Disclaimer: The Affordable Care Act entitles tribal employers the right to purchase the coverage, rights, and benefits of the Federal Employees Health Benefits (FEHB) Program for their tribal employees. The law extends FEHB coverage to tribal employees only. The Standard Form (SF) 2809 was written for Federal employees and not all parts of the SF 2809 apply to tribal employers or employees, such as any reference to annuitants, retirees, or suspension of benefits.

Standard Form (SF) 2809 Guidance
For Tribal Employers

This guidance explains how to process the Health Benefits Election Form (SF 2809) as a tribal employer. The SF 2809 was written for Federal employees and not all parts of the SF 2809 apply to tribal employers or employees.

Tribal employees must complete the SF 2809 in order to enroll, change, or cancel their FEHB enrollment. Tribal employees must also complete the SF 2809 if they are electing not to enroll during the Initial Enrollment Opportunity or as a new tribal employee. If a tribal employee elects not to enroll, the SF 2809 should not be entered into the Tribal Insurance Processing Systems (TIPS). Tribal employers’ responsibilities include:

- Obtaining the SF 2809 for tribal employees and providing a copy to each eligible tribal employee
- Answering tribal employees’ questions about the SF 2809
- Checking the accuracy of parts A through H of a tribal employee’s SF 2809
- Completing Part I of the SF 2809
- Inputting the SF 2809 data into TIPS
- Distributing a copy of the completed SF 2809 to each tribal employee
- Completing an Informational SF 2809 when correcting demographic information or adding a new family member

The tribal employer may also provide a copy to the tribal payroll office if that is their established procedure; or otherwise notify their payroll office of a change in premium withholdings, if applicable. Generally, the quicker a tribal employer completes and inputs the data from the SF 2809, the sooner the health plan will receive the information and the sooner tribal employees may receive their health plan identification cards.
Obtaining the SF 2809

Tribal employers can obtain the SF 2809 for employees at www.opm.gov/forms/pdf_fill/sf2809.pdf. If a tribal employer does not have access to the internet, they can request that a copy be mailed to them by calling Tribal Programs at (202) 606-2530. Tribal employers must provide an SF 2809 to all eligible tribal employees.

Answering Tribal Employees’ Questions


Receiving and Verifying Parts A through H of the SF 2809

When a tribal employee returns a completed SF 2809, a tribal employer must verify that the tribal employee accurately completed the applicable sections below:

Part A – Enrollee and Family Member Information

A tribal employer must ensure all information is completed accurately. The tribal employer must verify relationship codes if the tribal employee is enrolling in a Self and Family enrollment. The relationship code designates the type of family member. The table of codes is found on page 2 of SF 2809.

The tribal employer is responsible for making decisions about whether a family member is eligible for coverage and that the correct relationship code is used. The information below is guidance for eligibility.

- Code 01 = Spouse: A tribal employer must verify that the marriage is a legally valid marriage.
- Code 19 = Child under age 26: A tribal employer must verify that the tribal employee’s child is under 26 years of age.
- Code 10 = Foster Child: A tribal employer must verify that the tribal employee has provided the tribal employer with (1) documentation of the tribal employee’s regular and substantial support of the child and (2) the Certification of Foster Children. See Chapter 10 of the Tribal FEHB Handbook for more information on Foster Children and to obtain a copy of the Certification of Foster Children.
- Code 99 = Disabled child age 26 or older who is incapable of self-support because of a physical or mental disability that began before his/her 26th birthday: The tribal employer is responsible for determining whether a tribal employee’s child age 26 or older is incapable of self-support because of a mental or physical disability that began before age 26 and for notifying the tribal employee’s plan of its determination. See Chapter 10 of the Tribal FEHB Handbook for more information on Child Incapable of Self-Support.
**Part B – Present Plan**
A tribal employer must ensure all information is completed accurately. This part is filled out only if the tribal employee is already enrolled in an FEHB plan.

**Part C – New Plan**
Tribal employers must verify that the FEHB enrollment code entered is a 3-character code and that the code entered is a health plan that is available in the geographic area where the tribal employee lives or works (e.g., HMO’s geographic service area includes where the tribal employee lives or works). If a tribal employee signs up for a health plan that is not available in the area where the tribal employee lives or works, the tribal employee will receive coverage only for emergency services. Please refer to the RI 70-16 *FEHB Guide for Tribal Employees* at [www.opm.gov/healthcare-insurance/tribal-employers/plan-information/guides](http://www.opm.gov/healthcare-insurance/tribal-employers/plan-information/guides) for a complete listing of valid enrollment codes for the current year.

Tribal employers must verify that the FEHB enrollment code matches the FEHB enrollment type (i.e., Self Only or Self and Family).

- If a tribal employee is intending to enroll in a Self and Family enrollment, the last character of the FEHB enrollment code is 2 or 5.
- If a tribal employee is intending to enroll in a Self Only enrollment, the last character of the FEHB enrollment code is 1 or 4.

If the FEHB enrollment code does not match the intended FEHB enrollment type:

- A tribal employee’s eligible family members may not have coverage (i.e., intending to enroll in a Self and Family and actually enrolling in a Self Only), or
- The tribal employee and the tribal employer will pay higher premium amounts for coverage that is not needed (i.e., intending to enroll in a Self Only and actually enrolling in a Self and Family).

**Part D – Event Code**
If a tribal employee experiences a Qualifying Life Event (QLE), he/she must enter the Event Code and date of the event. QLEs allow eligible tribal employees to enroll, change, or cancel their FEHB enrollment within a certain timeframe of the event. Examples of QLEs include becoming a new or newly eligible tribal employee, marriage, divorce, and birth of a child.

The Event Code is a two-character code. The first character is a number that references a specific Table of Permissible Changes (pages 7-14 of the SF 2809) where the QLE is located. Tribal employees will only use tables 1, 4, or 5. The second character is a letter that references the specific QLE from the specific table.

- **Table 1:** If the tribal employer offers premium conversion and the tribal employee participates in it, use the QLEs on the Table of Permissible Changes in FEHB Enrollment and Premium Conversion Election (Table 1) of the SF 2809.

- **Table 4:** Applies to individuals who are enrolled in Temporary Continuation of Coverage (TCC) (Eligible Former Tribal Employees, Former Spouses, and Children who cease to
be eligible family members). TCC enrollments are processed through the Direct Pay Remittance System Web (DPRS-W) portal and not the Tribal Insurance Processing System (TIPS).

- Table 5: If the tribal employer is NOT participating in premium conversion, use Table 5 of the SF 2809 for Employees Who are Not Participating in Premium Conversion.

Some QLEs permit a tribal employee to make only certain changes (e.g., enroll, change from one plan or option to another). Check the applicable table of permissible changes on the SF 2809 to verify that the tribal employee’s desired change is allowable.

![Table 5: Permissible Changes](image)

(from a table of permissible changes, the red arrow points to the column that states which changes may be permitted for a specific QLE)

Part E – Employees Only (Election NOT to enroll)
Tribal employees who are eligible for FEHB, but choose not to enroll should complete Part E. Tribal employers should follow-up with tribal employees who choose not to enroll but haven’t completed a SF 2809. The SF 2809 data for tribal employees who elect not to enroll should not be entered into TIPS.

Part F – Cancellation
This section should only be completed during Open Season, or if the tribal employee experiences a QLE that allows him/her to cancel FEHB enrollment. If the tribal employee does not participate in premium conversion, the tribal employee can cancel FEHB enrollment at any time.

Part G – Suspension
This section does not apply to tribal employees.

Part H – Signature
Tribal employees must sign, date, and provide a preferred telephone number and email address (if available) in this section.

**Completing the SF 2809**

Part I of the SF 2809 is for the tribal employer to complete. If a tribal employer inputs the SF 2809 data into the Tribal Insurance Processing System (TIPS), a tribal employer must fill in all applicable data fields in TIPS. **If the tribal employer does not access to internet services and is unable to enter the information into TIPS,** a tribal employer may fax/mail the SF 2809 to the National Finance Center (NFC). In that case, a tribal employer must complete all fields of Part I.
**Input data into TIPS**

- **Billing Unit/Personnel Office Identifier (POI, a four-digit identifier):** It automatically populates when a tribal employer user logs into TIPS. If the user has access to more than one billing unit, make sure the correct billing unit is used.
- **Effective Date of Action:** This date is when coverage becomes effective for the tribal employee.
  - For the Initial Enrollment Opportunity, the Effective Date of Action is the date when coverage is effective for all enrolling, eligible tribal employees. It will be the first day of a month.
  - For Open Season, the Effective Date of Action is January 1 of the following year.
  - For a QLE, the Effective Date of Action is the first day of the pay period after the SF 2809 is received.
    - Exception: Birth or acquisition of a child. The Effective Date of Action is the first day of the pay period in which the child is born or becomes an eligible family member.
  - For TCC, the Effective Date Of Action is the first day after the 31-day extension of coverage (see Note below)*

*NOTE: Temporary Continuation of Coverage (TCC) Enrollments Only:* The tribal employer must enter the TCC enrollee information in NFC’s Direct Pay Remittance System Web (DPRS-W) portal for TCC enrollment. NFC’s Direct Pay Remittance System (DPRS) will then process the TCC enrollment and notify the enrollee of the payments due. Because TCC enrollment is part of DPRS, TCC enrollment data must not be entered into TIPS. Please refer to the “Temporary Continuation of Coverage” link on the TIPS home page, under Resources, for additional information about TCC and the DPRS-W portal.

**Instructions for only tribal employers who do not have access to internet services:** Fax a copy of the SF 2809 to NFC at 1-504-426-9796 or mail a copy of the SF 2810 to NFC at Tribal Insurance Processing System, P.O. Box 60083, New Orleans, LA 70161

- **Billing Unit (four-digit identifier):** Write the billing unit in the Remarks Field of Part I. Tribal employers must always place the billing unit here. If the billing unit is not placed in the remarks section, no action will occur and the tribal employee will not get coverage.
- **Effective Date of Action:** Date when coverage becomes effective for tribal employee.
  - For the Initial Enrollment Opportunity, the Effective Date of Action is the date when coverage is effective for all enrolling, eligible tribal employees. It will be the first day of a month.
  - For Open Season, the Effective Date of Action is January 1 of the following year.
  - For a QLE, the Effective Date of Action is the first day of the pay period after the SF 2809 is received.
    - Exception: Birth or acquisition of a child. The Effective Date of Action is the first day of the pay period in which the child was born or becomes an eligible family member.
  - For TCC, the Effective Date Of Action is the first day after the 31-day extension of coverage (see Note above)*

- Payroll Office number: 12400096
- Sign and place in the Tribal Employee Personnel Folder
Distributing Copies of the SF 2809

The tribal employer must make two copies of the SF 2809 (signed by both the tribal employee and tribal employer) or the TIPS confirmation page. One copy is given to the tribal employee. The tribal employee’s copy of the SF 2809 or the TIPS confirmation page is acceptable as proof of enrollment in a health plan (except for prescription drugs) until the tribal employee receives his/her identification card from the plan. A second copy is placed in the Tribal Employee Personnel Folder. The tribal employer may also provide a copy to the tribal payroll office if that is their established procedure; or otherwise notify their payroll office of a change in premium withholdings, if applicable.

Informational SF 2809 – specific circumstances for when the tribal employer must use an Informational SF 2809

Tribal employers must use an Informational SF 2809 in the following circumstances:

- Correcting demographic information previously entered into TIPS. Examples are:
  - Correcting a Social Security Number.
  - Correcting a misspelled name or date of birth.
  - Correcting or updating an address.
- Adding a new family member to an existing Self and Family enrollment.
- Removing a family member when the Self and Family enrollment type is not affected.

Informational SF 2809s must not be used to make changes in enrollment types or Plans.