

A MESSAGE FROM KAY COLES JAMES DIRECTOR OF THE OFFICE OF PERSONNEL MANAGEMENT

I am pleased to send you, in this open season package, an Open Season Health Benefits Guide for your use during the Federal Employees Health Benefits (FEHB) Program Open Season enrollment period, November 10 through December 8, 2003. In keeping with the President's health care agenda, we are committed to providing FEHB Program members with affordable, quality health care choices. Fundamentally, I believe that FEHB participants are wise enough to determine the care options best suited for themselves and their families.

Our strategy to maintain quality and cost this year rested on four initiatives. First, I met with FEHB carriers and challenged them to contain costs, maintain quality, and keep this program a model of consumer choice and on the cutting edge of employer-provided health benefits. I reminded them of President Bush's principles for health care: patient-centered health care, preservation of choice, and excellent quality. I encouraged each plan to explore all reasonable options to hold down premium increases while maintaining a benefits package that is highly valued by our employees and retirees, as well as attractive to prospective Federal employees. Second, I met with our own FEHB negotiating team here at the Office of Personnel Management (OPM) and I challenged them to conduct tough negotiations with you, the consumer, at the forefront of their actions. Third, OPM initiated a comprehensive outside audit to review the potential costs of federal and state mandates over the past decade, so that this agency is better prepared to tell you, the Congress and others the true cost of mandated services. Fourth, we have maintained a respectful and full engagement with the OPM Inspector General (IG) and have supported all of his efforts to investigate fraud and waste within the FEHB Program. Positive relations with the IG are essential and I am proud of our strong relationship.

The FEHB Program is market-driven. The health care marketplace has experienced significant increases in health care cost trends in recent years. Despite its size, the FEHB Program is not immune to such market forces. We have worked with the plans to provide health plan choices this year that maintain competitive benefits packages and yet keep health care affordable. We will and those of your family and to change plans, if necessary, based on those needs. By carefully reviewing the enclosed Guide and ordering plan brochures for the plans you are interested in, you will have the information you need to make an informed choice. You can view health plan brochures online at www.opm.gov/insure. I encourage you to take this opportunity to become a well-educated health care consumer

We believe we have made the open season process easy for you. As an annuitant, you don't need to fill out forms or write long letters to effect your open season requests. Simply call Open Season Express toll-free at 1-800-332-9798. Follow the instructions on the next few pages to complete your open season requests. You can also make your requests through the annuitant open season web site, Open Season Online, available at www.opm.gov/retire/fehb.



General Open Season Information November 10 through December 8, 2003

REMEMBER, if you don't want to change your health plan information, you don't need to call Open Season Express or take further action. Your current plan coverage will continue as usual.

During this open season you may change from one plan to another, from one option to another in the same plan, from self only to self and family, or make any combination of these changes. Coverage under your current enrollment will continue automatically unless you request a change, your current plan changes its enrollment area, or your plan no longer participates in the FEHB

If you don't have a telephone, you can write to the following address to complete your open season transaction: Office of Personnel Management, Open Season Processing Center, P.O. Box 4198, Iowa City, IA 52244-4198. Please clearly state your open season request. If you are making an enrollment change, be sure to tell us the plan you want, the type of coverage (self only or self and family), and the enrollment code. Remember to include your annuity claim number and social security number. If you choose self and family coverage, we will need your dependent and other insurance information as outlined in the instructions

If you and your spouse each receive Federal retirement benefits and you are enrolled in family coverage and want to change to two self only enrollments, do not use Open Season Express or Open Season Online to make your change. Please read the information on this type of change in the enclosed Open Season Health Benefits Guide.

While you can cover your spouse on a family enrollment during your lifetime, in the event of your death, your spouse may continue enrollment in the FEHB Program only if you are enrolled in self and family coverage and you have provided a survivor

If you marry after retirement, you can elect a survivor annuity for your spouse by sending a signed request to the Retirement Services & Management Group, P.O. Box 45, Boyers, PA 16017-0045. This request must be made within 2 years of the date of

INSTRUCTIONS FOR USING OPEN SEASON EXPRESS

Open Season Express, 1-800-332-9798, is available between the hours of 4:00 AM and Midnight Central Standard Time (CST). Our busiest times for receiving calls are Monday - Friday between the hours of 9:00 AM and 3:00 PM CST.

BEFORE YOU BEGIN YOUR CALL YOU SHOULD HAVE THE FOLLOWING INFORMATION:

- Your CSA or CSF annuity claim number. (You will enter the first 7 numbers.)
- Your social security number. (You will enter the last 4 numbers.)
- The first 2 characters of the enrollment code for the plan you are selecting for 2004 or the first 2 characters of the enrollment code(s) for the plan brochure(s) you want to review. The enrollment codes can be found in the Open Season Health Benefits Guide under the enrollment code column for each plan. If you are currently enrolled in a restricted feefor-service plan, check your plan brochure or ID card for the enrollment code.

IF YOU ARE SELECTING SELF AND FAMILY COVERAGE, YOU WILL ALSO NEED:

- Your dependent(s) name, social security number, date of birth, and information about any other health insurance coverage
- Remember to listen carefully to each voice prompt. You will know your transaction has been completed when you hear "We

THESE ARE THE OPTIONS AVAILABLE TO YOU. THE VOICE PROMPT TELLS YOU THE NUMBER

- To make an enrollment change, press 1.
- To request plan brochures, press 2.
- To request information on cancelling or suspending your health benefits coverage, press 3.
- To request information on paying your premiums directly to us, press 4.
- To receive satisfaction survey information on how FEHB members rated their health plans, press 5.
- If you have moved to another state and need a new Open Season package, press 6.

TO MAKE AN ENROLLMENT CHANGE

THE VOICE PROMPT WILL TELL YOU:

- Please enter the first 2 characters of the enrollment code for the plan you want. If the first 2 characters of the enrollment code contain a letter, enter the number shown on the telephone keypad for that letter. For example, if you would like to enroll in AN1 enter 26. The 2 is the number on the keypad with the letter A and 6 is the number on the keypad with the letter N. If the first 2 characters of the enrollment code contain the letters Q or Z, enter the number 0 for these letters.
- If the plan you selected has the same combination of numbers or letters as other plans available in your state or contains a High and Standard option, you will be given a list of plans. Please listen carefully for the name of the plan you want and enter the

AFTER YOU HAVE INDICATED THE PLAN YOU WANT, THE VOICE PROMPT WILL TELL YOU:

If you want Self Only coverage, press 1.

If you want Self and Family coverage, press 2.

If you indicated you want Self Only coverage and confirmed that this is correct, you will hear:

We have processed your transaction.

The effective date of your Open Season change is January 1, 2004.

- We will mail you a letter confirming your Open Season change. We will also notify the plan you selected of your new enrollment. Your new plan will send your new identification card to you. You can expect to receive your new card in approximately 4 weeks. If you do not receive your new card you should contact your new plan directly.
- If you indicated you want Self and Family coverage and confirmed that this is correct, you will hear:

We have processed your transaction.

Please wait on the line so we may gather your dependent and other insurance information.

TO REQUEST HEALTH PLAN BROCHURES:

THE VOICE PROMPT WILL TELL YOU:

- Please enter the first 2 characters of the enrollment code for the brochure you want. If the first 2 characters of the enrollment code contain a letter, enter the number shown on the telephone keypad for that letter. For example, if you would like to request brochure AN1, enter 26. The 2 is the number on the keypad with the letter A and 6 is the number on the keypad with the letter N. If the first 2 characters of the enrollment code contain the letters Q or Z, enter the number 0
- If the plan you selected has the same combination of numbers or letters as other plans available you will be given a list of plans. Please listen carefully for the name of the plan brochure you want and enter the number the voice prompt tells you to.

THE NEXT VOICE PROMPT WILL TELL YOU:

The plan you selected is [PLAN NAME].

If this is correct, press 1.

Press the pound sign (#) to hear the list again.

To leave Open Season Express, press 9.

IF YOU PRESSED 1 INDICATING THE PLAN BROCHURE YOU SELECTED IS CORRECT, THE VOICE PROMPT

If you want another plan brochure, press 1.

To hear the list of plan brochures you asked for, press 2.

To complete your selection, press 3.

To leave Open Season Express, press 9.

TO REQUEST CANCEL OR SUSPEND INFORMATION:

THE VOICE PROMPT WILL TELL YOU:

You indicated that you wish to receive information on cancelling or suspending your health benefits coverage. If this is correct, press 1.

IF YOU SELECT 1, YOUR REQUEST FOR CANCEL/SUSPEND INFORMATION WILL BE COMPLETE WHEN YOU HEAR.

We have processed your transaction. You can expect to receive the information you asked for in about 7 to 10 days.

TO REQUEST DIRECT PAY INFORMATION:

THE VOICE PROMPT WILL TELL YOU:

You indicated that you wish to receive information on how to pay your premiums directly to us. Please note, this option is only available when your monthly annuity payment is not large enough to cover the cost of the monthly health benefits premium. If this is correct, press 1.

IF YOU SELECT 1, YOUR REQUEST FOR DIRECT PAY INFORMATION WILL BE COMPLETE WHEN YOU HEAR:

We have processed your transaction. You can expect to receive the information you asked for in about 7 to 10 days.

TO RECEIVE SURVEY INFORMATION:

THE VOICE PROMPT WILL TELL YOU:

You indicated that you wish to receive survey information on how FEHB members rated their health plans. If this is correct, press 1

IF YOU SELECT 1, YOUR REQUEST FOR SURVEY INFORMATION WILL BE COMPLETE WHEN YOU HEAR:

We have processed your transaction. You can expect to receive the information you asked for in about 7 to 10 days.

TO RECEIVE A NEW OPEN SEASON PACKAGE.

THE VOICE PROMPT WILL TELL YOU:

You indicated that you wish to receive a new Open Season package due to a change in your address. If this is correct, press 1.

NOTE: After you have completed your address update, you can expect to receive your new Open Season package in about 7 to 10 days.

Figure 14 If you should need further help, call the Retirement Information Office at 1-888-767-6738. Customers within the local Washington, DC, calling area must call 202-606-0500.

THANK YOU FOR USING OPEN SEASON EXPRESS!