

Major Functional Series 400: PERSONNEL
ADS Chapter 496: FSN HEALTH AND ACCIDENT COVERAGE (HAC)

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496.1 Authority

1. [22 USC Section 2395 \(e\)](#)
2. [22 USC Sections 3922](#) and [3968\(b\)](#)

496.2 Objective

* This chapter provides guidance on the **Health and Accident Coverage (HAC) Plan established for Foreign Service National (FSN) and Third Country National (TCN) employees, whether direct hire or on a personal services contract, who plan to travel to the U.S. or to a third country on official business. Throughout this chapter, this plan is referred to as the FSN HAC Plan.**

496.3 Responsibility

1. The Mission Executive Officer or designated representative is responsible for:

- * a. Ensuring that all Foreign Service Nationals (FSNs) and Third Country Nationals (TCNs) who are scheduled to travel to the U.S. **or to a third country** on official business are enrolled in the **HAC Plan**;
- b. Ensuring that FSNs and TCNs undergo a medical examination **before departing post** for the purpose of identifying pre-existing conditions prior to requesting enrollment under the **FSN HAC Plan**;
- c. Coordinating the preparation of waiver documentation for insurance enrollments of FSN and TCN employees with pre-existing conditions;
- d. Reviewing/approving requests for FSN and TCN **HAC** enrollments, and transmitting them to the **Special Programs Team, Personnel Operations Division, Office of Human Resources (M/HR/POD/SP)**;
- e. Advising FSN and TCN employees of the terms, conditions, and exclusions of the FSN **HAC** policy and of **the employees'** responsibilities.

2. FSN and TCN employees are responsible for:

- * a. Advising the Executive Office or designated representative of their prospective official travel to the U.S. **or to a third country** and requesting instructions for arranging a medical examination;
- b. Preparing requests for insurance enrollment in accordance with this chapter's guidelines and submitting such requests to the Executive Officer for review and approval;
- * c. Obtaining health **and accident** insurance coverage for personal leave travel that will be taken in conjunction with official travel to the U.S. **or to a third country; and obtaining health and accident insurance coverage for accompanying dependents, if applicable.** Employees must contact the insurance company directly to purchase this insurance;

3. The **Special Programs Team** of the Bureau for Management, Office of Human Resources, **Personnel Operations Division (M/HR/POD/SP)**, is responsible for:

- a. Administering the FSN **HAC** program;
- b. Submitting FSN and TCN **HAC** enrollment requests to the insurance company;
- * c. **Sending participants confirmation of enrollment and necessary contact information to be presented to the caregiver in case of an emergency;**
- d. Advising **participants** on how to file a claim; and
- e. Authorizing the Operating Expense Team of the Accounting Division, of the Office of Financial Management (M/FM/A/OE) to pay the insurance premium.

* 4. The Bureau of Management's Office of Procurement (M/OP) is responsible for contracting with a U.S. private insurance carrier to provide health and accident coverage for FSN and TCN employees.

* 5. The Office of Budget of the Bureau for Management (M/B) **is responsible for funding** premiums for health and accident coverage for FSN and TCN employees.

496.4 Definitions - N/A

496.5 POLICY

The Agency's official policies and corresponding essential procedures are as follows:

496.5.1 ELIGIBILITY

* Foreign Service Nationals (FSNs) and Third Country Nationals (TCNs), direct-hire and personal services contract employees (**i.e.**, those employees paid in accordance with the local compensation plan) who are scheduled to travel to the U.S., **or to a third country**, on official business are eligible for enrollment in the **FSN Health and Accident Coverage (HAC) Plan**.

a) Enrollment is mandatory for FSN and TCN employees who meet the following conditions:

1. They are not covered under a local medical travel plan;

* 2. They are insured under a local medical travel plan **that** does not cover travel to the U.S., **nor to a third country**;

3. Insurance coverage under a local medical travel plan is based on local rates.

* b) U.S. citizens and U.S. dual nationals **are not eligible to participate in this plan**.

E496.5.1 Eligibility - N/A

496.5.2 COVERAGE

* **Medical conditions are covered up to the customary reasonable limits as established by the insurance carrier, and are subject to a \$10 deductible per incident.**

E496.5.2 Coverage

* a) **Eligible Medical Expenses**

* **The following types of medical costs are covered up to the customary reasonable limits, subject to the \$10.00 deductible:**

* 1. **Fees for diagnosis and treatment by a physician, surgeon, registered nurse, professional anesthetist, or radiologist;**

- * 2. Hospital charges (in and outpatient);
- * 3. Laboratory, diagnostic and X-ray examinations;
- * 4. Drugs and medicines for outpatient treatment that require a physician's written prescription, and that can only be dispensed by a licensed pharmacist;
- * 5. Rental charge for durable medical equipment, or the purchase of this equipment, whichever is less;
- * 6. Emergency medical evacuation related to injuries or sickness;
- * 7. Repatriation of remains related to the death of a covered employee.
- * b) Limited and Supplemental Benefits and Exclusions Benefits are subject to the limitations, exclusions and terms of the policy and cease upon termination of coverage.
- * c) Periods of coverage
 - * 1. Coverage begins at 12:01 a.m. on the start date of coverage on the enrollment request. Missions must show the employee's departure date from his/her home country (or country of regular domicile) as the insurance effective date.
 - * 2. Coverage ends at 11:59 p.m. on the end date of coverage on the enrollment request. Missions must add one day onto the employee's scheduled arrival date in his/her home country (or country of regular domicile) to allow for coverage in transit and when flight delays occur. Requests to extend coverage beyond the original end date must be submitted by the mission to M/HR/POD/SP.
 - * 3. Coverage of a newborn child of an employee will be automatic for 31 days from the date of birth, if the birth occurs while the coverage is in force, and is subject to the particular coverage and amounts of insurance as specified in the Schedule of Benefits for Eligible Dependents.

496.5.2a COVERAGE RELATED TO PREGNANCY

* Although the insurance plan covers problems resulting from pregnancy, Missions shall not authorize expectant employees to travel unless their return to the home country will be completed by the end of the second trimester of the pregnancy. Missions shall not waive this provision.

The policy also applies to expectant dependents desiring to accompany employees on official travel to the U.S. at their personal expense.

***E496.5.2a Coverage Related to Pregnancy – N/A**

496.5.3 ON THE JOB ACCIDENTS AND RELATED ILLNESSES

Work-related accidents and illnesses and associated medical costs are covered under the Workers' Compensation Program (**OWCP**) of the Department of Labor and **not under this plan.**

E496.5.3 On the Job Accident and Related Illnesses - N/A

496.5.4 PRE-TRAVEL MEDICAL CLEARANCE

Before departing post and prior to requesting enrollment under the FSN **HAC program**, employees must undergo a medical examination to determine pre-existing conditions.

* Missions shall establish their own pre-travel medical examination guidelines. **Documentation of medical clearance will be retained at post in the employee's file.**

E496.5.4 Pre-Travel Medical Clearance

The pre-travel medical examination shall require, at a minimum:

- a) Medical tests to detect high blood pressure, cardiovascular or circulatory conditions, diabetes, tuberculosis, hepatitis, kidney/bladder problems, and asthma;
- b) A clinical evaluation of:
 1. **Head, nose and mouth;**
 2. **Ears and auditory acuity;**
 3. **Eyes;**
 4. **Lung and chest;**

5. **Heart** (rhythms and sound);
6. **Abdomen**; and
7. **Spine, arms and legs** (strength, range of motion).

c) A medical history on any injury or illness which was contracted or manifested itself, or for which a licensed physician was consulted, or for which treatment or medicine was prescribed within the past twelve months.

* A medical examination taken within six months of the scheduled departure date is acceptable for purposes of compliance with the pre-travel medical examination requirement, provided the examination followed Mission examination guidelines.

496.5.5 PRE-EXISTING MEDICAL CONDITIONS

* Missions desiring to send an employee with a pre-existing condition on official travel **will** assume full liability for medical costs associated with such conditions and must document their acceptance of this liability **at the time of enrollment**.

Employees retain their eligibility for coverage for accidents and/or illnesses not associated with identified pre-existing conditions. Pre-existing conditions related to pregnancy shall not be waived.

Missions shall be required to substantiate compliance with the requirement for a pre-departure medical examination **if** a question concerning pre-existing conditions arises during the claims process. Missions must **advise the employee to keep a** record of any special condition and treatment for the condition on their person at all times while **on travel status**.

E496.5.5 Pre-Existing Medical Conditions - N/A

496.5.6 PERSONAL TRAVEL

* The FSN **HAC** plan does not cover personal travel **nor the travel of dependents** in conjunction with official travel. **Employees must contact the insurance company directly to purchase personal and dependent insurance under its Preferred Health Plan.**

Missions shall not authorize employees to take personal travel in conjunction with official travel unless employees **provide** proof that they

have obtained insurance coverage for the period that they are in personal travel status.

- * Missions shall **ensure** that dependents accompanying employees on official travel at their personal expense have either adequate insurance coverage or are enrolled in the plan. Missions shall not waive this policy provision.

E496.5.6 Personal Travel - N/A

496.5.7 INSURANCE COST AND DEDUCTIBLE

- * USAID/W shall pay for the cost of enrollment under the insurance plan for FSNs and TCNs on official travel **to the U.S., or to a third country**. Missions, however, will be expected to pay the **\$10** deductible per incident as well as any medical costs in excess of the customary and reasonable limits. Appropriate wording must be included in the Travel Authorization (TA) to authorize these payments as allowable travel expenses.

E496.5.7 Insurance Cost and Deductible

- * **Suggested wording to be included in the Travel Authorization to authorize medical payments is as follows:**

- * **"The FSN HAC plan \$10.00 deductible per covered incident and medical costs in excess of the customary and reasonable limits are allowable expenses, subject to approval by the authorizing officer."**

- * **Insurance premiums for personal travel and/or travel of dependents are established by the insurance company. These premiums are based on a monthly rate and vary upon the age of the traveler.**

496.5.8 ENROLLMENTS

Requests for enrollment must be submitted to **M/HR/POD/SP**.

E496.5.8 Enrollments

- * **As soon as travel arrangements are initiated at post or at least five working days prior to the initiation of travel, whichever comes first, Missions must submit requests for insurance coverage via e-mail to fnsinsur@hr.pod@aidw, the FSN Insurance Request mailbox. Requests must include the following information:**

- * **First Name:**

Last Name:
Birth Date:
Sex: () M () F
Start Date:
Departure date from post:
End Date:
(Departure date from US plus one day)
Medical Certificate: () yes () no
(Pre-departure medical examination)
Medical Waiver on file: () n/a () yes
(Mission's acceptance of liability)

- * **Upon receipt of the above information, M/HR/POD/SP will enroll the employee under the plan. An e-mail confirmation will be forwarded to post. The e-mail will include the necessary contact information to be presented to the caregiver (physician, hospital, etc.) in case of an emergency.**

496.5.9 PROCESSING CLAIMS

- * **Claims for medical costs incurred under the insurance plan must be submitted directly to the insurance company.**

E496.5.9 Processing Claims

- * **Claims for medical costs incurred under the insurance plan must be submitted directly to Hinchcliff International Group Services, Inc. for processing:**

- * **Hinchcliff International
11 Ascot Place
Ithaca, NY 14850
Attention: Claims Dept.
Telephone: 607-257-0100
FAX: 607-257-2708**

496.5.10 MEDICAL EMERGENCY CONTACTS IN USAID/W

Missions must advise all FSN and TCN employees enrolled under **the HAC Plan** of the USAID/W emergency contacts and telephone numbers **during working and after hours**. For working hours emergency, **employees must contact M/HR/POS/SP (202-712-1143 or 0163)** and the Desk Officer in charge. After normal hours the contact is the State Department Watch Officer, (202) 647-1512, who will contact the USAID Duty Officer in the event of an emergency.

E496.5.10 Medical Emergency Contacts in USAID/W - N/A

496.6 Supplementary Reference - N/A

496.7 Mandatory Reference - N/A

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