



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
WASHINGTON, D.C. 20224

HUMAN CAPITAL OFFICE

Attachment A - Eligible for Health Benefits & Life Insurance

This notice is to inform you of your recent opportunity to enroll in the Federal Employees Health Benefits (FEHB), Federal Employees' Group Life Insurance (FEGLI), and Federal Employees Dental and Vision Insurance (FEDVIP) Programs. This is an informational notice, and if you have already submitted forms for enrollment in these programs, no further action is necessary.

Forms and guides pertaining to the FEHB and FEGLI programs are:

- FEHB: SF 2809, *Health Benefits Election Form*, and RI 70-1, *FEHB Program Guide*
- FEGLI: SF 2817, *Life Insurance Election*, and FE 76-21, *FEGLI Program Booklet*

You may obtain these forms by contacting the Employee Connection at 1-800-829-6007; or download them from the Office of Personnel Management (OPM) website <http://www.opm.gov/insure>

FEHB

It is your responsibility to carefully review your plan choices in order to select the plan which best meets your needs. To obtain information on the individual insurance plans, you must either contact the carriers directly or visit the FEHB website listed above. When contacting the insurance carriers, it is important to inform them that you are a federal employee to ensure you receive the correct enrollment information.

If you elect to enroll in FEHB, you must complete the health insurance enrollment questionnaire **within 60 days** of your start date; otherwise, you will not be eligible to enroll until the next Benefits Open Season or you experience a valid qualifying life event (QLE). Note: If you elect self and family coverage, you must review the SF 2809 instructions carefully to ensure you only list eligible family members on the plan.

Your health insurance coverage will become effective on the first day of the pay period following the receipt of a completed health insurance questionnaire, and that follows a pay period during any part of which you were in a pay status (5 CFR 890.301). A confirmation of enrollment letter will be mailed to your address of record within 2-3 weeks of the date the form is processed.

If you transferred to IRS without a break in service of more than 3 days, IRS will transfer your current enrollment. Unless you have a valid Qualifying Life Event (e.g., moved out of HMO's service area) your current enrollment will remain in effect.

Note: If you are working a part-time tour of duty, your FEHB premiums will be pro-rated. For more information on how your premium is calculated, contact the Employee Resource Center (ERC) at the number listed at the end of this notice.

FEGLI

You will be automatically enrolled in Basic life insurance coverage on your first day in pay and duty status following the date you became eligible.* If you choose to elect Optional life insurance you must complete the life insurance enrollment questionnaire **within 60 days** of your start date. If you do not election Optional life insurance within the established timeframe, you will continue with Basic coverage only. You must sign and date for the Basic life insurance coverage in order to elect Optional coverage

FEGLI waivers will become effective the end of the pay period in which the life insurance questionnaire is received in the IRS Ogden Payroll Center. Election of Optional life insurance will become effective on or after the day your life insurance questionnaire is received, provided the pay and duty status requirements are met.

*** Prior Service Election:** If you return to work for the Federal Government after a break in service of less than 180 days, you will automatically be given the same coverage you had in your prior position. **You may choose to decrease or waive your FEGLI coverage at any time but there are limited opportunities to increase coverage.**

If you return to work for the Federal Government after a break in service of more than 180 days, you will automatically get Basic insurance (even if you previously waived it) and the same Optional insurance (if applicable) you had in your prior position. **You may elect any type of Optional insurance (if you don't already have the maximum) within 60 days of the date of your start date. If you do not submit a new election, you will retain the Optional insurance you had before you separated and any coverage that you had previously waived will be waived again. See the FEGLI Program Booklet for additional information.**

***NOTE:** If you are placed in non-pay status, you are still required to submit the health insurance and life insurance enrollment questionnaires within the allotted timeframes; however, if your health and life insurance elections are received in our office after you have been placed in a non-pay status, the effective date of health and/or Optional insurance may be delayed until after you return to a pay status.

What happens to your benefits if you are placed in a non-pay status?

- FEDVIP - If you experience a period of leave without pay for two consecutive pay periods, FEDVIP will switch you to a direct bill method. Paying the premium by direct bill means, you will receive a bill from BENEFEDS at your home mailing address during the months your premiums are due. If you do not pay your premium by the due date specified on the bill, your coverage will be terminated.
- FEGLI – Premiums are paid by the Government while you are in Non-Pay/insufficient pay status for up to 12 months. You will not be required to pay back premiums when you return to duty.
- FEHB – When your salary is insufficient to pay the employee portion of the FEHB premium for the pay period, you will receive a FEHB Options While in Non-Pay Status letter. In this letter, you will have one of two choices:
1. Terminate your coverage: If you elect to terminate FEHB coverage, you will have 60 days after your initial return to pay status to re-enroll.
 2. Continue your coverage and either pay the premiums directly to the National Finance Center or accrue a debt. Debt collection will begin following your return to duty/sufficient pay status.

If you elect to continue coverage and accrue a debt, if your pay becomes insufficient again (for example, non-pay status, unpaid leave, or not enough salary to cover payments for any reason, you must send payment for your premiums by check or money order directly to the NFC. If you do not send your payment when due, your debt will become delinquent. Likewise, if you separate from employment, your HIR debt will become due immediately and in full. If you do not pay the debt in full, it will become delinquent.

If the HIR debt becomes delinquent, we will start processes to collect it through salary offset as provided for in 5 U.S.C. § 5514.

Once delinquent, we will immediately begin to collect 15 % of your disposable pay per pay period until the debt is paid in full or otherwise resolved. We will also refer delinquent non-tax debts that are over 120 days old to the Department of Treasury, Bureau of the Fiscal Service (BFS), for further enforced collection actions. These actions could include the following:

- Reporting information to credit bureaus
- Referring debts to collection agencies,
- Garnishing wages
- Offsetting salary or other federal payments such as tax refunds, awards, travel reimbursements, and advances, as allowed by law

- Treasury charging an additional administrative fee of at least 28% if referred to them for collection.

Note: Having a delinquent debt is a violation of the Office of Government Ethics (OGE) Standards of Ethical Conduct, Section 2635.809 and could result in disciplinary action, up to and including removal from the Service.

Beginning January 1, 2014, the Affordable Care Act's individual shared responsibility provision requires each individual (including children) to maintain minimum essential health coverage (known as "minimum essential coverage" or "MEC") for each month of the year beginning; or qualify for an exemption; or make a payment when filing his or her Federal income tax return.

If your FEHB enrollment is terminated, then you should review the information on the IRS website at <https://www.irs.gov/Affordable-Care-Act/Employers/Questions-and-Answers-on-Employer-Shared-Responsibility-Provisions-Under-the-Affordable-Care-Act> regarding the individual shared responsibility requirements.

FEDVIP

You can find dental and vision plan information, including premiums, on the OPM website at <http://www.opm.gov/healthcare-insurance/dental-vision/plan-information>. This site also provides links to each plans website where you can view detailed information about benefits and preferred providers.

You can enroll on the Internet at www.BENEFEDS.com within 60 days from the date you became eligible. BENEFEDS is a secure enrollment website sponsored by OPM. For those without access to a computer, call 1-877-888-FEDS (1-877-888-3337) (TTY number, 1-877-889-5680). ***Note: You cannot enroll in a FEDVIP plan using the Health Benefits Election Form (SF 2809) or through Employee Personal Page.**

If you do not elect FEDVIP enrollment at this time, you may elect to enroll during the annual Benefits Open Season or following select Qualifying Life Events. Please visit the OPM website for additional information at <http://www.opm.gov/healthcare-insurance/dental-vision>.

Additional Health Enrollment Option:

Eligibility for FEHB also allows you the opportunity to enroll in Flexible Spending Account (FSA). An FSA allows employees to pay eligible medical and dependent care expenses with pre-tax dollars. By using pre-tax dollars to pay for eligible health care and dependent care expenses, an FSA gives you an immediate discount on these expenses that equals the taxes you would otherwise pay on that money.

How to enroll in FSA:

You can apply either online at www.FSAFEDS.com or contact a FSAFEDS customer service representative by calling toll-free 1-877-372-3337 or TTY/TDY 1-800-952-0450 or email a specific question to fsafeds@adp.com to learn more about the program.

Your FSA contributions will be made by payroll deduction and are completely voluntary. Your employer will not make contributions to your account. The accounts are funded with pre-tax earnings, which reduces your taxable income. Therefore, each year the IRS will revise the max and minimum pre-tax FSA contribution limits. Additional information on the FSA program can be found on OPM's website [Flexible Spending Accounts \(opm.gov\)](http://www.opm.gov/healthcare-insurance/dental-vision/plan-information).

FSA open seasons normally run simultaneously with the Federal Employees Health Benefits Open Season which runs from Monday of the second full workweek in November through the Monday of the second full work week in December. **Employees must re-enroll each year to continue to participate.**

If you have any questions concerning this notice you may open a ticket through the [IRS Service Central](#) ticketing system or contact the Customer Assistance Line at 1-866-743-5748, option 1 and then option 2 for Payroll and Benefits.