

The FEHB Program—new Self Plus One enrollment type FAQ



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Below are some frequently asked questions about the new Self Plus One enrollment in the Federal Employees Health Benefits (FEHB) Program.

Why does the FEHB Program have a new Self Plus One enrollment type?

Section 706 of the Bipartisan Budget Act of 2013 amends section 8905 of Title 5, United States Code, to add a Self Plus One enrollment type to the existing FEHB Program’s Self Only and Self and Family enrollment types.

When will the new Self Plus One enrollment type be implemented?

The implementation date for the new Self Plus One enrollment type will be Jan. 1, 2016.

Who will the Self Plus One enrollment type cover?

The Self Plus One enrollment type will cover the enrollee and one eligible family member designated by the enrollee.

When can I enroll or change my FEHB enrollment to Self Plus One?

You can enroll in FEHB or change your FEHB enrollment during the 2015 Open Season, or when you experience an FEHB-specific qualifying life event (QLE) beginning in 2016.

What is the effective date of a 2015 Open Season Self Plus One enrollment or enrollment change?

Generally, coverage begins on the first day of the first full pay period in 2016.

Who is an eligible family member who can be covered under a Self Plus One enrollment?

- Your spouse (including a valid common law marriage)
- Your child under age 26, including:
 - A recognized natural child
 - A legally adopted child
 - A stepchild (including child of same-sex domestic partners in certain states)
 - A child age 26 or over who is incapable of self-support because of a mental or physical disability that existed before age 26 as assistance
 - A foster child who meets certain requirements with your signed certification

For complete details on family member eligibility, visit opm.gov/healthcare-insurance/healthcare/reference-materials/reference/family-members.

How do I enroll or change my FEHB enrollment to Self Plus One?

Contact your employing/human resources office for assistance.

Where do I go for additional information or more details?

You can find more information at opm.gov/healthcare-insurance/special-initiatives/self-plus-one.

Anthem and Cigna Corporation merge

On July 24, Anthem, Inc. and Cigna Corporation announced that they have entered into an agreement whereby Anthem will acquire Cigna. According to their press release, the transaction is expected to close in the second half of 2016, pending all customary approvals.

As I have received a lot of questions in regard to this matter, I would like to address the issue and confirm that we do not anticipate any changes for our members. Our current contract with Cigna remains in effect. Upon the expiration of this contract, we will determine the best option for our members and the NALC Health Benefit Plan.

Please see below for comments from the president and CEO of Anthem and president and CEO of Cigna:

“We are very pleased to announce an agreement that will deliver meaningful value to consumers and shareholders through expanded provider collaboration, enhanced affordability and cost of care management capabilities, and superior innovations that deliver a high quality health care experience for consumers. We believe that this transaction will allow us to enhance our competitive position and be better positioned to apply the insights and access of a broad network and dedicated local presence to the health care challenges of the increasingly diverse markets, membership, and communities we serve. The Cigna team has built a set of capabilities that greatly complement our own offerings and the combined company will have a competitive presence across commercial, government, international and specialty segments. These expanded capabilities will enable us to better serve our customers as their health care needs evolve.” —*Joseph Swedish, president and chief executive officer of Anthem*

“Our companies share proud histories and an even brighter future. Going forward our new company will deliver an acceleration of innovative and affordable health and protection benefits solutions that help address our health system’s challenges and provide supplemental insurance protection, and health care security to consumers, their families, and the communities we share with them. The complementary nature of our businesses will allow us to leverage the deep global health care knowledge, local market talent, and expertise of both organizations to ensure that consumers have access to affordable and personalized solutions across diverse life and health stages and position us for sustained success.” —*David M. Cordani, president and chief executive officer of Cigna*