

Federal Employees' Dental and Vision Insurance Program (FEDVIP)

Overview

- FEDVIP is a voluntary benefits program that provides supplemental dental and vision insurance coverage.
- There is no exclusion for pre-existing conditions.
- There are no waiting periods, except for orthodontia.
- You may enroll in dental insurance only, vision insurance only, neither, or both.

Eligibility

- You are eligible to enroll in FEDVIP if you are a Federal employee eligible for (though not necessarily enrolled in) the Federal Employees' Health Benefits (FEHB) Program.
- Your eligible family members include your spouse and unmarried dependent children under age 22. An unmarried dependent child age 22 or over who is incapable of self-support because of a mental or physical disability that existed before age 22 is also an eligible family member. To obtain additional information, go to <http://www.opm.gov/insure/handbook/fehb28.asp#Family>.
- Federal annuitants are eligible to enroll if retired on an immediate annuity.
- Survivors of deceased Federal employees or annuitants may be eligible to enroll or continue the enrollment of the deceased.
- Compensationers are eligible to enroll or continue enrollment into compensation status.

How to enroll

- Enroll through <http://www.BENEFEDS.com>.
- Call toll-free 1-877-888-FEDS (1-877-888-3337), TTY 1-877-889-5680.
- If you enroll during an open season, you will receive confirmation of your enrollment within 15 calendar days after the end of the open season. If you enroll outside of open season, you will receive confirmation of your enrollment within 15 days after the date you made your election in BENEFEDS.

Three enrollment types

- The 3 types of enrollment are: Self Only, Self Plus One, and Self and Family.
- If enrolled in both dental and vision insurance, you may choose different enrollment types for each.
- FEDVIP enrollment does not need to match your FEHB enrollment.
- Dual enrollment is prohibited except in very limited circumstances. Dual enrollment is enrollment in more than one FEDVIP dental plan or more than one FEDVIP vision plan at the same time. If you are enrolled in only one FEDVIP dental plan and/or one FEDVIP vision plan, this is not dual enrollment.

When you may enroll

- During the annual open season;
- Within 60 days after first becoming eligible as:

- a new employee,
- a previously ineligible employee who transferred to a covered position, or
- a survivor annuitant, if not already covered under FEDVIP;
- Within 60 days after returning to service following a break in service of at least 31 days;
- Within 60 days after a Qualifying Life Event (QLE) that allows enrollment.

Qualifying Life Events (QLEs)

- A QLE is an event that may allow you to enroll or change your enrollment outside of an open season.
- The time frame for requesting a QLE change is from 31 days before to 60 days after the event. There are a few exceptions:
 - There is no time limit for a change based on moving from a regional plan's service area
 - You cannot request a new enrollment based on a QLE before the QLE occurs. You must make the change no later than 60 days after the event. However, if you are already enrolled, you can request a change in your enrollment up to 31 days prior to the QLE.

Examples of Qualifying Life Events

| QLE that may permit a change in enrollment | From Not Enrolled to Enrolled | INCREASE from Self Only to Self Plus One or to Self and Family or from Self Plus One to Self and Family | DECREASE from Self and Family to Self Plus One or to Self Only or From Self Plus One to Self Only | Cancel | CHANG E from one plan to another |
|--|-------------------------------|---|---|--------|----------------------------------|
| Acquiring an eligible family member | No | Yes | No | No | No |
| Losing a covered family member | No | No | Yes | No | No |
| Losing other dental/vision coverage (eligible or covered person) | Yes | Yes | No | No | No |
| Moving out of regional plan's service area | No | No | No | No | Yes |
| Return to pay status from active military duty | Yes | No | No | No | No |
| Annuity or Compensation restored | Yes | No | No | No | No |

Belated enrollments

- The time limit may be extended for up to six (6) months after you first become eligible, have a QLE, or after the end of an open season. You must provide evidence to BENEFEDS that you were unable to enroll or change enrollment timely for reasons beyond your control.
- If your enrollment is approved by BENEFEDS, the effective date will be retroactive to the date the enrollment or change in enrollment would have been effective if made timely. BENEFEDS will begin withholding premiums prospectively from your pay/annuity and will then bill you directly for the retroactive premiums due, which will not be pre-tax.

When coverage becomes effective

- For open season enrollments, the effective date will be the first day of the first pay period that begins in the following year.
- Enrollments and changes to enrollments outside of open season become effective the first day of the pay period following the one in which BENEFEDS receives the enrollment or change.

Canceling an enrollment

- You may only cancel enrollment during an open season.

Re-enrollment

- You are automatically re-enrolled each year unless you choose to make a change during open season or a plan terminates its participation in FEDVIP.

Premiums

- Dental plans determine premiums based on where you live.
- Vision plans charge a nationwide rate.
- No government contribution. You will pay 100% of the premiums.
- Part-time employees pay the same premium as full time employees.
- Premiums will be deducted from your pay on a pre-tax basis (premium conversion).
- More information may be found at <http://opm.gov/insure/dentalvision/>

Leave without pay

- After two consecutive periods of insufficient pay, BENEFEDS will bill you directly for premiums on a post-tax basis.

Transfer

- If you transfer to another agency, BENEFEDS will work with you and the agency's payroll office to establish deductions from your new location.

Separation

- Your enrollment terminates at the end of the pay period in which you separate. There is no extension of coverage or opportunity to convert to an individual policy.

Retirement

- You must retire on an immediate annuity, including disability retirements, in order to enroll in FEDVIP as an annuitant.
 - For FERS employees: If you retire on a Minimum Retirement Age +10 annuity and elect to postpone receipt of your annuity, you lose FEDVIP coverage upon separation from service. You may again enroll in any plan within 60 days of when you begin receiving your annuity.
- The same rules for employees apply to you as an annuitant. The only difference is that deductions from your annuity will not be on a pre-tax basis.
- If you retire, BENEFEDS will work with you and U.S. Office of Personnel Management to establish deductions from your annuity.

- You do not need to meet the 5 year rule to carry FEDVIP into retirement, unlike the FEHB Program.

FEDVIP versus the Federal Employees Health Benefits (FEHB) Program

- FEDVIP is an entirely separate program. You may choose to enroll in FEDVIP only, FEHB only, both, or neither.
- Some FEHB plans already cover some dental and vision services.
 - If you are enrolled in FEDVIP and your FEHB plan provides benefits for dental and vision services, FEHB will be the first payor of any benefits. FEDVIP will coordinate benefits with the primary payor.

Claims Dispute and Resolution

- Each plan has its own process and timeframe for reviewing disputed claims, which are explained in its FEDVIP brochure.