

UNITED STATES OFFICE OF PERSONNEL MANAGEMENT

2021 Federal Employee Benefits Survey Report



Results from the 2021 Federal Employee Benefits Survey

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Executive Summary

Survey Overview

The Federal Employee Benefits Survey (FEBS) is designed to gather employee feedback on the importance, adequacy, and perceived value of the benefits available to Federal employees. The insights gained from the FEBS help to shape benefit program design and policy development. The U.S. Office of Personnel Management (OPM) first administered the survey in 2004 and again in 2006. In 2011, OPM expanded the FEBS beyond traditional benefit program ratings to capture information about other health topics such as tobacco use and cessation and health status demographics. Since 2011, the survey has been conducted every other year with new content added each administration to explore emerging topics of interest.

Survey Sample: The 2021 FEBS was administered to a random sample of approximately 50,000 permanent employees across the Federal Government.

Survey Mode: A link to the web survey was sent out electronically via email invitation.

Survey Field Period: Administration of the FEBS began on October 6, 2021, and continued through November 5, 2021.

Response Rate: The 2021 FEBS had an overall response rate of 27 percent. The data are weighted to ensure the feedback from survey respondents is representative of the Federal workforce.

Key Results

- *The Thrift Savings Plan, Federal Employees Health Benefits, and retirement benefits are the most important benefits to employees.* 90 percent or more of participants rated the availability of TSP, FEHB, retiree health benefits and retirement annuity as “extremely important” or “important,” regardless of whether they were enrolled
- *These retirement and health benefits have a high impact on recruitment.* - Over 70 percent of participants reported the availability of FEHB, TSP and a retirement annuity influenced their decision to take a job with the Federal Government to a “great” or “moderate” extent, suggesting employees place a great deal of value on these programs when considering their career paths and planning (results in table below)
- *These retirement and health benefits have an even higher impact on employee retention.* The same is true when looking at the impact of these 3 programs on retaining current employees, with an even higher percentage of participants (over three-quarters) reporting FEHB, TSP and a retirement annuity influenced them to remain in a job with the Federal Government to a “great” or “moderate” extent.
- *The availability of telehealth became invaluable to enrollees during the COVID-19 pandemic.*
 - When participants were asked to report whether their use of telehealth services increased during the pandemic, the majority reported their utilization increased greatly.
 - Reported use of video appointments with providers rose from 2 percent in 2019 to 43 percent in 2021.
 - Use of telehealth was greater among those who reported seeking treatment for emotional/mental/behavioral health services.
- *The COVID-19 pandemic did inhibit access to care for federal employees.*

- 43 percent of all respondents reported delaying or skipping their annual physical due to the pandemic.
- Women were more likely than men in all age groups to report they skipped or delayed preventive screenings because of the pandemic.
- *The Federal Employee Paid Leave Act (FEPLA) appears to be having a significant impact on employee retention.* 55 percent of participants 40 years old or younger reported the FEPLA benefit influenced their decision to remain in a job with the Federal Government to a “great” or “moderate” extent.
- *Access to and cost of health services are concerns of some federal employees, consistent with national trends.*
 - The most cited reason for not seeking mental/behavioral health care when there was a need to do so was “difficulty finding an in-network provider.”
 - 50 percent of participants who considered changing their FEHB plan reported wanting a plan with a lower monthly premium as their top reason for considering a plan change. 40 percent wanted a plan with lower copayments or coinsurance.
 - The perceived importance of the (pre-tax) Flexible Spending Account for health care jumped 4 percent between 2019 and 2021.
- *As with the rest of the US population, race remains a pervasive issue for federal employees interacting with the health system.* Participants who identified as white were more likely to report “never” feeling as if they had been treated with less respect (57%), followed by participants who identified as black or African American (50%). All other race groups reported “never” feeling as if they had been treated with less respect when seeking health services between 43 and 46 percent of the time.
- *Federal employees want more refined information to make health plan selection easier.*
 - Of the participants who reported it was “challenging” last time they had to choose a health plan, 40 percent reported a lack of understanding of the total out of pocket costs (deductibles, premiums, copays, etc.) that might be incurred as the reason it was a challenging decision to make.
 - The majority of participants who indicated use of OPM’s Plan Comparison Tool felt that information related to quality and provider availability was somewhat useful or not useful in helping them select a health plan.

I. Views of Core Benefit Programs

The benefit programs discussed in this report include the following:

- Thrift Savings Plan (TSP)
- Federal Employees Health Benefits (FEHB) Program
- Federal Employees' Group Life Insurance (FGLI)
- Federal Employees Dental and Vision Insurance Program (FEDVIP)- Dental
- Federal Employees Dental and Vision Insurance Program (FEDVIP)- Vision
- Health Care Flexible Spending Account (HCFSA) through FSAFEDS
- Federal Long Term Care Insurance Program (FLTCIP)
- Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS
- Federal Employee Paid Leave Act (FEPLA)

Enrollment Results

As in prior versions of the survey, the 2021 FEBS included items asking participants to identify which benefit programs they were enrolled in. Reported enrollment was consistent between 2021 and the last administration of the survey in 2019, with only slight increases (three or fewer percentage points) in several programs. The greatest change between enrollment results in 2019 and 2021 was a five-percentage point increase in reported enrollment in Federal Employees Dental and Vision Insurance Program (FEDVIP) Vision. Enrollment results for all programs from the 2021 FEBS are displayed in Table 1.

Table 1: Benefit Program Enrollment Results from 2021 FEBS¹

Benefit Program	Percent Enrolled
Thrift Savings Plan (TSP)	98%
Federal Employees Health Benefits (FEHB) Program	84%
Federal Employees' Group Life Insurance (FGLI)	80%
Federal Employees Dental and Vision Insurance Program (FEDVIP)- Dental	74%
Federal Employees Dental and Vision Insurance Program (FEDVIP)- Vision	62%
Health Care Flexible Spending Account (HCFSA) through FSAFEDS	33%
Federal Long Term Care Insurance Program (FLTCIP)	12%
Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS	7%

Reasons for Not Enrolling in Benefit Programs

Participants who reported they did NOT enroll in each benefit program were asked to report the primary reason for not enrolling, providing insight into what factors may be driving decision-making and how they may vary between programs. Overall results were generally consistent with previous administrations of the survey. Reasons for not enrolling in programs with high uptake tend to stay

¹ Enrollment results were produced using unweighted data.

consistent over time. For example, most employees not enrolled in FEHB reported “I am covered by TRICARE” or “I have health insurance through someone else’s employment or retirement annuity,” and most not enrolled in TSP reported, “I cannot afford to contribute money to the TSP.”

Analyzing these results for programs with lower enrollment can help identify barriers to enrollment and opportunities to improve employee uptake. DCFSA through FSAFEDS had the lowest reported enrollment in 2021 (7%); however, the program is not applicable to employees who are not responsible for dependent care expenses. The FEBS results are consistent with that logic, with 35 percent of those not enrolled in DCFSA reporting they did not enroll because the program is not applicable to them. The most frequently reported reason for not enrolling in FLTCIP and FEDVIP-Vision programs was employees reporting they did not think the programs are a good value, which could be an area for program improvement and/or better communication efforts to employees. The most frequently selected primary reasons for not enrolling in each benefit program are listed in Table 2 below.

Table 2: Reasons for Not Enrolling in Benefit Programs

Benefit Program	Most Frequently Selected Primary Reason for Not Enrolling	Percent Selected
Thrift Savings Plan (TSP)	I cannot afford to contribute money to the TSP	30%
Federal Employees Health Benefits (FEHB) Program	I am covered by TRICARE	58%
Federal Employees’ Group Life Insurance (FEGLI)	I have life insurance outside of FEGLI	37%
Federal Employees Dental and Vision Insurance Program (FEDVIP)-Dental	I am enrolled in a dental insurance program outside of FEDVIP	34%
Federal Employees Dental and Vision Insurance Program (FEDVIP)-Vision	I do not think it is a good value	21%
Health Care Flexible Spending Account (HCFSA) through FSAFEDS	I do not wish to participate	23%
Federal Long Term Care Insurance Program (FLTCIP)	I do not think it is a good value	38%
Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS	This program is not applicable to me (do not have an eligible dependent)	35%

Importance of the availability of benefit programs to employees

In addition to questions about enrollment and decision-making related to enrollment, the FEBS included questions about the importance of the availability of each benefit program. All participants, regardless of whether they were enrolled, were asked, “How important is the availability of [the benefit program] to you?”. Results from the top two rating categories, “extremely important” and “important,” were combined and are displayed in Table 3 below, along with the ratings from the 2019 FEBS for comparison.

Importance ratings were very similar to the 2019 FEBS, except for the results for FSAFEDS programs, which increased by four percentage points (HCFSA) and five percentage points (DCFSA) in 2021. Overall, all programs except DCFSA were rated highly in terms of importance by over 40 percent of participants, regardless of whether they were enrolled. These results for DCFSA are not surprising, given the fact that

eligibility for the program is limited. The importance ratings suggest that while enrollment in some programs may seem low, employees value the option to enroll in many of the available benefit programs.

Looking closer at participants who rated the availability of FLTCIP as “extremely important,” nearly half (47%) were in the 41-56 age group, or “Generation X.” These results suggest a potential opportunity to engage with employees who may be interested in learning more about the program, especially when taking into consideration how Generation X participants responded to the question asking why they did **not** enroll in FLTCIP. Of the participants who reported the primary reason they did not enroll in FLTCIP as “I do not have enough information about the program/not aware of the program,” 46 percent were in the Generation X age group. The FEBS results suggest employees in this age group may be interested in the program, but many may not have enough information about it to consider enrolling.

Employer-sponsored long term care insurance enrollment in the public and private sectors has remained low, even after concerted education campaigns, due to costs increasing faster than expected.² This suggests that the reasons for perceived low value may be more complex and require more extensive consumer research prior to launching education efforts.

Table 3: Importance Ratings of Benefit Programs

Benefit Program	2019 Extremely Important/Important	2021 Extremely Important/Important
Thrift Savings Plan (TSP)	96%	96%
Retirement Annuity	95%	95%
Retiree Health Benefits	92%	93%
Federal Employees Health Benefits (FEHB) Program	90%	90%
Federal Employees Dental and Vision Insurance Program (FEDVIP)- Dental	82%	81%
Federal Employees Dental and Vision Insurance Program (FEDVIP)- Vision	70%	71%
Federal Employees’ Group Life Insurance (FEGLI)	70%	70%
Health Care Flexible Spending Account (HCFSA) through FSAFEDS	39%	43%
Federal Long Term Care Insurance Program (FLTCIP)	42%	41%
Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS	22%	27%

Impact of Benefit Programs on Recruitment and Retention

The FEBS also assesses the potential impact of FEHB, the TSP and a retirement annuity on recruiting and retaining Federal employees. Over 70 percent of participants reported the availability of all three

² RTI International and Washington University, 2015. “Long-Term Care Awareness and Planning: What Do Americans Want?” ASPE Policy Forum, <https://aspe.hhs.gov/report/long-term-care-awareness-and-planning-what-do-americans-want>

programs influenced their decision to take a job with the Federal Government to a “great” or “moderate” extent, suggesting employees place a great deal of value on these programs when considering their career paths and planning. The same is true when looking at the impact of these programs on retaining current employees, with an even higher percentage of participants (over three-quarters) reporting FEHB, TSP and a retirement annuity influenced them to remain in a job with the Federal Government to a “great” or “moderate” extent. Table 4 below displays the specific results for each program and the reported impact on recruitment and retention.

Table 4: Impact of FEHB, TSP, Retirement Annuity on Recruitment and Retention

Benefit Program	Percent reported the availability of benefit influenced decision to <u>take a job</u> with the Federal Government to a great or moderate extent	Percent reported the availability of benefit influenced decision to <u>remain in a job</u> with the Federal Government to a great or moderate extent
Federal Employees Health Benefits (FEHB) Program	72%	79%
Thrift Savings Plan (TSP)	71%	81%
Retirement Annuity	78%	88%

Value and Adequacy Ratings for FEHB and TSP

Participants enrolled in FEHB and TSP were asked to rate the value (benefits they receive for the money) and adequacy (extent to which the benefit is meeting their needs) of the programs. Results overall were positive and consistent with previous administrations of the FEBS.

Value Ratings

- 73% of FEHB enrollees reported the program was an excellent or good value
- 87% of TSP enrollees reported the program was an excellent or good value

Adequacy Ratings

- 95% of FEHB enrollees reported the program meets their needs to a great or moderate extent
- 93% of TSP enrollees reported the program meeting their needs to a great or moderate extent

Employee Feedback on the Federal Employee Paid Leave Act (FEPLA)³

The content of the 2021 FEBS was expanded to include questions about FEPLA. To assess general awareness of the program, participants were asked if they were aware of the benefit prior to being asked about it on the survey. Most employees seem to be aware of the benefit, with 67 percent reporting awareness prior to reading about it on the survey. Focusing on those in the 40-years-old and under category, the age group most likely to use the benefit, a higher percentage of participants (76%) reported being aware of the benefit.

³ FEPLA went into effect October 1, 2020, and provides for up to 12 weeks of paid time off for the birth of an employee’s child, or the placement of a child with an employee for adoption or foster care.

Impact on Retention

Participants were also asked whether FEPLA influences their decision to remain in a job with the Federal Government. Over a quarter of participants (27%) reported the program influenced their decision to remain in a job with the Federal Government to a “great” or “moderate” extent, which is noteworthy considering the program is not applicable to a large subgroup of employees. Looking more closely again at participants 40 years old or younger, 55 percent reported the benefit influenced their decision to remain in a job with the Federal Government to a “great” or “moderate” extent. Looking at these results with a focus on employees 40 years old or younger suggests the benefit has more of an impact in this age group, which makes sense given this age group is more likely to use the benefit.

Core Benefit Programs - Key Results and Takeaways

- FEHB and TSP were highly rated in terms of value and adequacy, which is consistent with previous administrations of the FEBS.
- Retirement and health benefit programs greatly influenced federal employees to take a job and, to an even greater extent, influenced federal employees’ interest in staying with the federal government.
- Enrollment in TSP, FEHB and FEGLI remains high over time, with over 80 percent of participants reporting they were enrolled. Enrollment in FLTCIP remains low over time, but importance ratings were high despite low enrollment.
- Employees seem to be aware of FEPLA, especially those 40 years old or younger. In that same age group, there is a notable impact of the benefit on retention.

II. Accessing Health Services

Employee attitudes and experiences with respect to accessing health services using federal benefits are described from the following dimensions:

- Mental health and behavioral health
- Equitable treatment
- COVID-19
- Telehealth

Mental and Behavioral Health

OPM continues to emphasize the importance of making behavioral and mental health care readily available, without barriers, to the Federal workforce and collected information via the FEBS to gain a better understanding of employees’ experience when seeking care.

To gauge the overall need for mental/behavioral healthcare in the Federal workforce, participants were first asked whether there was a need for care for themselves or for a family member within the 12 months prior to completing the survey. The results were consistent with 2019 FEBS results- 28 percent of participants responded “yes”, 66 percent responded “no”, and six percent responded “no, but there was a need for treatment.”

For the six percent of participants who indicated that treatment was necessary but that it had not been obtained, a follow up question was asked to better understand what barriers Federal employees may be encountering when attempting to seek care. The results are displayed in Table 1.

Table 1: Barriers Encountered When Attempting to Seek Mental or Behavioral Health Treatment

Reason for Not Seeking Care	Percent Selected
Difficulty finding an in-network provider	33%
Difficulty finding providers accepting new patients	30%
Didn't get around to it	28%
Felt embarrassed seeking treatment	25%
Concerns about exposure to COVID-19	24%
Could not afford treatment costs	23%
Unable to find a provider you were comfortable talking to	22%
Difficulty finding in-person appointments	18%
Difficulty finding virtual appointments	12%
Other	1%

Looking at these results by age group, participants 40 years old and younger were more likely to report that they or a family member had received mental/behavioral care in the last 12 months (32%) compared to those 57 years of age or older (19%).

Equitable Treatment

Even though equitable care is consistently cited as a goal of providers, insurers, employers, and health care facilities, the reality is that different demographic groups may continue to receive different levels of care and experience different health outcomes. Many factors contribute to equity issues in health care, and for many groups discrimination of all types is recognized as intertwined with social, political, and economic societal structures. For many minority groups, the result is unequal access to services such as education, health care, affordable housing, etc.⁴ In health care specifically, a 2020 study published in JAMA found that 21 percent of adults indicated that they had experienced discrimination in the health care system, and 72 percent of those who had experienced discrimination reported experiencing it more than once⁵.

Since health equity continues to be important for OPM and is a top priority of the Biden-Harris administration, the 2021 FEBS asked participants for feedback to get a high-level pulse on their experience as Federal employees. Participants were asked, "How often have you felt like you have been treated with less respect than others when seeking health procedures/services?" Responses from all participants are provided in Table 2.

⁴ <https://www.health.harvard.edu/blog/racism-discrimination-health-care-providers-patients-2017011611015>

⁵ <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2774166>

Table 2: How Often Participants Reported Being Treated with Less Respect than Others When Seeking Health Procedures/Services

Response	Percent Selected
Never	53%
Seldom	21%
Sometimes	14%
Don't know/not sure	7%
Often	4%
Always	2%

Results for the question “How often have you felt like you have been treated with less respect than others when seeking health procedures/services?” were also analyzed by racial category. Participants who identified as white were more likely to report “never” feeling as if they had been treated with less respect (57%), followed by participants who identified as black or African American (50%). All other race groups reported “never” feeling as if they had been treated with less respect when seeking health services between 43 and 46 percent of the time.

COVID-19

Throughout the COVID-19 pandemic, many people have avoided or delayed both routine and emergency medical care. According to the Centers for Disease Control and Prevention, by June 30, 2020, because of concerns about COVID-19, an estimated 41 percent of U.S. adults had delayed or avoided medical care including urgent or emergency care (12%) and routine care (32%). Avoidance of urgent or emergency care was more prevalent among unpaid caregivers for adults, persons with underlying medical conditions, Black adults, Hispanic adults, young adults, and persons with disabilities⁶. Since delayed/skipped care can have a negative impact on health outcomes and can impact morbidity and mortality associated with chronic conditions, the FEBS asked participants about care they skipped or delayed **by choice** since the beginning of the pandemic. The results are displayed in Table 3.

Table 3: Health Care Skipped or Delayed by Choice as a Result of the COVID-19 Pandemic

Type of Care	Percent Selected
Routine physical/check up	43%
Dental care	40%
N/A- I did not make the choice to skip or delay any of my health care	37%
Preventive screening	24%
Doctor visit for new/non-routine symptom or condition	22%

⁶ <https://www.cdc.gov/mmwr/volumes/69/wr/mm6936a4.htm>

Type of Care	Percent Selected
Doctor visit for chronic/existing condition	17%
Mental health care	9%
Physical therapy or rehabilitative care	8%
Urgent/emergency care	7%
Surgical procedure	6%

Results were also analyzed by gender, which highlighted a significant difference between men and women and preventive screening. Women were more likely than men in all age groups to report they skipped or delayed preventive screenings because of the pandemic.

Telehealth

Another healthcare-related impact of the COVID-19 pandemic has been an increase in the availability and utilization of telehealth services to access care. McKinsey reports that as of July 2021, telehealth utilization has stabilized at levels 38 times higher than before the pandemic⁷. OPM has seen widespread increases in telehealth utilization reported by FEHB Carriers and the FEBS gathered information from the employee perspective. Table 4 shows the percentage of participants who reported telehealth utilization for each listed service in the 12 months prior to taking the survey, as well as results from the 2019 FEBS for comparison.

Table 4: Use of Telehealth Services in Past 12 Months from the 2021 FEBS and 2019 FEBS

Type of Service	Percent Selected 2021	Percent Selected 2019 ⁸
Video appointment with provider	43	2
Telephone appointment with provider	32	22
Mobile health application	17	12
Communicated online with provider	26	21
None – I was not interested in using these services	26	42
None – don’t know if these services were available	9	--
None – services were available, but I was unable to access them	2	--

The largest increase in utilization was seen in video appointments with providers, which aligns with how care delivery shifted across the industry during the pandemic. When participants were asked for their own take on how their use of telehealth services increased during the pandemic, the majority reported their utilization increased greatly (23%) or somewhat (29%). Only three percent reported any level of

⁷ <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/telehealth-a-quarter-trillion-dollar-post-covid-19-reality>

⁸ "--" indicates unavailable data due to response options changing between survey administrations.

decrease in utilization and just under half (45%) said that the pandemic had no impact on their use of telehealth services. An uptick in the utilization of some telehealth services is likely to continue in the future, as approximately 47 percent of participants reported they are “extremely likely” or “likely” to use telehealth services in the next 12 months.

If a participant indicated that telehealth services were available, but that they were unable to access them, a follow up question was asked to gather more information about the barriers or challenges they encountered. The results are displayed in Table 5.

Table 5: Barriers Encountered when Using Telehealth Services in Past 12 Months

Barrier/Challenge	Percent Selected
Other	29%
Difficulty understanding insurance coverage for telehealth appointments	20%
Difficulty understanding website/app used by provider	20%
Delayed waiting times for telehealth appointments	20%
Lack of access to internet/broadband connection	18%
Lack of access to technology (computer, tablet, etc.)	15%

Those who reported they had received emotional/mental/behavioral health services treatment were **more** likely to respond that they had used telehealth services compared to those who reported they had not received treatment: Of the group of FEBS respondents who reported they/a family member had received such treatment, 63% reported using live video appointments with providers compared to only 37% of those who reported not receiving such treatment.

Accessing Services - Key Results and Takeaways

- The most commonly cited reason for not seeking mental/behavioral health care when there was a need was difficulty finding an in-network provider.
- In line with national trends, FEBS results suggest that Federal employees most often chose to delay routine physicals and dental care during the COVID-19 pandemic.
- Whites were most likely to report never feeling disrespected by health care providers, followed by blacks or African Americans, and then other races.
- Also in line with national and industry trends, FEBS results suggest that Federal employees experienced increases in the use of telehealth during the COVID-19 pandemic and that use is greater among those who report seeking treatment for emotional/mental/behavioral health services.

III. Perceptions of FEHB

The Federal Employees Health Benefits Program (FEHB) is the largest employer-sponsored health insurance program in the world, covering more than eight million Federal employees, retirees, former employees, and their family members and continues to be an area of focus for the FEBS due to high

enrollment and benefit utilization. As the “Results from the 2021 FEBS: Core Benefit Ratings”⁹ report outlines, 84 percent of 2021 FEBS participants reported that they were enrolled in FEHB. This represents the second highest enrollment of all benefit programs, second only to the Thrift Savings Plan (TSP).

In addition to enrollment, the report contains the overall core ratings for the FEHB program, including ratings on importance, adequacy, and value. It also outlines the impact of FEHB on recruitment and retention of employees. The results contained in this report focus on topics of interest related to employees’ experience with FEHB and provide insight into how Federal employees approach health plan choice and decisions around their care.

Changing FEHB Plans

To better understand how employees make decisions related to health plan choice and to better assess how many employees may be evaluating FEHB plans each year during Open Season, FEHB Enrollee participants were asked if they had considered changing their FEHB plan within the past five years. Over one-third of participants (39%) reported they had considered changing their plan. Those who had considered changing their plan were then asked to identify the reasons they were considered a change in health plan. The results are displayed in Table 1 below, with the top three reasons relating to cost of the plan. These results suggest cost plays a major role in how employees choose a health plan.

Table 1: Reasons Employees Considered Changing FEHB Plans¹⁰

Reason for Considering Changing Plan ¹¹	Percent Selected
I wanted a plan with a lower monthly premium	50%
I wanted a plan with lower copayments/coinsurance	40%
I wanted a plan with a lower deductible/no deductible	32%
I wanted a plan offering better quality health care	29%
I wanted specific benefit coverage that was not offered by my previous plan	23%
I had a qualifying life event (marriage, divorce, birth of a child, etc.)	18%
My preferred healthcare provider(s) was not covered by my previous plan	12%
Other	11%
I moved to a new location	8%

Looking further at the 39 percent of FEHB enrollees that reported they had considered changing their plan, they were also asked to identify the resources they consulted for information about plan options. This information provides insight into not only how many employees are likely to consider making a plan change, but also identifies which resources they may be using to help them make decisions about which FEHB plan is best for them. Table 2 displays the results, suggesting OPM’s Plan Comparison Tool may be

⁹ To view additional reports from the 2021 FEBS, please visit: <https://www.opm.gov/policy-data-oversight/data-analysis-documentation/employee-surveys/results/results-of-the-employee-benefits-survey/>

¹⁰ Only participants who reported they had considered making a health plan change in the past five years were asked to respond to this item.

¹¹ Participants were able to select more than one response for this item, so responses do not add to 100%.

one of the more frequently accessed resources when considering a plan change, along with health plan brochures.

Table 2: Resources Consulted When Considering Changing FEHB Plans¹²

Resource ¹³	Percent Selected
OPM's Plan Comparison Tool	54%
FEHB plan brochures	50%
Individual FEHB health insurance plan websites	46%
OPM's website	36%
Word of mouth (friends, colleagues, etc.)	31%
Benefits fair	16%
Other	6%

Results related to plan changes and resources used were also analyzed by age group to highlight any potential differences. Participants 40 years old and younger were far more likely (47%) to have considered changing their FEHB plan within the past five years than those in the 57 years of age or older category (30%). Another interesting and potentially related result was found when comparing age groups and use of the FEHB Plan Comparison Tool. A higher percentage of participants age 40 or younger (69%) reported using the tool compared to only 52 percent of those 57 years or older.

Choosing a Plan

The ability to choose from a wide variety of health plans has long been one of the hallmarks of the FEHB Program based on the idea that a larger range of choice is beneficial to the consumer. However, when it comes to choosing the right health plan the decision can be difficult for employees for a variety of reasons: varying levels of health literacy, difficulty predicting future health care needs and costs, trouble determining procedure/prescription costs, uncertainty over which providers are in network, and the list goes on. Picking an ideal plan requires weighing several factors, many of which could be unknowns, which makes it important to better understand employee behavior when choosing a plan. Over one-third of FEBS participants (42%) reported it was challenging to choose between plans last time they selected a health plan, and an additional six percent were unsure whether it was challenging. These results suggest nearly half of employees may encounter some challenges when trying to choose between health plans. Of those who reported it was challenging to select a plan, they were asked to identify the most challenging aspect of the decision. Table 3 highlights the challenges participants reported, with 40 percent reporting not understanding the total out of pocket costs as the biggest challenge when selecting a health plan.

¹² Only participants who reported they had considered making a health plan change in the past five years were asked to respond to this item.

¹³ Participants were able to select more than one response for this item, so responses do not add to 100%.

Table 3: Top Challenges When Selecting a Health Plan¹⁴

Most Challenging Part of Selecting Health Plan	Percent Selected
I did not understand the total out of pocket costs (deductibles, premiums, copays, etc.) I might incur	40%
I did not understand which benefits were covered	17%
I could not easily find out if doctors seen frequently were covered	15%
Other	14%
I did not have enough information about the health plans available	13%

OPM’s Plan Comparison Tool

Many resources, tools and services exist to help consumers select the “best” health plan for them. OPM provides a [Plan Comparison Tool](#) on opm.gov that allows employees to look at features such as premiums, deductibles and pharmacy costs for plans available in their geographic region. The 2021 FEBS included several items to gather feedback about employee experience using OPM’s Plan Comparison Tool (PCT) as a resource for selecting an FEHB plan. Overall, 61 percent of participants indicated they have used the PCT¹⁵, seven percent were unsure if they had used it, and 32 percent reported they have not used it.

Those who reported using the tool at some point in the past were asked several follow-up questions. The majority of these participants reported the tool was very useful (46%) or somewhat useful (49%) in helping them select a health plan. These participants also provided feedback on how useful each information category available within the PCT was when selecting a health plan. The results are displayed in Table 4.

Table 4: Usefulness Ratings for Sections of the Plan Comparison Tool¹⁶

Section	Very useful	Somewhat useful	Not very useful	Not at all useful
Quality ratings	41%	47%	9%	3%
Annual deductible amounts	72%	25%	2%	1%
Catastrophic limits	52%	40%	7%	2%
Hospital inpatient charges	58%	36%	5%	1%
Cost of primary care doctor office visits	69%	27%	3%	1%
Prescription drug costs	60%	32%	7%	2%

¹⁴ Only participants who reported it was challenging to choose between plans last time they selected a health plan were asked to respond to this item

¹⁵ A link to OPM’s Plan Comparison Tool was included on the survey for participants to provide a reference and assist in responding to items about the PCT.

¹⁶ Only participants who reported they had used the Plan Comparison Tool were asked to respond to this item.

Section	Very useful	Somewhat useful	Not very useful	Not at all useful
Availability of mail order pharmacy benefit	32%	43%	19%	6%
Link to provider directories	47%	39%	11%	3%
Prescription cost information	52%	37%	9%	2%

To gain a better understanding of why employees may not have used the PCT, participants who reported they had not used the PCT were asked to report the reason(s) they had not used the tool in the past. The results are listed in Table 5, with lack of awareness of the PCT being the most frequently reported reason for not accessing it.

Table 5: Reasons for Not Using the Plan Comparison Tool¹⁷

Reason for Not Using the PCT ¹⁸	Percent Selected
I didn't know about the tool	68%
Other	11%
I did not have time	10%
I prefer to use other resources (e.g., plan websites/brochures, HR staff, etc.)	10%
I do not understand how the tool works	9%
I could not find it on OPM's website	2%

Health Plan Education and Understanding

In addition to navigating health plan choice, another important aspect of health literacy is how well an individual feels they understand the structure and benefits of their plan. Varying levels of health literacy/health plan understanding can have a large impact on the management of health conditions, outcomes, status and costs. Higher levels of health literacy are tied to higher levels of self-reported health status¹⁹, which is why the FEBS includes questions asking participants how well they understand their health plan. When asked, "how well do you understand your health insurance benefits through FEHB?" the majority of participants reported they have a "good" understanding of their health insurance benefits. The results for this item are displayed in Table 6 below.

Table 6: Enrollees' Reported Understanding of Health Insurance Benefits through FEHB

Understanding of Health Insurance Benefits	Percent Selected
I have a good understanding	51%
I have a poor understanding	29%

¹⁷ Only participants who reported not using the PCT were asked to respond to this item.

¹⁸ Participants were able to select more than one response for this item, so responses do not add to 100%.

¹⁹ <https://www.cdc.gov/healthliteracy/learn/Understanding.html>

Understanding of Health Insurance Benefits	Percent Selected
I have an excellent understanding	15%
I have a fair understanding	5%

Participants were then asked follow up questions about which resources they used, or would be most likely to use, to learn about their benefits through FEHB. Those who reported they had a “good” or “excellent” understanding of their benefits were asked the question “Which resource(s) did you use to educate yourself about your health insurance benefits through the FEHB?”. The results show most participants who reported they had a good grasp on their health benefits have used their plan website and brochures to educate themselves. The results are displayed in Table 7.

Table 7: Resources Used by Enrollees with an Excellent/Good Understanding of Health Benefits

Resource	Percent Selected
FEHB plan’s website	65%
FEHB plan’s brochure	45%
Education programs available through my health plan	32%
OPM’s website	28%
Education programs available through my agency	16%
Other	8%
Agency’s HR department	6%
Education programs available through a third party	4%

Participants who reported they had a “fair” or “poor” understanding of their health insurance benefits were asked the question “Which resource(s) would you be most likely to access to learn more about your health insurance benefits through the FEHB?”. These results are displayed in Table 8, and again point to FEHB plan websites as a primary potential resource to be used when trying to learn more about benefits.

Table 8: Resources Likely to be Used by Enrollees with a Fair/Poor Understanding of Health Benefits

Resource	Percent Selected
FEHB plan’s website	52%
Education programs available through my agency	41%
Education programs available through my health plan	36%
FEHB plan’s brochure	30%
OPM’s website	30%

Resource	Percent Selected
Agency's HR department	20%
Education programs available through a third party	12%
Other	8%
N/A I am not interested in learning more about my FEHB plan	4%

FEHB - Key Results and Takeaways

- The most frequently selected reason for considering a change in FEHB coverage was to find a plan with a lower monthly premium.
- Health insurance plan brochures and OPM's PCT were the two most frequently consulted resources when participants considered changing their health plan.
- The most common reason for citing difficulty selecting a health plan is lack of understanding the total out of pocket costs (deductibles, premiums, copays, etc.) that might be incurred.
- The majority of participants who indicated use of OPM's PCT felt that information related to costs was very useful, while information related to quality and provider availability was somewhat useful or not useful in helping them select a health plan.

Appendix I – FEBS Survey Instrument

U.S. Office of Personnel Management (OPM) 2021 Federal Employee Benefits Survey

Welcome to the 2021 Federal Employee Benefits Survey, administered by OPM. You have been randomly selected to be part of a government-wide sample of Federal employees who are being offered the chance to provide feedback about the benefits available to employees. Your input is critical for OPM to assess whether Federal employees believe that the benefits offered by the Federal Government meet their needs.

Participation is voluntary and your responses are confidential.

- The survey should take approximately 15-20 minutes to complete, however, the time it takes depends on your own unique experiences.
- We have made every effort to streamline the survey by allowing you to skip questions that may not be applicable to you. By skipping questions that do not apply to you, please be aware that question numbers may appear missing or out of order.
- As you complete the survey, a bar at the bottom of each page will indicate your progress.
- Descriptions of important terms are provided throughout the survey in the link at the bottom of each page called "Key Terms and Descriptions."
- The possible responses to questions change throughout the survey. Please make sure you are answering as you intend by carefully reading all answer options.
- When navigating through the survey, please use the buttons on the bottom of the survey pages and not your browser's "Back" and "Forward" buttons.
- We strongly urge you to complete the survey in one session. However, if you cannot complete it in a single, uninterrupted session, the "Save & Continue Later" button at the bottom of each page will save your responses and allow you to return to complete the survey at a later time.
- If you have questions, please contact the OPM Survey Support Center at EBS@opm.gov.

Federal Employees Health Benefits (FEHB) Program

The following questions ask for general feedback about the Federal Employees Health Benefits (FEHB) Program, regardless of whether you are enrolled. “FEHB” refers to the medical, hospital, and prescription coverage (excluding supplemental dental and vision coverage) available to you as a Federal employee.

1. [All participants] How important is the availability of health insurance through FEHB to you?
 - Extremely important
 - Important
 - Neutral
 - Slightly important
 - Not at all important

2. [All participants] To what extent did the availability of health insurance through FEHB influence your decision to take a job with the Federal Government?
 - To a great extent
 - To a moderate extent
 - To a slight extent
 - Not at all

3. [All participants] To what extent does the availability of health insurance through FEHB influence your decision to REMAIN in a job with the Federal Government?
 - To a great extent
 - To a moderate extent
 - To a slight extent
 - Not at all

The following questions ask for more specific feedback about the Federal Employees Health Benefits (FEHB) Program. “FEHB” refers to the medical, hospital and prescription coverage (excluding supplemental dental and vision coverage) available to you as a Federal employee. Depending on your responses in this section, you may skip past some items.

4. [All participants] Are you enrolled in health insurance through FEHB?
 - Yes
 - No

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = No]

5. Please indicate the **primary** reason you did not enroll in health insurance through FEHB:
 - I have health insurance through someone else’s employment or retirement annuity (e.g., coverage through a spouse, dependent on a parent’s plan, etc.)
 - I am covered by TRICARE
 - I am not enrolled because health insurance through FEHB is too expensive
 - I do not have health insurance because I do not think I need it
 - I have health insurance through a Health Insurance Exchange or Marketplace (Obamacare)
 - Other

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

6. To what extent does your health insurance through FEHB meet your needs?
- To a great extent
 - To a moderate extent
 - To a slight extent
 - Not at all adequate

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

7. Considering the total amount you have to pay out-of-pocket (premiums, copays, coinsurance, etc.), please rate the value (benefits you receive for your money) of your health insurance through FEHB.
- Excellent value for the money
 - Good value for the money
 - Fair value for the money
 - Poor value for the money

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

8. Have you considered changing your FEHB health insurance plan within the past five years?
- Yes
 - No
 - Don't know

[Question conditionally shown if “Have you considered changing your health insurance plan within the past five years” = Yes]

9. Why did you consider changing your FEHB health insurance plan? (*select all that apply*)
- I wanted a plan with a lower monthly premium
 - I wanted a plan with a lower deductible/no deductible
 - I wanted a plan with lower copayments/coinsurance
 - I had a qualifying life event (marriage, divorce, birth of a child, etc.)
 - I wanted specific benefit coverage that was not offered by my previous plan
 - I moved to a new location
 - My preferred healthcare provider(s) was not covered by my previous plan
 - I wanted a plan offering better quality health care
 - Other

[Question conditionally Shown if “Have you considered changing your health insurance plan within the past five years?” = Yes]

10. When you considered changing your plan, where did you look for information about other plan options? (*select all that apply*)
- Word of mouth (friends, colleagues, etc.)
 - FEHB plan brochures
 - OPM's website

- OPM’s Plan Comparison Tool
- Individual FEHB health insurance plan websites
- Benefits fair
- Other (please specify)

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

11. Last time you selected a health plan, was it challenging to choose between plans?

- Yes
- No
- I am unsure

[Question conditionally shown if “Last time you selected a health plan, was it difficult or challenging to choose between plans” = Yes]

12. What was the most challenging part of selecting your health plan?

- I did not have enough information about the health plans available to me
- I did not understand the total out of pocket costs (deductibles, premiums, copays, etc.) I might incur
- I did not understand which benefits were covered
- I could not easily find out if the doctors I see most frequently were covered
- Other

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

13. Have you ever used the FEHB plan comparison tool on OPM’s website?

(It is found at: <https://www.opm.gov/healthcare-insurance/healthcare/plan-information/compare-plans/>)

- Yes
- No
- I am unsure

[Question conditionally shown if “Have you ever used the health plan comparison tool on OPM’s website?” = Yes]

14. How useful was OPM’s FEHB plan comparison tool in helping you select a health plan?

- Very useful
- Somewhat useful
- Not very useful
- Not at all useful

[Question conditionally shown if “Have you ever used the health plan comparison tool on OPM’s website?” = Yes]

15. The OPM FEHB plan comparison tool includes many categories to help you compare plans and choose the one that best meets your needs. Please rate the usefulness of the categories below in helping you select a health plan:

	Very useful	Somewhat useful	Not very useful	Not at all useful
Quality ratings				
Annual deductible amounts				
Catastrophic limits				
Hospital inpatient charges				
Cost of primary care doctor office visits				
Prescription drug costs				
Availability of mail order pharmacy benefit				
Link to provider directories				
Prescription cost information				

[Question conditionally shown if “Have you ever used the health plan comparison tool on OPM’s website?” = No]

16. Please indicate the reason(s) you have not used OPM’s FEHB plan comparison tool. *(select all that apply)*

- I did not have time
- I didn’t know about the tool
- I could not find it on OPM’s website
- I do not understand how the tool works
- I prefer to use other resources (e.g., plan websites/brochures, HR staff, etc.)
- Other

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

17. How well do you understand your health insurance benefits through the FEHB?

- I have an excellent understanding of my health insurance benefits through the FEHB
- I have a good understanding of my health insurance benefits through the FEHB
- I have a fair understanding of my health insurance benefits through the FEHB
- I have a poor understanding of my health insurance benefits through the FEHB

[Question conditionally shown if “How well do you understand your health insurance benefits through the FEHB” = I have an excellent understanding/I have a good understanding]

18. Which resource(s) did you use to educate yourself about your health insurance benefits through the FEHB? *(select all that apply)*

- Education programs available through my agency
- Education programs available through my health plan
- Education programs available through a third party
- Office of Personnel Management's website (<https://www.opm.gov/healthcare-insurance/healthcare/>)
- My FEHB plan's website
- My FEHB plan's brochure
- My agency's Human Resources department
- Other

[Question conditionally shown if "How well do you understand your health insurance benefits through the FEHB?" = I have a fair understanding/I have a poor understanding]

19. Which resource(s) would you be most likely to access to learn more about your health insurance benefits through the FEHB? *(select all that apply)*

- Education programs available through my agency
- Education programs available through my health plan
- Education programs available through a third party
- Office of Personnel Management's website (<https://www.opm.gov/healthcare-insurance/healthcare/>)
- My FEHB plan's website
- My FEHB plan's brochure
- My agency's Human Resources department
- Other
- N/A- I am not interested in learning more about my health insurance benefits through the FEHB

Accessing Health Services

OPM continues to value making behavioral and mental health care readily available, without barriers, to the Federal workforce. The following questions ask about your experience (if applicable) seeking out treatment for behavioral and mental health care.

20. [All participants] In the last 12 months, have either you or a family member received treatment for a condition that was emotional, mental, or behavioral in nature?

- Yes
- No
- No, but there was a need.

[Question conditionally shown if "In the last 12 months, have either you or a family member received healthcare treatment for a condition that was emotional, mental, or behavioral in nature?" = No, but there was a need]

21. What was the reason(s) treatment was not received? *(select all that apply)*

- Difficulty finding providers accepting new patients

- Difficulty finding an in-network provider
- Difficulty finding in-person appointments
- Difficulty finding virtual appointments
- Unable to find a provider you felt comfortable talking to
- I/a family member felt embarrassed seeking treatment
- Didn't get around to it
- Could not afford treatment costs
- Concerns about exposure to COVID-19
- Other (please specify)

[Telehealth questions conditionally shown if "Are you enrolled in health insurance through FEHB?" = Yes]

22. [All participants] How often have you felt like you have been treated with less respect than others when seeking health procedures/services?

- Always
- Often
- Sometimes
- Seldom
- Never
- Don't know/not sure

23. [All participants] Thinking about your health care since the beginning of the pandemic, which of the following did **you choose** to skip or delay as a result of the COVID-19 pandemic? (*Select all that apply*)

- Routine physical/check-up
- Doctor visit for new/non-routine symptom or condition
- Doctor visit for chronic/existing condition
- Urgent/emergency care
- Preventive screening (i.e., mammogram, colonoscopy, etc.)
- Dental care
- Surgical procedure
- Mental health care
- Physical therapy or rehabilitative care
- N/A- I did not make the choice to skip or delay any of my health care

Items in this section ask about your experience using telehealth services in the past 12 months. Telehealth services refer to care or communications from a provider that is conducted remotely, using either the phone, video, or online messaging to replace an in-person visit.

24. In the past 12 months, which of the following telehealth services have you used? (*select all that apply*)

- Live video appointment with a provider
- Telephone appointment with a provider
- Mobile health application (for example, used a program on a cell phone or tablet to access health information or complete a health-related transaction)

- Communicated online (via a portal, website, etc.) with a provider
- None of the above- I do not know if these services were available to me
- None of the above – these services were available, but I was unable to access them
- None of the above- I was not interested in using these services

[Question conditionally shown if “In the past 12 months, which of the following telehealth services have you used?” = “None of the above- these services were available, but I was unable to access them”.]

25. Please indicate any barriers or challenges you encountered when using telehealth services in the past 12 months: *(select all that apply)*

- Lack of access to technology (computer, tablet, etc.)
- Lack of access to internet/broadband connection
- Difficulty understanding the website/app used by provider
- Delayed waiting times for telehealth appointments
- Difficulty understanding insurance coverage for telehealth appointments
- Other: _____

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

26. During the COVID-19 pandemic, my use of telehealth services....

- ...increased greatly
- ...increased somewhat
- ...decreased somewhat
- ...decreased greatly
- N/A- the pandemic had no impact on my use of telehealth services

[Question conditionally shown if “Are you enrolled in health insurance through FEHB?” = Yes]

27. How likely are you to be interested in using telehealth services for health care in the next 12 months?

- Extremely likely
- Likely
- Neutral
- Unlikely
- Extremely unlikely

28. [All participants] Do you currently use any of the following products? *(Select all that apply)*²⁰

- Cigarettes
- Nicotine Vaping Devices
- Chewing tobacco/other tobacco products
- None of the above

²⁰ The tobacco use item was included in prior administrations of the FEBS but has been modified significantly for inclusion in the 2021 FEBS to account for vaping devices.

[Question conditionally shown if “Do you currently use any of the following products?” = “nicotine vaping devices”.]

29. How frequently do you use nicotine vaping devices?

- Every day
- A few times a week
- Infrequently/socially
- Never

Thrift Savings Plan (TSP)

The following questions ask for general feedback about the Thrift Savings Plan (TSP), regardless of whether you are enrolled. “TSP” refers to the defined contribution retirement savings plan for Federal employees, similar to a 401k in the private sector.

30. [All participants] How important is the availability of the TSP to you?

- Extremely important
- Important
- Neutral
- Slightly important
- Not at all important

31. [All participants] To what extent did the availability of the TSP influence your decision to take a job with the Federal Government?

- To a great extent
- To a moderate extent
- To a slight extent
- Not at all

32. [All participants] To what extent does the availability of the TSP influence your decision to REMAIN in a job with the Federal Government?

- To a great extent
- To a moderate extent
- To a slight extent
- Not at all

The following questions ask for more specific feedback about the Thrift Savings Plan (TSP). “TSP” refers to the defined contribution retirement savings plan for Federal employees, similar to a 401k in the private sector. Depending on your responses in this section, you may skip past some items.

33. [All participants] Are you enrolled in the TSP?

- Yes
- No

[Question conditionally shown if “Are you enrolled in the TSP?” = No]

34. Please indicate the primary reason you did not enroll in the TSP:

- I do not feel as if I need to save for my retirement

- I do not have enough information about the program
- I do not think it is a good value
- I am enrolled in a retirement savings plan outside of the Federal Government
- I cannot afford to contribute money to the TSP
- I do not know what the TSP is
- I do not wish to participate
- Other

[Question conditionally shown if “Are you enrolled in the TSP?” = Yes]

35. To what extent does the TSP meet your needs?

- To a great extent
- To a moderate extent
- To a slight extent
- Not at all adequate

[Question conditionally shown if “Are you enrolled in the TSP?” = Yes]

36. Considering the amount you have to pay, please rate the value (benefits you receive for your money) of the TSP.

- Excellent value for the money
- Good value for the money
- Fair value for the money
- Poor value for the money

Retirement

The following questions ask for general feedback about the programs and benefits available to Federal employees upon retirement.

37. [All participants] How important is the availability of a retirement annuity to you?

- Extremely important
- Important
- Neutral
- Slightly important
- Not at all important

38. [All participants] How important is the availability of retiree health benefits to you?

- Extremely important
- Important
- Neutral
- Slightly important
- Not at all important

39. [All participants] To what extent did the availability of a retirement annuity influence your decision to take a job with the Federal Government?

- To a great extent

- To a moderate extent
- To a slight extent
- Not at all

40. **[All participants]** To what extent does the availability of a retirement annuity influence your decision to REMAIN in a job with the Federal Government?

- To a great extent
- To a moderate extent
- To a slight extent
- Not at all

Other Benefits

Life Insurance through Federal Employees' Group Life Insurance (FGLI)

The following question asks for general feedback about Federal Employees' Group Life Insurance (FGLI), regardless of whether you are enrolled. "FGLI" refers to life insurance/financial protection for your beneficiaries available to you as a Federal employee.

41. **[All participants]** How important is the availability of life insurance through FGLI to you?

- Extremely important
- Important
- Neutral
- Slightly important
- Not at all important

The following questions ask for more specific feedback about Federal Employees' Group Life Insurance (FGLI). "FGLI" refers to life insurance/financial protection for your beneficiaries available to you as a Federal employee. Depending on your responses in this section, you may skip past some items.

42. **[All participants]** Are you enrolled in life insurance through FGLI?

- Yes
- No

[Question conditionally shown if "Are you enrolled in life insurance through FGLI?" = No]

43. Please indicate the primary reason you are not enrolled in life insurance through FGLI:

- I have life insurance outside of FGLI
- I have not had the opportunity to enroll
- I was not aware of the program
- I do not think it is a good value
- I do not wish to participate
- Other

Dental Insurance through the Federal Employees Dental and Vision Insurance Program (FEDVIP)

The following question asks for general feedback about dental insurance through the Federal Employees Dental and Vision Insurance Program (FEDVIP), regardless of whether you are enrolled.

44. [All participants] How important is the availability of dental insurance through FEDVIP to you?
- Extremely important
 - Important
 - Neutral
 - Slightly important
 - Not at all important

The following questions ask for more specific feedback about dental insurance through the Federal Employees Dental and Vision Insurance Program (FEDVIP). Depending on your responses in this section, you may skip past some items.

45. [All participants] Are you enrolled in dental insurance through FEDVIP?
- Yes
 - No

[Question conditionally shown if “Are you enrolled in dental insurance through FEDVIP?” = No]

46. Please indicate the primary reason you did not enroll in dental insurance through FEDVIP:
- I do not have enough information about the program
 - I do not think it is a good value
 - The dental coverage provided by my health insurance is sufficient
 - I am enrolled in a dental insurance program outside of FEDVIP
 - I do not wish to participate
 - Other

Vision Insurance through the Federal Employees Dental and Vision Insurance Program (FEDVIP)

The following question asks for general feedback about vision insurance through the Federal Employees Dental and Vision Insurance Program (FEDVIP), regardless of whether you are enrolled.

47. [All participants] How important is the availability of vision insurance through FEDVIP to you?
- Extremely important
 - Important
 - Neutral
 - Slightly important
 - Not at all important

The following questions ask for more specific feedback about vision insurance through the Federal Employees Dental and Vision Insurance Program (FEDVIP). Depending on your responses in this section, you may skip past some items.

48. [All participants] Are you enrolled in vision insurance through FEDVIP?
- Yes
 - No

[Question conditionally shown if “Are you enrolled in vision insurance through FEDVIP?” = No]

49. Please indicate the **primary** reason you did not enroll in vision insurance through FEDVIP:

- I do not have enough information about the program
- I do not think it is a good value
- The vision coverage provided by my health insurance is sufficient
- I am enrolled in a vision insurance program outside of FEDVIP
- I do not wish to participate
- I am not currently in need of vision care
- Other

Long Term Care Insurance through the Federal Long Term Care Insurance Program (FLTCIP)

The following question asks for general feedback about the Federal Long Term Care Insurance Program (FLTCIP), regardless of whether or not you are enrolled.

50. [All participants] How important is the availability of long term care insurance through FLTCIP to you?
- Extremely important
 - Important
 - Neutral
 - Slightly important
 - Not at all important

The following questions ask for more specific feedback about the Federal Long Term Care Insurance Program (FLTCIP). Depending on your responses in this section, you may skip past some items.

51. [All participants] Are you enrolled in long term care insurance through FLTCIP?
- Yes
 - No

[Question conditionally shown if “Are you enrolled in long term care insurance through FLTCIP?” = No]

52. Please indicate the **primary** reason you did not enroll in long term care insurance through FLTCIP:
- I do not think I will need it
 - I do not have enough information about the program/not aware of the program
 - I do not think it is a good value
 - I am enrolled in a long-term care insurance program outside of the Federal Government
 - I am saving on my own for possible future long term care needs
 - Other

Flexible Spending Accounts through the Federal Flexible Spending Accounts Program (FSAFEDS)

The following questions ask for general feedback about the Federal Flexible Spending Accounts Program (FSAFEDS), regardless of whether you are enrolled in any account type. A Health Care Flexible Spending Account (HCFSA) pays for the qualified medical expenses not covered or reimbursed by your FEHB plan or any other type of insurance. The Dependent Care Flexible Spending Account (DCFSA) pays for child care or adult dependent care expenses that are necessary to allow you or your spouse to work or attend school full-time.

53. [All participants] How important is the availability of a Health Care Flexible Spending Account (HCFSA) through FSAFEDS to you?

- Extremely important
- Important
- Neutral
- Slightly important
- Not at all important

54. [All participants] How important is the availability of a Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS to you?

- Extremely important
- Important
- Neutral
- Slightly important
- Not at all important

The following questions ask for information about your enrollment in the Federal Flexible Spending Accounts Program (FSAFEDS). Depending on your responses, you may skip to the next section.

55. [All participants] Are you enrolled in a Health Care Flexible Spending Account (HCFSA) through FSAFEDS?

- Yes
- No

[Question conditionally shown if “Are you enrolled in a Health Care Flexible Spending Account (HCFSA) through FSAFEDS” = No]

56. Please indicate the **primary** reason you did not enroll in a Health Care Flexible Spending Account (HCFSA) through FSAFEDS:

- I do not feel as if a Health Care Flexible Spending Account is beneficial to me
- I do not have enough information about the program
- I do not think it is a good value
- I am enrolled in a Health Care Flexible Spending Account outside of the Federal Government
- I am concerned that I will not spend the money during the benefit period and will have to forfeit the remaining funds
- I do not know what a Health Care Flexible Spending Account is
- I do not wish to participate
- Other

57. [All participants] Are you enrolled in a Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS?

- Yes
- No

[Question conditionally shown if “Are you enrolled in a Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS” = No]

58. Please indicate the **primary** reason you did not enroll in a Dependent Care Flexible Spending Account (DCFSA) through FSAFEDS:

- This program is not applicable to me (do not have an eligible dependent)
- I do not feel as if a Dependent Care Flexible Spending Account is beneficial to me
- I do not have enough information about the program
- I do not think it is a good value
- I am enrolled in a Dependent Care Flexible Spending Account outside of the Federal Government
- I do not know what a Dependent Care Flexible Spending Account is
- I am concerned that I will not spend the money during the benefit period and will have to forfeit the remaining funds
- I do not wish to participate
- Other

59. [All participants] In 2020 and 2021 OPM allowed employees mid-year changes related to their FSAFEDS enrollments as a result of the COVID-19 pandemic. Before reading this, were you aware that these changes were implemented and available to you as a Federal employee?

- Yes
- No
- Don't know

[Question conditionally shown if "Before reading this, were you aware that these changes were implemented and available to you as a Federal employee?" = "Yes"]

60. How did you hear about the option to make mid-year changes to your FSAFEDS (either HCFSA or DCFSA) account?

- FSAFEDS
- Benefits officer
- Friend/word of mouth
- Other

[Question conditionally shown if "Before reading this, were you aware that these changes were implemented and available to you as a Federal employee?" = "Yes"]

61. Did you make mid-year changes to your FSAFEDS (either HCFSA or DCFSA) account in 2020 or 2021?

- Yes – increased or decreased allotment
- Yes – became a new enrollee
- Yes - canceled enrollment
- No
- Don't know

[Question conditionally shown if "Did you make mid-year changes to your FSAFEDS (either HCFSA or DCFSA) account in 2020 or 2021?" = any "Yes" response]

62. To what extent did you understand the changes to your account(s) displayed on the FSAFEDS website?

- I was able to **clearly understand** the changes to my account
- I was able to **mostly understand** the changes to my account
- I had **some trouble** understanding the changes to my account
- I **did not understand at all** the changes to my account

[Question conditionally shown if “Did you make mid-year changes to your FSAFEDS (either HCFA or DCFA) account in 2020 or 2021?” = any “Yes” response]

63. How easy was the process of making changes to your FSAFEDS account(s)?

- Very easy
- Mostly easy
- Somewhat difficult
- Very difficult
- I don't remember/don't know

[Question conditionally shown if “Did you make mid-year changes to your FSAFEDS (either HCFA or DCFA) account in 2020 or 2021?” = any “Yes” response]

64. If you had questions about the mid-year changes to your FSAFEDS account(s), who did you contact for assistance?

- FSAFEDS/HealthEquity
- OPM
- Agency HR/Benefits Officer
- Other
- N/A – I did not know who to contact
- N/A- I did not have questions

[Question conditionally shown if “If you had questions about the mid-year (special?) changes to your FSAFEDS account(s), who did you contact for assistance?” = any response except “N/A”]

65. How satisfied were you with the answers you received after contacting someone for assistance?

- Extremely satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Extremely dissatisfied
- Do not remember/do not know

Paid Parental Leave

The next few items ask about the Paid Parental Leave benefit available to Federal employees. The benefit provides up to 12 weeks of paid parental leave to covered Federal employees in connection with the birth or placement (for adoption or foster care) of a child occurring on or after October 1, 2020.

66. [All participants] Before reading this, were you aware of the Paid Parental Leave benefit?

- Yes

- No

67. [All participants] To what extent does the availability of the Paid Parental Leave benefit influence your decision to **remain** in a job with the Federal Government?

- To a great extent
- To a moderate extent
- To a slight extent
- Not at all/Not applicable to me

Demographics

The Federal Government is committed to promoting a diverse and inclusive workplace. The questions below are meant to help us understand if we are meeting that goal. Your response is voluntary, confidential, and will be used to enhance the federal government's understanding of the diversity of its workforce.

[All participants see all questions in this section]

68. How do you currently describe yourself? *(select all that apply)*

- Male
- Female
- Transgender
- Another gender identity

69. What sex were you assigned at birth, on your original birth certificate?

- Male
- Female

70. Which of the following best represents how you think of yourself?

- Lesbian or gay
- Straight, that is, not lesbian or gay
- Bisexual
- Something else
- I don't know the answer

71. When were you born?

- 1997 or later
- 1981- 1996
- 1965-1980
- 1946-1964
- 1945 or earlier

72. What is your pay category/grade?

- Federal Wage System (for example, WB, WD, WG, WL, WM, WS, WY)
- GS 1-6
- GS 7-12

- GS 13-15
- Senior Executive Service
- Senior Level (SL) or Scientific or Professional (ST)
- Other

73. How long have you been with the Federal Government (excluding military service)?

- Less than 5 years
- 5 to 10 years
- 10 to 20 years
- More than 20 years

74. Please select the racial category or categories with which you most closely identify.
(select all that apply)

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian
- White

75. Are you of Hispanic, Latino, or Spanish origin?

- Yes
- No

76. Are you an individual with a disability?

- Yes
- No



U.S. Office of Personnel Management

Healthcare & Insurance

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