip. The Street fields are each viewed as 35 characters long, while City is 23 characters, the State is 2 characters, and the Zip is 11.

The second view, "OE", tells the program to interpret the address section as being made up of six address lines, each of which is exactly 22 characters long, with 9 characters of unused blank space. The difficulty with using this view is that it's up to the program to determine what's in each of the six lines. For example, how to tell where the State and Zip are located:

"TROY NY 09532" and

"SACRAMENTO CA 71256" each has the State and Zip code values in different positions within the given line.

Once the program decides on which view to use, it processes the address section according to what's defined in that view.

Enclosure Eight File Transfer Days by Carrier Code

CODE	NAME	Day of Transfer
 47	 APWU Health Plan	MONDAY
XW	Advantage Care, Inc.	TUESDAY
2U	Aetna U.S. Healthcare	TUESDAY
2X	Aetna U.S. Healthcare	TUESDAY
3G	Aetna U.S. Healthcare	TUESDAY
5B	Aetna U.S. Healthcare	TUESDAY
5U	Aetna U.S. Healthcare	TUESDAY
6F	Aetna U.S. Healthcare	TUESDAY
6J	Aetna U.S. Healthcare	TUESDAY
8A	Aetna U.S. Healthcare	TUESDAY
8J	Aetna U.S. Healthcare	TUESDAY
8L	Aetna U.S. Healthcare	TUESDAY
8V	Aetna U.S. Healthcare	TUESDAY
8X	Aetna U.S. Healthcare	TUESDAY
8Z	Aetna U.S. Healthcare	TUESDAY
BU	Aetna U.S. Healthcare	TUESDAY
H1	Aetna U.S. Healthcare	TUESDAY
JC	Aetna U.S. Healthcare	TUESDAY
KL	Aetna U.S. Healthcare	TUESDAY
NE	Aetna U.S. Healthcare	TUESDAY
NG	Aetna U.S. Healthcare	TUESDAY
NK	Aetna U.S. Healthcare	TUESDAY
P3	Aetna U.S. Healthcare	TUESDAY
RD	Aetna U.S. Healthcare	TUESDAY
SU	Aetna U.S. Healthcare	TUESDAY
TK	Aetna U.S. Healthcare	TUESDAY
TS	Aetna U.S. Healthcare	TUESDAY
UJ	Aetna U.S. Healthcare	TUESDAY
V8	Aetna U.S. Healthcare	TUESDAY
WQ	Aetna U.S. Healthcare	TUESDAY
XC	Aetna U.S. Healthcare	TUESDAY
Z 1	Aetna U.S. Healthcare	TUESDAY
YQ	Alliance Health Plan	WEDNESDAY
2R	Altru Health Plan	TUESDAY
FK	AmeriHealth HMO, Inc.	MONDAY
SP	AmeriHealth HMO, Inc.	MONDAY
AC	American HMO	TUESDAY

9X Antero HealthPlans G2 Arnett HMO FRIDAY 42 Association Benefit Plan FRIDAY 8Y Athens Area Health Plan Select TUESDAY 3A AultCare HMO WEDNESDAY EM Av-Med Health Plan TUESDAY GP Av-Med Health Plan TUESDAY HS Av-Med Health Plan TUESDAY HW Av-Med Health Plan TUESDAY JF Av-Med Health Plan Health TUESDAY JF Av-Med Health Plan Health Plan WEDNESDAY JF Av-Med Health Plan Health Plan WEDNESDAY JF Av-Med Health Plan Health WEDNESDAY JF Av-Med Health Plan WEDNESDAY JF CIGNA HealthCare of VA TUESDAY	4U	American Healthcare Trust, Inc	MONDAY
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FA Care Choices WEDNESDAY		•	
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4C	Carelink Health Plans	FRIDAY
3Y	Certus HealthCare	TUESDAY
7C	CommunityCare HMO	MONDAY
69	Compcare Health Services	FRIDAY
6X	Compcare Health Services	FRIDAY
TE	ConnectiCare	TUESDAY
Q3	DayMed Hlth Maintenance Plan	WEDNESDAY
WD	Dean Health Plan	THURSDAY
6D	Doctors Health Plan, Inc.	FRIDAY
9Y	Exclusive Healthcare	TUESDAY
JV	Fallon Community Health Plan	WEDNESDAY
WH	Family Health Plan	MONDAY
5G	First Choice Health Plan	MONDAY
2F	First Option Health Plan of NJ	FRIDAY
C8	First Priority Hlth	TUESDAY
6U	Firstcare	THURSDAY
CK	Firstcare	THURSDAY
40	Foreign Service	WEDNESDAY
5C	Foundation Health	FRIDAY
5D	Foundation Health	FRIDAY
5E	Foundation Health	FRIDAY
LD	Free State Health Plan	MONDAY
31	GEHA Benefit Plan	MONDAY
80	GHI Health Plan	TUESDAY
8B	Generations Family Health Plan	MONDAY
E5	George Washington Univ HP	MONDAY
RL	Grand Valley Health Plan	TUESDAY
WJ	Group Health Coop	WEDNESDAY
54	Group Health Cooperative	WEDNESDAY
VR	Group Health Cooperative	TUESDAY
MM	Group Health Plan	WEDNESDAY
WT	Group Hlth Coop/Eau Claire	MONDAY
ZA	Guam Memorial Health Plan	WEDNESDAY
LY	Gulf South Health Plan, Inc.	MONDAY
K7	HIP Health Plan of FL	MONDAY
P9	HIP Health Plan of NJ	TUESDAY
5J	HIP Health Plan of Pennsylvania	TUESDAY
51	HIP of Greater New York	TUESDAY
AH	HMO BLUE	FRIDAY
5Q	HMO Blue	TUESDAY
5R	HMO Blue	TUESDAY
4Y	HMO Blue/Rio Grande	TUESDAY
4Z	HMO Blue/Rio Grande	TUESDAY

L2	HMO Colorado/Nevada	THURSDAY
VS	HMO Colorado/Nevada	THURSDAY
L4	HMO Health Ohio	FRIDAY
5H	HMO New Mexico	THURSDAY
2T	HMO Texas, L.C.	FRIDAY
UK	HMO Texas, L.C.	FRIDAY
EB	HMO-CNY	WEDNESDAY
87	HMSA	MONDAY
68	Harvard Community Hlth Plan	TUESDAY
70	Harvard Pilgrim Hlth Care-NE	TUESDAY
52	Health Alliance	THURSDAY
7X	Health Alliance HMO	TUESDAY
FX	Health Alliance HMO	TUESDAY
28	Health Maintenance Life	MONDAY
R5	Health Maintenance Plan(HMP)	TUESDAY
LB	Health Net	MONDAY
DJ	Health New England	TUESDAY
D7	Health Options	MONDAY
FN	Health Options	MONDAY
FR	Health Options	MONDAY
DF	Health Partners of Alabama	THURSDAY
RN	Health Partners of the Midwest	WEDNESDAY
U4	Health Plan Upper OH Valley	WEDNESDAY
NM	Health Plan of Nevada	FRIDAY
XR	Health Power HMO	MONDAY
26	HealthAmerica Pennsylvania	TUESDAY
4N	HealthAmerica Pennsylvania	TUESDAY
SW	HealthAmerica Pennsylvania	TUESDAY
ZN	HealthAmerica Pennsylvania	TUESDAY
5X	HealthAssurance HMO	TUESDAY
6L	HealthAssurance HMO	TUESDAY
Q8	HealthCarePlan	MONDAY
8E	HealthFirst HMO	FRIDAY
RF	HealthFirst, Inc.	THURSDAY
NQ	HealthGuard	FRIDAY
53	HealthPartners Classic	WEDNESDAY
HQ	HealthPartners Health Plan	WEDNESDAY
2S	HealthPartners Health Plans	TUESDAY
TD	HealthPartners Health Plans	TUESDAY
8F	HealthPlus	THURSDAY
X5	HealthPlus MI	TUESDAY
6W	Healthcare Oklahoma	TUESDAY
X8	Healthkeepers	WEDNESDAY

371	H 14 HMO CNY	
XL	Healthsource HMO of NY	FRIDAY
RU	Heart of America HMO	TUESDAY
3J	Heritage National Healthplan	WEDNESDAY
4T	Heritage National Healthplan	WEDNESDAY
4H	Hometown Health Plan	FRIDAY
18	Humana Care Plan	THURSDAY
HR	Humana Care Plan	THURSDAY
D2	Humana Health Plan	THURSDAY
75	Humana Health Plan Inc.	THURSDAY
DY	Humana Health Plan of AZ	THURSDAY
UE	Humana Health Plan of Texas	THURSDAY
UR	Humana Health Plan of Texas	THURSDAY
TL	Humana Health Plan, Inc.	THURSDAY
TW	Humana Health Plans of Texas	THURSDAY
MS	Humana Kansas City, Inc.	THURSDAY
7F	Humana Medical Plan	THURSDAY
EE	Humana Medical Plan	THURSDAY
JH	Humana Medical Plan	THURSDAY
P5	Humana Medical Plan	THURSDAY
P7	Humana Medical Plan	THURSDAY
X1	Humana Wisconsin Hlth Org.	THURSDAY
TX	Humana of Corpus Christi	THURSDAY
C1	Independent Health Assoc	THURSDAY
QA	Independent Health Assoc	THURSDAY
A7	Intergroup of Arizona, Inc.	FRIDAY
1 J	John Deere Family Healthplan	WEDNESDAY
63	Kaiser HI	FRIDAY
64	Kaiser Permanente	FRIDAY
E3	Kaiser Permanente	MONDAY
QT	Kaiser Permanente	MONDAY
57	Kaiser Permanente	THURSDAY
8M	Kaiser Permanente	WEDNESDAY
PW	Kaiser Permanente	WEDNESDAY
QB	Kaiser Permanente	WEDNESDAY
59	Kaiser Permanente	MONDAY
62	Kaiser Permanente	MONDAY
65	Kaiser Permanente	MONDAY
DM	Kaiser Permanente	MONDAY
F8	Kaiser Permanente	MONDAY
HA	Kaiser Permanente	MONDAY
K1	Kaiser Permanente	MONDAY
QH	Kaiser Permanente	MONDAY
S4	Keystone Health Plan Central	THURSDAY

ED Keystone Health Plan East MONDAY EF KeystoneBlue FRIDAY VT Kitsap Physicians Service THURSDAY Q1 Lovelace Health Plan FRIDAY EG M-Care FRIDAY JP MD-IPA MONDAY 5Y MDNY Healthcare, Inc WEDNESDAY M9 MVP Health Plan WEDNESDAY M7 MVP Health Plan WEDNESDAY M8 MVP Health Plan WEDNESDAY M9 MVP Health Plan WEDNESDAY M8 MVP Health Plan WEDNESDAY WW MVP Health Plan WEDNESDAY WM MVP Health Plan WEDNESDAY WM MAXICARE Indiana FRIDAY GK Maxicare Indiana FRIDAY CM Maxicare Southern California FRIDAY EV Medical Value Plan THURSDAY MM Mercy Health Plans/Premier WEDNESDAY MONDAY UM NYLCare HP of the Gulf Coast WEDNESDAY ZE NYLCARE HP of the Gulf Coast WEDNESDAY V2 NYLCARE HP of the Gulf Coast WEDNESDAY V2 NYLCARE HP of the Gulf Coast WEDNESDAY V3 NYLCARE HP of the Gulf Coast WEDNESDAY V4 NYLCARE HP of the Gulf Coast WEDNESDAY V5 NYLCARE HP of the Gulf Coast WEDNESDAY V6 NYLCARE HP of the Gulf Coast WEDNESDAY V7 NYLCARE HEAlth Plans SW MONDAY MN NYLCARE/Mid-Atlantic MONDAY MN NATIONAL HMO Health Plan THURSDAY MN Omni Healthcare WEDNESDAY MONDAY PR Optima Health Plan THURSDAY PR Optima Health Plan THURSDAY PR Optima Health Plan THURSDAY PR OPCA Family Health Plan of FL MONDAY PR OPCA Health Plans of Florida MONDAY
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9R Optima Health Plan THURSDAY FQ PCA Family Health Plan of FL MONDAY
FQ PCA Family Health Plan of FL MONDAY
PJ PCA Health Plans of Florida MONDAY
5P PCA Health Plans/Puerto Rico MONDAY
SH PHP/Mohawk Valley Region TUESDAY
JK PacifiCare Asia Pacific MONDAY
2N PacifiCare OK MONDAY
7R PacifiCare of Arizona MONDAY
A3 PacifiCare of Arizona MONDAY
CY PacifiCare of California MONDAY
D6 PacifiCare of Colorado MONDAY
K9 PacifiCare of Nevada MONDAY
R8 PacifiCare of Ohio INC MONDAY
SS PacifiCare of Oregon MONDAY

GF	PacifiCare of Texas	MONDAY
9K	PacifiCare of Utah	MONDAY
WB	PacifiCare of Washington	MONDAY
43	Panama Canal Area	TUESDAY
U2	Paramount Health Care	THURSDAY
7Y	Partners Health Plans	WEDNESDAY
EQ	Partners NHP of NC	FRIDAY
MC	Partners Nat'l HPs of IN	WEDNESDAY
N9	Penn State Geisinger HlthPlan	TUESDAY
4X	Personal Care Plan of NC	MONDAY
GE	PersonalCare's HMO	TUESDAY
DQ	Physicians HP of N. Indiana	THURSDAY
U5	Physicians Health Plan	TUESDAY
U6	Physicians Health Plan	TUESDAY
U7	Physicians Health Plan	TUESDAY
U8	Physicians Health Plan	TUESDAY
PD	Physicians Health Srvs of NY	WEDNESDAY
DP	Physicians Hlth Services/CT	WEDNESDAY
7P	Physicians Plus HMO	TUESDAY
36	Postmasters	TUESDAY
GV	Preferred Care	FRIDAY
VA	Preferred Plus of Kansas	THURSDAY
9A	Premier HealthCare of Arizona	FRIDAY
9B	Premier HealthCare of Arizona	FRIDAY
QE	Prepaid Health Plan	TUESDAY
P2	Presbyterian Health Plan	TUESDAY
AA	PrimeHealth of Alabama Inc	TUESDAY
9W	PrimeOne	FRIDAY
SV	Principal Health Care of Iowa	FRIDAY
7W	Principal Health Care of KC	FRIDAY
12	Principal St.Louis	FRIDAY
BQ	Priority Health	TUESDAY
W7	Priority Health Care, Inc.	THURSDAY
SD	Providence Health Plan	TUESDAY
8C	Prudential HealthCare HMO	MONDAY
8P	Prudential HealthCare HMO	MONDAY
9P	Prudential HealthCare HMO	MONDAY
JB	Prudential HealthCare HMO	MONDAY
VV	Prudential HealthCare HMO	MONDAY
1 K	Prudential HealthCare HMO	MONDAY
6P	Prudential HealthCare HMO	MONDAY
RR	Prudential HealthCare HMO	MONDAY
RS	Prudential HealthCare HMO	MONDAY

UN	Prudential HealthCare HMO	MONDAY
UP	Prudential HealthCare HMO	MONDAY
VX	Prudential HealthCare HMO	MONDAY
VY	Prudential HealthCare HMO	MONDAY
VZ	Prudential HealthCare HMO	MONDAY
EC	Prudential HealthCare HMO	MONDAY
EH	Prudential HealthCare HMO	MONDAY
EZ	Prudential HealthCare HMO	MONDAY
HE	Prudential HealthCare HMO	MONDAY
Q4	Prudential HealthCare HMO	MONDAY
UA	Prudential HealthCare HMO	MONDAY
UB	Prudential HealthCare HMO	MONDAY
V6	Prudential HealthCare HMO	MONDAY
AY	Prudential HealthCare MidWest	MONDAY
Q9	Prudential HealthCare MidWest	MONDAY
S3	Prudential HealthCare MidWest	MONDAY
8Q	QCA Health Plan	MONDAY
7Q	QualChoice of North Carolina	TUESDAY
27	QualMed Plans for Health	MONDAY
2K	QualMed Plans for Health	MONDAY
PX	QualMed Plans for Health	MONDAY
24	QualMed Plans for Health - PA	WEDNESDAY
QJ	QualMed Plans for Health OH/WV	WEDNESDAY
TM	QualMed WA Health Plan	MONDAY
2D	QualMed of Colorado	FRIDAY
88	Rocky Mountain HMO	WEDNESDAY
38	Rural Carrier Benefit Plan	FRIDAY
17	Rush Prudential HMO, Inc.	TUESDAY
44	SAMBA	WEDNESDAY
UF	Scott and White	MONDAY
Y7	Secret Service	FRIDAY
3Q	SecureCare of Iowa	WEDNESDAY
K6	SelectCare	WEDNESDAY
8D	Smartplan	THURSDAY
5W	SummaCare Health Plan	MONDAY
8T	Super Blue HMO	TUESDAY
5M	Super Med HMO	FRIDAY
IN	The M*Plan	MONDAY
K3	The Wellness Plan	THURSDAY
N2	Total Health Care	WEDNESDAY
89	Triple-S	THURSDAY
XM	UHC of North Carolina	TUESDAY
76	Union Health Service	TUESDAY
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VC	United Health Care Ohio	TUESDAY
3U	United Health Care of Ohio	TUESDAY
C4	United Health Plan	FRIDAY
BL	United HealthCare Mid-Atlantic	THURSDAY
4M	United HealthCare MidWest	TUESDAY
VF	United HealthCare New England	TUESDAY
7U	United HealthCare Puerto Rico	MONDAY
H8	United HealthCare Select	TUESDAY
QK	United HealthCare of Florida	TUESDAY
DU	United HealthCare of Kentucky	TUESDAY
NF	United HealthCare/Midlands	WEDNESDAY
W4	Unity Health Plans	TUESDAY
4B	VIVA Health Plan	FRIDAY
VH	Valley Health Plan	THURSDAY
7V	Vantage Health Plan	MONDAY
J6	Vytra Health Plans	MONDAY
H3	Welborn HMO	MONDAY
6V	WellCare of New York	THURSDAY
X4	WellCare of New York	THURSDAY
3Z	WellChoice	FRIDAY
2E	WellPath Select	THURSDAY
5Z	Western Health Advantage	MONDAY
2Y	Yellowstone Community Health	WEDNESDAY

Enclosure Nine

Federal Agencies participating in Electronic Enrollment Transfers

Agency Generated Records

AGDD1	(Dept. of Defense-electronic feed from Randolf AFB)
AGDD2	(Dept. of Defense-electronic feed from Iowa Foundation for Medical Care
	- TriCare Project)

Employee Express

EEDOD	(Dept. of Defense)
EEDOI	(Dept. of Interior)
EEDOL	(Dept. of Labor)
EEDOT	(Dept. of Transportation)
EEEDU	(Education)
EEEPA	(Environmental Protection Agency)
EEGSA	(General Services Administration)
EEHHS	(Health & Human Services)
EENAS	(National Aeronautics and Space Admin.)
EENIH	(National Institute of Health)
EEOPM	(Office of Personnel Mgt.)
EESSA	(Social Security Admin.)

Open Season Express (Annuitants)

OEOPM (Office of Personnel Mgt.)

Note: The System/Agency Identifier used in positions 1-5 of the report number.