

UNITED STATES OFFICE OF PERSONNEL MANAGEMENT

Federal Benefits Open Season

November 9, 2020 – December 14, 2020



2020 Federal Benefits Open Season

November 9 through December 14, 2020

Healthcare and Insurance – Office of Personnel Management

The annual Federal Benefits Open Season for health insurance, dental and vision insurance and flexible spending accounts effective during the 2021 plan year will be held from November 9 through December 14, 2020. Federal Benefits Open Season gives Federal employees and other eligible individuals the opportunity to review their plans, make changes, and enroll in coverage. This is also the time for annuitants to re-evaluate their plans and decide if they are optimally covered. In the midst of the COVID-19 pandemic, OPM performed benefit and rate negotiations for the 2021 plan year. OPM is keenly aware of the value and importance of Federal health benefits, especially during this time, and OPM continues to focus on offering quality health, dental, and vision benefits that are affordable to the Federal family.

Benefit Programs and the 2021 Rates

The Federal Employees Health Benefits (FEHB) Program

Established in 1960, the FEHB Program is the largest employer-sponsored health insurance program in the United States, providing health insurance benefits for about 8.2 million Federal civilian employees, annuitants and their families and certain Tribal employees and their families. The government contribution toward premium (for non-Postal employees and annuitants) is 75 percent of the premium for an enrollee's particular plan choice or the maximum government contribution, whichever is less. The maximum government contribution is calculated as 72 percent of the weighted average of all plan premiums.

Federal employees and annuitants enjoy the widest selection of health plan choices from which to choose in the country. For the 2021 plan year there will be 276 plan choices across the entire FEHB Program. The actual number of options available to any given enrollee will be lower and will vary by geographic location but will include a minimum of 18 nationwide plan choices, along with local and regional plans as well. Information on plans available by geographic location can be found in the OPM [Plan Comparison Tool](#) (PCT). Specific benefits information for individual plans will be posted on the [OPM website](#) in early November.

OPM has taken multiple actions to safeguard the health and well-being of the Federal workforce and annuitants during the COVID-19 pandemic. All FEHB Carriers waived cost-sharing and prior authorization requirements for COVID-19 diagnostic and antibody testing in response to the Families First Coronavirus Response Act (FFCRA) and the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). To facilitate and support the Federal workforce's ability to receive telehealth or other remote health care services associated with the treatment of COVID-19, FEHB Carriers were strongly encouraged to waive associated cost-sharing and prior authorization requirements. Once an FDA-approved vaccine becomes available for COVID-19, all FEHB Carriers must rapidly cover it without any cost-sharing in less than 15 business days.

2021 FEHB Program Rates

Rate averages below are based on 2020 plan enrollment.

- The overall average increase for non-Postal employees and annuitants will be 3.6%.
- The Government contribution will increase by 3%.
- The enrollee share will increase an average of 4.9%.
- For Self Only, the average premium increase is 3.5%.
- For Self Plus One, the average increase is 3.5%.
- For Self and Family, the average increase is 3.7%.

The overall average increase of 3.6% is lower than premium increases projected for or reported by other large private and public sector employers, which range from 4-10%.

Maximum Government Contribution and Weighted Average Premiums

The 2021 biweekly maximum government contribution for non-Postal employees and annuitants (72% of the weighted average) is:

- \$241.58 for Self Only
- \$517.46 for Self Plus One
- \$562.25 for Self and Family

The monthly maximum government contribution (72% of the weighted average) is:

- \$523.42 for Self Only
- \$1,121.16 for Self Plus One
- \$1,218.21 for Self and Family

For 2021, the biweekly program-wide weighted average premiums with a government contribution are:

- \$335.53 for Self Only
- \$718.70 for Self Plus One
- \$780.90 for Self and Family

The monthly program-wide weighted average premiums with a government contribution are:

- \$726.98 for Self Only
- \$1,557.18 Self Plus One
- \$1,691.95 Self and Family

2021 FEHB Program Rates Summary

Rate averages below are based on the prior year’s enrollment.

All non-Postal and Annuitant Enrollees	
Overall average premium increase	3.6%
Average government share increase	3.0%
Average enrollee share increase	4.9%
44.4% of enrollees will see an increase of 5% or less in their share of premiums	

Plan Option	Non-Postal and Annuitant Enrollees Average Increase Per Biweekly Pay Period	Postal Enrollees Average Increase Per Biweekly Pay Period
Self Only coverage	\$4.67	\$3.89
Self Plus One coverage	\$10.90	\$9.82
Self and Family coverage	\$10.94	\$10.53

Historical Annual Average Premium Increases	
Year	Average Percent Increase
2021	3.6%
2020	4.0%
2019	1.3%
2018	4.0%
2017	4.4%

2021 FEHB New Plan Options:

We're pleased to welcome six new plan options to the FEHB in 2021.

- UnitedHealthcare Advantage Plan - High (new FEHB plan for 2021; all contiguous states and the District of Columbia)
- Kaiser Permanente - Northwest (Washington/Oregon) - Basic
- Kaiser Permanente - Washington (Washington/Idaho) - Basic
- Geisinger Health Plan Pennsylvania - Basic
- Dean Health Plan, Inc, Wisconsin - Basic
- Group Health Cooperative of South Central Wisconsin - Standard

Again, the actual number of options available to any given enrollee varies by geographic location and will include at a minimum 18 nationwide fee-for-service plans for the 2021 plan year that are open to all.

Plans no longer participating in the FEHB or terminating enrollment codes or plan options:

MercyCare Health Plans in Illinois and Wisconsin are leaving the FEHB Program in the 2021 plan year. Enrollees in these plans will have to select a new plan during Open Season; otherwise, per FEHB regulations, they will be automatically enrolled in GEHA's Indemnity Benefit Plan Elevate which is the lowest-cost nationwide plan option as determined by OPM for the 2021 plan year.

Aetna Open Access is terminating enrollment codes in the Tennessee service area. Enrollees in these terminating enrollment codes must make a positive election into another FEHB plan during Open Season or they will be enrolled in GEHA's Indemnity Benefit Plan Elevate which is the lowest-cost nationwide plan option as determined by OPM for the 2021 plan year.

The following plans are terminating these plan options at the end of 2020:

- Blue Shield of California (Standard)
- Health Net of California (Standard)
- CDPHP Universal Benefits, Inc. (High)
- GHI (HDHP)
- UPMC Health Plan (High)

Enrollees in the plan's terminating option will be automatically enrolled into another option offered by that plan unless they enroll in a different plan during Open Season. Enrollees in a terminating High Deductible Health Plan (HDHP) option who want to continue enrollment in 2021 in an HDHP and receive or make additional contributions to the Health Savings Account (HSA) must change to a different HDHP in the FEHB Program during Open Season. They need to contact their current 2020 HDHP HSA Fiduciary and the Internal Revenue Service (IRS) for any guidance and questions about their HSA, including tax considerations and penalties. If enrollees are interested in consolidating their HSA accounts, they also need to contact their upcoming 2021 HDHP HSA Fiduciary.

Enrollees will know in advance if their health plan option is terminating from two sources:

1. Pre-Open Season Letter from OPM to all agency benefit officers.
2. Notice to members from the terminating plans by mail.

The best way to find out what FEHB plan options are available in any given area for the coming plan year is to access the FEHB [Plan Comparison Tool](#) (PCT) and search by ZIP code. The 2021 plan information will be available in the tool the first full week of November. With enhanced features including medical account display for HDHPs and CDHPs, the PCT can help enrollees shop for healthcare coverage and determine which plan best suits their needs. Enrollees may also contact their Human Resources (HR) office with additional questions.

2021 FEHB Plan Choices Summary

- 276 health plan choices:
 - 18 Fee-For-Service plan choices open to all
 - 4 Fee-For-Service plan choices with availability limited to certain groups
 - 254 HMO plan choices

The plan choices include:

- 18 High Deductible Health Plan (HDHP) options
- 28 Consumer Driven Health Plan (CDHP) options

Medicare Part B and FEHB Plans

FEHB Carriers continue to address and respond to the needs of our annuitants who are also Medicare beneficiaries. There are FEHB plan choices that offer some type of Medicare Part B incentive – either through copay, coinsurance or deductible waivers or Part B premium reimbursement. The FEHB [Plan Comparison Tool](#) (PCT) makes this information more readily

available to enrollees and identifies plan choices with the Medicare Part B incentive. The PCT features a Medicare display that allows individuals to see exactly what they are expected to pay if they have both Medicare A and B as their primary coverage and FEHB as their secondary coverage.

The following plan options will offer reimbursement for part or all of an enrollee's Medicare Part B premium:

- Aetna Advantage (Advantage)
- APWU Health Plan (High)
- Kaiser Permanente - Mid-Atlantic States (High)
- Kaiser Permanente - Southern California (Standard)
- Medical Mutual of Ohio Southwest (Standard)
- Medical Mutual of Ohio Northeast (Standard)
- UnitedHealthcare Advantage Plan (High)

This is in addition to the plan options already offering a reimbursement for some or all of the Medicare Part B premium:

- Aetna Direct (CDHP)
- Blue Cross Blue Shield Service Benefit Plan (Basic)
- GEHA (High)
- Health Alliance Plan (High & Standard)
- Kaiser Permanente - Colorado (High & Standard)
- Kaiser Permanente - Northwest (Standard)
- Kaiser Permanente - Northern California (High)
- Kaiser Permanente - Southern California (High)
- Kaiser Permanente - Northwest (High)
- Kaiser Permanente - Washington (High & Standard)
- MD. I.P.A. (High)
- UnitedHealthcare Choice Plus Advanced (Tampa, Orlando, Miami, and Atlanta) (Value)
- UnitedHealthcare Choice Plus Advanced (Chicago, San Antonio, DC, Northern Virginia, and Maryland) (Value)
- UnitedHealthcare Choice Open Access HMO (High)
- UnitedHealthcare Insurance Co. Choice Plus Primary - East Region (High)
- UnitedHealthcare Insurance Co. Choice Primary - East Region (High)
- UnitedHealthcare Insurance Co. Choice Plus Primary - West Region (High)
- UnitedHealthcare Insurance Co. Choice Primary - West Region (High)

The Federal Employees Dental and Vision Insurance Program (FEDVIP)

The Federal Employees Dental and Vision Insurance Program (FEDVIP) is a voluntary program providing dental and vision benefits on an enrollee-pay-all basis to Federal civilian employees, annuitants, and their families, as well as uniformed service retirees and their families. In addition,

active duty family members are eligible to enroll in vision coverage. FEDVIP allows eligible persons to purchase dental and vision insurance on a group basis with competitive premiums and no pre-existing condition limitations for enrollment. Currently, there are approximately 3.0 million contract holders in dental plans and 1.9 million contract holders in vision plans. There are 23 dental plan options available across the Program with at least 14 dental plan options available to each potential enrollee. There are 10 vision plan options available to all potential enrollees.

During 2020, OPM completed a competitive application process for the Program, as the contract cycle for FEDVIP is seven (7) years. For Plan Year 2021, OPM selected insurance Carriers that provide comprehensive, accessible and competitively priced dental and vision coverage. In addition, there was an increased focus on wellness, health education, and quality. Specific plan information will be available on [BENEFEDS.COM](https://www.benefeds.com) in late October to early November. We encourage all prospective and current enrollees to shop and compare these new plan options.

The Federal Flexible Spending Account Program (FSAFEDS)

FSAFEDS is the flexible spending account program for most Federal employees across the government. FSAFEDS accounts are used for dependent and health care expenses and employee funds are set aside before taxes are deducted. Unlike the FEHB Program and FEDVIP, employees must re-enroll each year as coverage does not automatically continue into the next Benefit Period. Only active employees are eligible to participate – Internal Revenue Service regulations prohibit annuitants from participating. Visit [FSAFEDS.COM](https://www.fsafeds.com) to learn more.

Enrollees can use Health Care Flexible Spending Account (HCFSA) money for out-of-pocket health, dental, and vision care expenses (such as copayments, deductibles and non-covered expenses, from FEHB, FEDVIP, or any health, dental and vision coverage you may have). Most FEHB and FEDVIP Carriers participate in the FSAFEDS paperless reimbursement program so that there is no need to file a claim with FSAFEDS; you are automatically reimbursed for these expenses. Dependent Care Flexible Spending Accounts (DCFSA) can be used to pay for expenses employees incur to care for eligible dependents, whether children or adults.

Employees who enroll in a Health Care or Limited Expense (LEX) Health Care FSA during the annual Federal Benefits Open Season will have 12 months to spend their election, but can carry over up to \$550 of unspent funds to a Health Care or Limited Expense FSA in the following year, provided they re-enroll.

For the 2021 plan year, the minimum/maximum for DCFSA (dependent care) is \$100/\$5,000. The amounts for HCFSA and LEX HCFSA (limited expenses) are established annually by the Internal Revenue Service; the 2021 maximum will be announced later this year. Employees should visit [FSAFEDS.COM](https://www.fsa.feds.com) during Open Season to enroll for the 2021 plan year.



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