

Information and Instructions on Your Reconsideration Rights

I. Information

Reconsideration is OPM's review of its initial decision in order to verify that all applicable laws and regulations were properly applied.

This notice gives specific instructions on how you may request reconsideration of an initial decision made by OPM's Retirement Services in any case where the decision:

- ❖ Affects your rights or interests under the Civil Service Retirement System or under the Federal Employees' Retirement System, except in matters pertaining to disability retirement and annuity overpayments. Different instructions apply to these exceptions; see below for more information. (5 CFR, Part 831 and 841)
- ❖ Denies you basic or optional life insurance coverage under the Federal Employees' Group Life Insurance Program or denies you the right to change your post-retirement basic life insurance coverage after retirement. (5 CFR, Parts 870, 871, 872 and 873)
- ❖ Denies your request to enroll or change enrollment in the Federal or Retired Federal Employees Health Benefits Program. (5 CFR, Parts 890 and 891).
- ❖ Denies your request to permit coverage of someone as a family member under the Federal or Retired Federal Employees Health Benefits Program. (5 CFR, Parts 890 and 891)

These instructions **do not** apply to:

- ❖ Decisions concerning a disability retirement eligibility.
- ❖ Initial decisions under 5 U.S.C. 8336(c) regarding law enforcement or firefighter eligibility.
- ❖ Decisions to collect an annuity overpayment. *Where applicable, OPM will give you separate specific instructions and information in the above instances.*
- ❖ Requests for reconsideration of claims denied by your health insurance carrier should be sent to the address shown in the brochure of your plan.

If you want general information about benefits or a written decision on another matter, you should write to:

Office of Personnel Management
Retirement Operations Center
P.O. Box 45
Boyers, PA 16017-0045

II. Procedures

The procedures for requesting reconsideration - as established by Federal regulation - are as follows:

- A. Make your request in writing and state that you are requesting reconsideration; if possible, include a copy of the initial decision on which your request is based. Include your name, address, date of birth, claim number (*if applicable*), name of the health insurance plan (*if applicable*), and your reason(s) for the request.
- B. Your written request for reconsideration must be received by OPM within 30 calendar days from the date of OPM's initial decision. *[OPM can extend the time limit if you can show that you (1) were not notified of the time limit and were not otherwise aware of it or (2) were prevented from responding by a cause beyond your control.]*
- C. Send your request for reconsideration to:

Office of Personnel Management
Legal Reconsideration Branch, Room 2H31
1900 E Street NW
Washington, DC 20415-0001

If you plan to submit additional evidence to support your claim and that evidence is not immediately available, you must:

- ❖ Submit a written request for reconsideration within the 30-day time limit; and
- ❖ Include in your request for reconsideration a statement that you will be submitting additional evidence, a brief description of the evidence you will submit, your estimate of the date the evidence will be available, and a brief explanation for the delay.

We will acknowledge receipt of your statement and let you know the date after which additional submissions will not be accepted.

III. Final Decision

After reviewing our initial decision and any new evidence that has been submitted, OPM will send you a final decision in writing. We will send copies of that decision to any competing claimants or to your employing office, if applicable.

Privacy Act Statement

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to inform you of why OPM is requesting the information on this form. **Authority:** OPM is authorized to collect the information requested on this form by Subpart A, Section 831.109, Subpart M; Subpart C, Section 841.306 and Subpart B, Section 845 of Title 5, Code of Federal Regulations contain the rules governing reconsideration decisions on entitlement to retirement benefits and the collection of debts. OPM is authorized to collect your Social Security number by Executive Order 9397 (November 22, 1943), as amended by Executive Order 13478 (November 18, 2008). **Purpose:** This form is used to outline the procedures required to request reconsideration of an initial OPM decision about Civil Service or Federal Employees retirement, Federal or Retired Federal Employees Health Benefits requests to enroll or change enrollment or Federal Employees' Group Life Insurance coverage. **Routine Uses:** The information requested on this form may be shared externally as a "routine use" to other Federal agencies and third-parties when it is necessary to process your application for benefits. For example, OPM may share your information with other Federal, state, or local agencies and organizations in order to determine benefits under their programs, to obtain information necessary for determination or continuation of benefits under this program, or to report income for tax purposes. OPM may also share your information with law enforcement agencies if it becomes aware of a violation or potential violation of civil or criminal law. A complete list of the routine uses can be found in the OPM/CENTRAL 1 Civil Service Retirement and Insurance Records system of records notice, available at www.opm.gov/privacy. **Consequences of Failure to Provide Information:** Providing this information to OPM is voluntary. However, if you fail to provide this information, OPM would fail to inform the individual of how to ask for a review of the initial decision.

Public Burden Statement

The public reporting burden to complete this information collection is estimated at 45 minutes per response, including for reviewing instructions, searching data sources, gathering and maintaining the data needed, and the completing and reviewing the collected information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden to the Office of Personnel Management, RS Publications Team at RSPublicationsTeam@OPM.gov. Current information regarding this collection of information - including all background materials -- can be found at <https://www.reginfo.gov/public/do/PRAMain> by using the search function to enter either the title of the collection or OMB Control Number 3206-0237.