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# FEHB Program Carrier Letter

## All Fee-For-Service Carriers

U.S. Office of Personnel Management  
Healthcare and Insurance

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Letter No. 2015-17(c)

Date: September 18, 2015

Fee-for-service [14]    Experience-rated HMO [n/a ]    Community-rated HMO [n/a ]

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### **SUBJECT: Change to the Standard Contract**

**2016 Contract Year.** Please review Attachment A, which details the proposed Standard Contract changes for Federal Employees Health Benefits Program fee-for-service carriers for Contract Year 2016. If you have comments, please provide them as soon as possible or no later than Friday, October 16, 2015.

We are currently reviewing the FEHB contract language concerning OPM's information technology (IT) breach processes and protocols and have convened a working group to consider future contract amendments.

As we indicated earlier this year, we focused our proposed amendments primarily on revisions necessitated by applicable statutory and/or regulatory provisions. The proposed amendments are as follows:

#### **Self Plus One**

- A Self Plus One enrollment type was added to the FEHB Program as a result of Section 706 of the Bipartisan Budget Act of 2013 amending Section 8905 of title 5, United States Code. To account for this new enrollment type, we updated the following sections of the contract:
  - Section 2.3 Payment of Benefits and Provision of Services and Supplies
  - Appendix B Subscription Rates, Charges, Allowances and Limitations
  - Appendix C FEHB Supplemental Literature Guidelines

#### **Subrogation**

- We revised Section 2.5 Subrogation to expressly include language that benefits and benefit payments are extended to members with the condition that Carriers have a subrogation right.

#### **FEHB Performance Assessment**

- We added Appendix F to incorporate Carrier Letters 2015-10 and 2015-17 into the contract.
- Appendix B – We added language that references the Performance Assessment.

**FAR Change**

- We updated Section 5.14 Utilization of Small Business Concerns (FAR 52.219-8) to include the recent change.

**Minor and Technical Changes**

- We updated the following sections with minor or technical changes:
  - We revised Section 1.9 Plan Performance – Experience-Rated FFS Contracts by changing the Initial Call Resolution standard from 60 percent to 80 percent.
  - We added Paragraph (i) to Section 2.2 Benefits Provided to ensure that Carriers include non-physician providers when acting within the scope of their licenses under State law.
  - We revised Appendix D Rules for Coordination of Benefits to the October 2013 version of the NAIC Coordination of Benefits Guidelines

Please email your comments to [FEHBcontramend@opm.gov](mailto:FEHBcontramend@opm.gov), with a copy to your OPM contract representative.

We look forward to working with you on your contract.

Sincerely,

John O'Brien  
Director  
Healthcare and Insurance

Enclosure