

SIGNIFICANT CHANGES FOR 2017

Several Federal Employees Health Benefits (FEHB) carriers made significant changes to their plans for 2017 that may impact your enrollment, and a new rule from the Office of Personnel Management (OPM) may change how you respond to these changes. It is strongly advised that you take action during Open Season to avoid the possibility of being enrolled in an unwanted plan.

There are four ways in which your plan's enrollment can be affected. Each may require a different response, so be sure to identify your situation and conduct the appropriate follow up. Your plan may:

1. Leave the FEHB program entirely
2. Reduce its service area and eliminate its enrollment code
3. Reduce its service area and keep its enrollment code
4. Eliminate an option

If your plan is affected in 2017 and you do not elect new coverage during Open Season (November 14 - December 12, 2016), you will be automatically enrolled in the remaining option for your current plan or you will be automatically enrolled in the Standard Option of the GEHA Benefit Plan, which is the lowest-cost nationwide plan option for

2017 as determined by OPM. In previous years, employees who chose not to act lost FEHB coverage for the next plan year. Not taking action this year will trigger an automatic enrollment for continued coverage.

If your plan is impacted by one of the four actions above and you are planning to utilize other health insurance options, such as joining a spouse's plan, you must submit a Standard Form (SF) 2809, *Health Benefits Election Form*, to OHCAccess during Open Season to report the cancellation.

To view plan changes for 2017, go to the OHCAccess link [here](#), and read the Benefits Administration Letter (BAL) 16-404 along with its attachments. If you are affected by a plan change, you should receive a notification from your health plan carrier, as well as receive a letter from OHCAccess explaining the significant plan changes and actions you will need to take.

If you are pregnant, have a chronic or disabling condition, or have supplemental coverage, you are encouraged to review BAL 16-404's Attachment 2, *Federal Benefits FastFacts*, and any plan information you receive. The Patients' Bill of Rights may provide a stipulation allowing an extension of coverage in these instances.