

## Eligibility for FEHB Coverage

Most Federal employees on permanent appointments are eligible to be covered by FEHB. Coverage may be continued on limited or intermittent appointments for employees appointed without a break in service of 3 or more days following service during which they were insured.

Within 60 days after becoming eligible, employees must register to enroll or not enroll in a plan. This is done by completing SF 2809, Health Benefits Registration Form. Personnel offices should have a follow-up system to remind employees of the 60-day deadline and ensure that employees register timely. If the employee fails to register, the personnel office must fill out the SF 2809 and, in the Remarks section, state that the employee was contacted but declined or failed to register. Enrollments become effective on the first day of the pay period that begins after receipt of the completed SF 2809 in the personnel office.

Each plan has the following types of enrollment:

- **Self only**-- provides benefits only for the enrolled employee. An employee may enroll for self only even if he or she has a family. For example, in situations where both husband and wife are employees and eligible to enroll, each may enroll for self only. There is usually a small financial advantage for them to register for separate self only enrollments, if there are no children to be covered.
- **Self and family**-- provides benefits for the enrolled employee and eligible family members. It automatically covers all eligible family members, even if they are not listed on the SF 2809, and even though the enrolled employee may wish to exclude some of them. Generally, family members are the employee's spouse and unmarried dependent children under age 22. Stepchildren and foster children are included if they live with the employee in a regular parent-child relationship. An employee may not enroll if covered as a family member under another enrollment, except when the employee has children who are otherwise ineligible for coverage.

An employee may change from a self and family to a self-only enrollment or cancel an enrollment at any time. However, an employee can only enroll or make other changes in enrollment in connection with specific events. These events include changes in family status or loss of coverage under enrollment of a family member, as well as some employment related events such as return from military service. These opportunities to enroll or change enrollment, and timeframes for doing so, are covered in Subchapter S7 of the Federal Employees Health Benefits Handbook. Most enrollments or changes in enrollment are effective on the first day of the pay period that begins after receipt of the SF 2809 in the personnel office. Cancellations are effective the last day of the pay period after the one in which the SF 2809 is received.

A health benefits open season is conducted each year, usually from Monday of the second full workweek in November through Friday of the first full workweek in December. During the open season an eligible employee who is not enrolled may register to enroll. An employee who is enrolled may change from one plan or option to another, from self only to self and family, or make any combination of these changes. The effective date of open season enrollments or changes is the first day of the first pay period that begins on or after January 1.

Temporary employees who have completed 1 year of continuous employment may be eligible to participate in the FEHB program. Employing offices should establish potential FEHB eligibility dates for temporary employees and notify them when they become eligible to enroll. The employee then has 60 days to enroll. Temporary employees enrolled under this provision must pay the full premium amount with no Government contribution.