Federal Benefits
FastFacts

What to do When Your Health Plan is Terminating Coverage in Your Area or Leaving the Federal Employees Health Benefits (FEHB) Program.

There are four ways your plan’s enrollment can be affected. Each may require a different response, so be sure to identify your situation.

1. Plan leaves FEHB Program entirely;
2. Plan reduces its service area and eliminates its enrollment code;
3. Plan reduces its service area and keeps its enrollment code; or
4. Plan drops an option.

* How will I know if my enrollment is affected? You will receive a letter from your plan stating that it is no longer participating in the FEHB Program, is dropping an option, or is no longer providing services in your area. You can contact your Human Resources (HR) office with additional questions.

* What do I do now that I know my enrollment is affected? You may need to change your enrollment to another plan during Open Season or during the time period set by OPM. Follow the instructions in the letter you received from your plan.

* My plan is leaving the FEHB Program entirely. What happens if I don’t change to another plan? If you are a Federal employee, annuitant, or Tribal employee and you do not change plans, you will be automatically enrolled into the lowest-cost nationwide plan option available as designated by OPM.

* My plan is reducing its service area AND eliminating my enrollment code. What happens if I don’t change to another plan? If you are a Federal employee, annuitant, or Tribal employee and you do not change plans, you will be automatically enrolled into the lowest-cost nationwide plan option available as determined by OPM.

* My plan is reducing its service area where I live/work but keeping my enrollment code. What happens if I don’t change to another plan? You will only have coverage in your area for emergency care services in the new plan year. You must travel to the plan’s remaining service area to receive full coverage for your care.

* My plan is eliminating my option. What happens if I don’t change to a remaining option or to another plan? You will be automatically enrolled into one of the plan’s remaining options. If no options remain, or the remaining option is a High Deductible Health Plan (HDHP), you will be automatically enrolled into the lowest cost nationwide plan option as indicated by OPM. Please refer to the letter you received from your plan for more information.

* If my High Deductible Health Plan (HDHP) is terminating coverage in my service area or is leaving the FEHB Program, what happens to my Health Savings Account (HSA) or my Health Reimbursement Arrangement (HRA)? If you wish to continue contributing to your HSA, you must enroll in another HDHP. If you do not enroll in another HDHP, you can withdraw money from your HSA for qualified medical expenses. You should check Internal Revenue Service (IRS) guidance on use of HSA dollars for non-qualified medical expenses. You should work directly with your fiduciary to make decisions regarding your HSA. Unless you use your HRA credits, they will be forfeited once your plan terminates.

* How do I change my enrollment to another plan? If you are a Federal employee, you may be able to use your agency’s online self-service system such as Employee Express, MyPay, Employee Personal Page, EBIS, etc. If you need additional help, contact your HR office.

If you are a Tribal employee, contact your Tribal Employer.

If you are a Civil Service Retirement System (CSRS) or Federal Employees Retirement System (FERS) retiree, call Open Season Express at 1.800.332.9798 or access Open Season Online at https://retireeFEHB.opm.gov. Outside of Open Season contact the Retirement Office through email at retire@opm.gov or by phone at 1-888-767-6738.
If you receive an annuity from another retirement system, please visit www.opm.gov/healthcare-insurance/healthcare/enrollment/ for information on how to change your enrollment.

* When does my old plan or option stop providing coverage and my new plan or option begin? Your old plan will continue to provide benefits until the plan you’ve elected during Open Season or during the time period provided by OPM becomes effective. There will be no gaps in coverage.

* What are my rights if I’m pregnant or I have a chronic or disabling condition? Under the Patients’ Bill of Rights, enrollees who are seeing a specialist for a chronic or disabling condition or who are in the second or third trimester of a pregnancy have a right to continued treatment for up to 90 days of care (or treatment through the end of post-partum care) following notice that a health plan is leaving the FEHB Program.

* How can I compare the different health plans available to me? There are several resources available to help you compare plans.
  - Compare Health Plans www.opm.gov/fehbcompare

* Where can I find the plan brochures?
  - Call the plan directly
  - Contact your HR office or Tribal Employer

* How do I find out if my doctor is in a health plan’s network? You can find provider directories at www.opm.gov/FEHBbrochures or for Tribal employees www.opm.gov/healthcare-insurance/tribal-employers/plan-information/plans/ or call your plan, or contact your provider.

* I have other supplemental coverage through my old FEHB plan. What happens to that coverage? Since your plan is terminating coverage, any supplemental coverage that you have through your plan may also terminate. Please contact your plan for more information about your supplemental coverage.

* Where can I go for more information on Open Season? Visit www.opm.gov/openseason; or for Tribal employees www.opm.gov/healthcare-insurance/open-season. The Open Season website will be updated with information by early November.

* Who can I contact with additional questions? If you have additional questions, you can contact your plan directly or your local HR office or Tribal employer.

1 Tribal employees are not eligible for FEDVIP.