

Health Benefits Coverage for Noncareer Employees

The Federal Employees Health Benefits (FEHB) Program permits health insurance enrollment for certain noncareer (temporary) employees provided these employees meet certain eligibility requirements.

Who is eligible for noncareer FEHB coverage?

If you are a noncareer employee, you are eligible to enroll in the FEHB Program if you meet all the following requirements:

- 1.** Complete 1 year of current continuous employment without a break in service of more than 5 days;
- 2.** Have a predetermined regular scheduled tour of duty; and



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3. Maintain sufficient earnings to have the full cost of health insurance premium withheld from your biweekly pay. If you are a casual or transitional employee, you do not meet the 1-year requirement and, therefore, you are not eligible for noncareer FEHB coverage.

How are eligibility criteria defined?

- **Current** means beginning with the present and counting back 1 full year (365 calendar days).
- **Continuous** means employment with no break in service of more than 5 days. A break in service occurs when an employee is off Postal Service rolls. Leave without pay is not considered a break in service. Days on which a part-time employee is not scheduled to work are not considered a break in service.
- **Regular tour of duty** means a work schedule prescribed in advance (with consistent hours each pay period), to continue for at least 6 months.
- **Sufficient earnings** means that the earnings in each pay period must be sufficient to cover mandatory deductions in addition to health insurance premium withholdings. It must be expected that eligible noncareer employees will maintain the sufficient earnings requirement for at least 6 months. Mandatory deductions will be withheld from gross pay before health insurance premiums are withheld, in the following order:
(1) FICA, (2) Medicare,
(3) federal, state and local income taxes, and
(4) involuntary deductions.
- **Total health insurance premium** means the full group health premium cost. The Postal Service does not contribute toward health insurance cost for noncareer employees.

Who pays the premiums?

The total cost of health insurance premiums must be withheld from your earnings. The Postal Service will not pay any portion of the premium

cost. If, as an enrollee, you lose coverage due to insufficient earnings to pay health insurance premiums, you may not renew your enrollment until the next open season or until another event occurs that permits FEHB enrollment.

If you fail to maintain sufficient earnings to allow for health insurance premium withholdings, the unpaid premium is withheld in the following pay period provided there is a sufficient amount of earnings to cover the premium cost after mandatory deductions have been made.

When two adjustments for insufficient earnings have occurred, you are sent an invoice (Form 1903-DZ, *Invoice and Statement*) for the total amount due. You must pay the total amount billed within 30 days of the invoice date, or your FEHB enrollment will be terminated retroactive to the date the initial unpaid health insurance premiums were due. This means that you—not your health insurance plan—will be responsible for paying for any medical services received after the initial premium due date.

What is the time limit for election?

If you are eligible and wish to enroll, you must submit your FEHB election to your personnel office within 31 days from the date you initially become eligible. If you do not enroll when you first become eligible, you will have an opportunity to enroll during the next regularly scheduled health benefits open season or on the occurrence of an event that permits an enrollment opportunity under the FEHB Program.

As an interested, eligible employee, how do I enroll for coverage?

Obtain FEHB Booklet RI 70-8, *Enrollment Information Guide and Plan Comparison Chart for Certain Temporary Employees*, from your personnel office. It contains detailed information about enrollment, total premium rates, and comparisons of major features of each participating plan. Review the booklet, individual plan brochures, and other information helpful in choosing a health insurance plan.

You must register for FEHB health insurance coverage on Standard Form 2809, *Health Benefits*

Form, and Form 8141, *Notice to Noncareer Employees Eligible to Enroll in FEHBP*, available in your personnel office.

What is the effective date of my coverage?

The effective date of an enrollment, outside a regular FEHB Health Benefits open season, is the first day of the pay period that begins after your completed registration forms are received in the personnel office and that follows a pay period during any part of which you were in a pay status.

When may I change enrollment?

You may change enrollment during the FEHB open season, or when an event occurs that allows you to change enrollment. Your enrollment may be changed from Self and Family to Self Only at any time. Family members who lose coverage because you change to Self Only are entitled to the 31-day temporary extension of coverage for conversion to an individual (nongroup) contract.

How can my enrollment be terminated?

Your enrollment will end if you separate, cancel the enrollment, or fail to pay health insurance premiums within 30 days of the date of an invoice stating the total amount due. Nonpayment of health insurance premiums is considered to be a voluntary cancellation of enrollment.

When I leave the Postal Service, can I continue my coverage?

Yes. You and members of your family who lose coverage other than by cancellation (including cancellation by nonpayment of premiums) have a 31-day period of extended coverage, at no cost, for the purpose of converting to an individual (nongroup) contract with your health benefits plan. This applies whether or not you have the right to elect temporary continuation of coverage (TCC).

Also, when you separate from the Postal Service, you may be able to elect temporary continuation of health benefits coverage (TCC) for up to 18

months. Children of employees enrolled in FEHB who lose their status as family members, and certain former spouses of employees enrolled in FEHB, may be able to elect TCC for up to 36 months. Notice 423, *FEHB Temporary Continuation of Coverage*, provides information concerning TCC and is available from your personnel office.

If you elect TCC instead of the conversion policy, you will have another 31-day period of extended coverage, at no cost, and another opportunity to convert to an individual (nongroup) contract when the TCC ends for any reason other than cancellation.

If I am converted to career status, how will that effect my enrollment?

Your conversion to career status will be considered an event that permits you to continue the same coverage or to change plans, options, and/or types of enrollment.

If I am converted to career status and then retire, will it affect my eligibility for health coverage in retirement if I have not elected coverage as a noncareer employee?

A prior decision not to enroll in the FEHB Program under the temporary provisions will not affect future eligibility to qualify for FEHB coverage during retirement. Generally, an employee cannot continue FEHB coverage into retirement unless the employee has been enrolled since the first opportunity, or for the 5 years of service immediately before retirement. However, the opportunity to enroll in the FEHB Program as a temporary employee is not considered the first opportunity for purposes of determining eligibility for postretirement FEHB coverage.

Where can I obtain more information?

Personnel offices can provide additional information concerning noncareer FEHB coverage.

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