

UNITED STATES OFFICE OF PERSONNEL MANAGEMENT

Federal Benefits Open Season

November 14, 2022 – December 12, 2022



Federal Benefits Open Season Highlights 2023 Plan Year

- The Federal Benefits Open Season for the 2023 plan year for health insurance under the FEHB Program, dental and vision insurance under FEDVIP and flexible spending accounts under FSAFEDS will be held **from November 14 through December 12, 2022**. Federal Benefits Open Season gives Federal employees and other eligible individuals the opportunity to review their plans, make changes, and enroll in one of 271 FEHB plan choices for 2023. During this time, annuitants can also re-evaluate their plans and decide if they are optimal coverage.
- As the COVID-19 pandemic continues, and new challenges must be met such as Monkeypox, OPM continues to work with the FEHB Carriers to ensure our enrollees have access to appropriate benefits and services and to meet and address these challenges. Throughout the COVID-19 pandemic, Carriers have provided quick solutions for access to testing, vaccines, mental health benefits, and telehealth, as well as encouraging our enrollees to get vaccinated by offering incentives.
- The FEHB Program is market-based, centered on choice and competition. Major cost drivers of our Program align with those experienced in the commercial market, such as pharmacy spending, including expensive specialty drugs; the cost of treating chronic illness, and advances in medical technology and innovation.
- **Tribes**
 - For more than 10 years, the FEHB Program has provided coverage to employees of certain Indian tribes, tribal organizations, and urban Indian organizations.
 - Under the Consolidated Appropriations Act, Fiscal Year 2021 (Public Law 116-260) Indian tribes or tribal organizations carrying out programs under the Tribally Controlled Schools Act of 1988 (TCSA), commonly referred to as “297 grant schools” became entitled to purchase coverage, rights, and benefits under the FEHB Program for their employees.
 - Currently, 142 Tribes/Tribal organizations/urban Indian organizations/tribal grant schools have purchased FEHB coverage for approximately 34,000 of their tribal employees with a total of 68,000 covered lives (enrollees and family members).

FEHB Rates and Changes

FEHB Rates:

Established in 1960, the FEHB Program is the largest employer-sponsored health benefits program in the United States. Today, the FEHB Program provides health insurance benefits for greater than 8.2 million Federal civilian employees, annuitants, and their families, as well as certain Tribal employees and their families.

The Government's share of premiums for the FEHB Program paid is set by law. This formula is known as the "Fair Share" formula because it is designed to maintain a consistent level of Government contributions, as a percentage of total program costs, regardless of which health plan enrollees elect.

➤ **The overall average increase in rates for the FEHB Program for 2023 is 7.2%.**

- For most Federal employees and annuitants: The average Government contribution will increase by 6.6%.
- The enrollee share will increase an average of 8.7%.

➤ A rates chart is offered on [opm.gov](https://www.opm.gov) that provides the actual dollar premium increase for each FEHB plan choice and enrollment type.

Similarly Sized Employers

The FEHB Program average 7.2% premium increase for 2023 is aligned with reported increases by comparable large employers.

- On July 12, 2022, CalPERS Board of Administration announced rate and plan changes for 2023 that include an average 6.75% overall premium increase. CalPERS is the largest purchaser of public employee health benefits in California, and the second largest public purchaser in the nation after the federal government. CalPERS serves more than 1.5 million members and their families in their health program and is similar in structure to the FEHB Program as both active employees and annuitants have access to the same plan choice, benefits, and premiums.
- The Business Group on Health (BGH) survey of large employers found that companies expect a 6.5% increase on average in their 2023 health insurance plan premiums and costs.
- Aon estimates that health costs could increase by approximately 6.5% to more than \$13,800 per employee in 2023. Medical claims decreased in volume during the early COVID-19 pandemic, however, claims have returned to more typical levels and Aon expects inflation to impact costs in the coming year(s). In Summer 2022, Aon estimated that in addition to inflation, new technologies, catastrophic claims, and an increasing share of specialty drugs will drive cost.
- According to the Kaiser Family Foundation individual marketplace premiums are set to rise about 10 percent, with most rate increases falling between about 5% and 14%.

FEHB Cost Drivers Impacting 2023 Premiums:

COVID-19 has introduced unprecedented volatility in rate setting across the health care industry. The FEHB rates reflect this as a result of the claims experience in late 2021/early 2022, which as noted above align with the other large employers. In 2021, the coronavirus pandemic cost the

FEHB Program about \$2 billion (3-4% of 2021 claims¹) to test and treat COVID-19 patients, which impacts rates for the 2023 plan year.

The largest contributors to the 2023 premium increase reported by FEHB carriers are higher than expected utilization in outpatient services and facilities, increase in utilization of professional services, and increased utilization and unit cost in specialty drugs. This is consistent with the larger market and reflects the impact of the COVID pandemic.

FEHB Historical Annual Average Premium Increases	
Year	Average Percent Increase
2023	7.2%
2022	2.4%
2021	3.6%
2020	4.0%
2019	1.3%
2018	4.0%
2017	4.4%
2016	6.4%
2015	3.2%
2014	3.7%
2013	3.4%
2012	3.8%
2011	9.0%
2010	8.7%
2009	8.2%

FEHB Plan Choices:

- There are 271 plan choices in 2023 (In 2022, there are 275)
 - 18 Fee-for-Service (FFS) plan choices available (excluding HDHPs and CDHPs; in 2022, there are 18)
 - 14 nation-wide FFS plan choices open to all
 - 4 FFS plans with availability limited to certain groups (Compass Rose, Foreign Service Benefit Plan, Rural Carriers Benefit Plan, and Panama Canal Area Benefit Plan) (same as last year)
 - 188 HMO plan choices (excluding HDHPs and CDHPs; in 2022, there are 192)
 - 37 High Deductible Health Plan choices (HDHP), 2 of which are nation-wide (In 2022, there are 37)
 - 28 Consumer Driven Health Plan choices (CDHP), 2 of which are nation-wide (In 2022, there are 28)

¹ 2021 claims experience is used to develop 2023 rates as 2022 claims experience is not yet available. Similarly, 2022 claims experience will be used to develop 2024 rates, etc.

- For example, an enrollee living in Washington DC has 38 plan choices, versus an enrollee living in Sioux Falls, SD with 25 plan choices. (Excludes FFS plans with availability limited to certain groups)
- There is one new FEHB Carrier, Indiana University Health Plan, Inc., in 2023, offering one plan choice.
- There are 4 new plan choices with existing FEHB Carriers for 2023

New Plan Choices with Existing FEHB Carriers for 2022	
Plan Name	Option
Humana HDHP - Lexington	HDHP
Humana HDHP - Louisville	HDHP
Medical Mutual of Ohio	WellFlex
Health Net of California	Standard

FEHB Program enrollees have a number of Plan choices available to them regardless of where they reside. The chart below identifies examples of that.

Region	State	Approximate Number of Enrollees*	Number Plan Choices Offered for 2023
Northeast	Maine	23,700	19
Southeast	DC	162,816	38
Midwest	Illinois	116,000	36
West	New Mexico	39,200	22

* Enrollee numbers are approximate since they are from 2021, as 2022 numbers are not available.

FEHB and Medicare Part B:

FEHB Carriers continue to address and respond to the needs of our annuitants who are also Medicare beneficiaries. There are FEHB plan choices that offer Medicare Part B incentives – either through copay, coinsurance or deductible waivers or Part B premium reimbursement. The FEHB [Plan Comparison Tool](#) (PCT) makes this information available to enrollees and identifies plan choices with a Medicare Part B incentive. The PCT includes a display that allows individuals to see exactly what they are expected to pay if they have both Medicare A and B as their primary coverage and FEHB as their secondary coverage.

- There are 7 plan options that will offer Medicare Part B reimbursement beginning in Plan Year 2023 for individuals who also enroll in the carrier’s Medicare Advantage Plan:
 - Kaiser Permanente - Georgia (Standard)
 - Kaiser Permanente - Mid-Atlantic States (Standard)
 - UPMC Health Plan (Standard)
 - Foreign Service Benefit Plan (High)
 - NALC Health Benefit Plan (High)
 - SAMBA Health Benefit Plan (High and Standard)
- The following existing plan options will continue to offer Medicare Part B reimbursement depending on the FEHB enrollees’ participation in Medicare Part B or Medicare Advantage:

- Aetna Advantage (Advantage)
- Aetna Direct (CDHP)
- APWU (High)
- Blue Cross Blue Shield Service Benefit Plan (Basic)
- Compass Rose (High)
- GEHA (High)
- Health Alliance Plan (High & Standard)
- HealthPartners (High)
- Humana CoverageFirst/Value Plan (Value)
- Kaiser Permanente - Colorado (High & Standard)
- Kaiser Permanente - Georgia (High)
- Kaiser Permanente - Hawaii (High)
- Kaiser Permanente - Mid-Atlantic States (High)
- Kaiser Permanente – Fresno, California (High & Standard)
- Kaiser Permanente - Northern California (High & Standard)
- Kaiser Permanente - Southern California (High & Standard)
- Kaiser Permanente - Northwest (High & Standard)
- Kaiser Permanente - Washington Core (High & Standard)
- Medical Mutual of Ohio Southwest (Standard)
- Medical Mutual of Ohio Northeast (Standard)
- MHBP (Standard)
- MD I.P.A. (High)
- Rural Carrier Benefit Plan (High)
- UnitedHealthcare Choice Open Access HMO (High)
- UnitedHealthcare Choice Plus Advanced (Tampa, Orlando, Miami, and Atlanta) (Value)
- UnitedHealthcare Choice Plus Advanced (Chicago, San Antonio, DC, Northern Virginia, and Maryland) (Value)
- UnitedHealthcare Choice Plus Primary - East Region (High)
- UnitedHealthcare Choice Plus Primary - West Region (High)
- UnitedHealthcare Choice Primary - East Region (High)
- UnitedHealthcare Choice Primary - West Region (High)
- UPMC Health Plan (Standard)

Medicare Coordination of Benefits (COB) information is found in Section 9 of each FEHB plan brochure.

BENEFITS OVERVIEW

FEHB

For the 2023 Plan Year, OPM is pleased to deliver enhanced benefit offerings in the following areas across the FEHB Program: Maternal Health, Gender Affirming Care and Services, Obesity, the COVID-19 Pandemic, Telehealth, Medical Foods, Assisted Reproductive Technology, and Preventive Services. The below reflects further enhancements in each topic area:

Maternal Health

OPM remains committed to addressing inequalities in maternal health and mortality and asked FEHB Carriers to identify ways to expand coverage and services in support of prenatal and postpartum care by including childbirth education classes, group prenatal care, home visiting programs or home health care during pregnancy and postpartum, and care management for high-risk pregnancies. FEHB Carriers responded favorably to OPM's guidance to amplify communication efforts to FEHB members who are either pregnant or of childbearing age.

- OPM encouraged FEHB Carriers to adopt the *Hear Her Campaign* for patients and healthcare providers by providing information and raising awareness of potentially life-threatening warning signs during and after pregnancy. For the 2023 plan year, most FEHB Carriers have adopted this campaign.
- FEHB Carriers have included innovative methods to improve overall maternal outcomes, such as paying more for high-value care than low-value care and increased reimbursement or expanded coverage for certified nurse midwives, birth centers, and perinatal support services such as doulas and nurse home visits.
- FEHB Carriers have shown interest in the CMS announcement on establishing a “Birthing-Friendly” designation for hospitals to improve perinatal health outcomes and maternal health equity.

Gender Affirming Care and Services

OPM continues to focus on ways our Carriers can improve access to gender affirming care for transgender and gender diverse individuals. Since January 1, 2016, OPM has required that no FEHB Carrier have a general exclusion of services, drugs, or supplies related to the treatment of gender dysphoria.

In Plan Year 2023, all FEHB Carriers:

- Have adopted one or more recognized entities in order to guide evidence-based benefits coverage and medical policies pertaining to gender affirming care and services, such as the World Professional Association of Transgender Health (WPATH) Standards of Care, the Endocrine Society, and the Fenway Institute. These entities provide evidence-based clinical guidelines for health professionals to assist transgender and gender diverse people with safe and effective pathways that maximize their overall health, including physical and psychological well-being.
- Will provide individuals diagnosed with and/or undergoing evaluation for gender dysphoria the option to use a Care Coordinator to assist and support them as they seek gender affirming care and services. If network providers are not available to provide medically necessary treatment of gender dysphoria, FEHB Carriers will provide members direction on how to find qualified providers with experience delivering this specialized care.
- Have reviewed their formularies to ensure that transgender and gender diverse individuals have equitable access to medications and provide coverage of medically necessary hormonal therapies for gender transition care.

- Have reviewed and updated plan brochures for accurate description of benefits for those with gender dysphoria and to ensure the use of inclusive and gender-neutral terminology in communication materials and member-accessible resources.
- Will provide coverage for standard fertility preservation procedures for persons facing the possibility of iatrogenic infertility, including infertility associated with medical and surgical gender transition treatment.

Obesity

FEHB Carriers must have adequate coverage of FDA-approved anti-obesity medications on their formulary to meet patient needs and must provide an exception process in cases where the drug is not on the formulary. Adequate means a range of anti-obesity drugs at various costs for enrollees so cost will not be a barrier for enrollees.

COVID-19 Pandemic

All FEHB Carriers continue to provide coverage for countermeasures against COVID-19, including over-the-counter tests, booster doses, therapeutics, and pharmacy access to therapeutics.

Telehealth

All FEHB Carriers are continuing initiatives that were encouraged and expanded during the pandemic related to telehealth. OPM believes that telehealth continues to have an important role in the provision of healthcare services, including the promotion of health equity by mitigating transportation difficulties faced in both urban and rural communities. Telehealth also improves access to mental health and substance use disorder services. The expansion of remote monitoring capabilities can also improve the quality of care for those with chronic disease.

Medical Foods

In Plan Year 2023, all FEHB Carriers will provide coverage for foods specifically formulated and prescribed to treat inborn errors of metabolism (IEM) without regard to age, mode of administration (oral vs. nasogastric tube), narrow arbitrary limitations to specific diseases, or whether it is the sole source of nutrition for that individual.

Assisted Reproductive Technology (ART)

OPM signaled support for Assisted Reproduction Technology² (ART) in the 2023 Call Letter. FEHB Carriers were asked to consider assisting with the financial burden of ART treatment for those who may require it by negotiating discounted rates that members can access and to describe in the Affinity benefits shown on the non-FEHB page of the plan brochure. OPM is pleased that four new plan options will provide ART within their FEHB benefit package for a total of 18 plan options in 2023, and one new plan option will provide a non-FEHB benefit for discounted ART procedures for 2023.

² [Assisted Reproductive Technology](#), Centers for Disease Control and Prevention.

Preventive Services

All FEHB Carriers will provide access to USPSTF “A” or “B” rated preventive services throughout the year as they become available.

Additionally, all Carriers cover the full range of contraceptives and contraceptive care for adolescent and adult women as provided in the Women’s Preventive Services Guidelines supported by the Health Resources and Services Administration (HRSA) without cost sharing.

FEDVIP

We are adding some exciting and important new features to the FEDVIP program for Plan Year 2023 while minimizing changes in enrollee premiums.

- The 2023 average premium increase from plan year 2022 is 0.21% for dental plans.
 - Increase is weighted by plan size based upon enrollment as of March 2022.
 - The 2023 average premium decreased from plan year 2022 by 0.41% for vision plans. The average premium is going down 0.41%. Decrease is weighted by plan size based upon enrollment as of March 2022.
- Specific plan information for dental and vision benefits and rates will be available on BENEFEDS.com in late October or early November.
- For the 2023 Plan Year, FEDVIP Carriers have made changes advantageous to enrollee health to their plan offerings. For example:
 - Waiting periods for orthodontic services have been removed.
 - The overwhelming majority of FEDVIP Carriers provide services targeting pregnant enrollee wellness and education.
 - The majority of FEDVIP Carriers provide teledentistry services.
- All dental carriers provide on-going education on the dangers of opioid abuse
- All member communications have been improved to ensure the use of inclusive language in communications.
- All carriers committed to ongoing training of their customer service employees to facilitate the use of member’s preferred name and pronouns.
- Twelve dental carriers provide 23 dental plan options available across the Program. Seven dental carriers offer fourteen nationwide dental plan options available to all potential enrollees.

- Five Vision Carriers provide 10 nationwide vision plan options available to all potential enrollees.

2023 FEDVIP Dental Carriers	
Nationwide/International	Regional
Aetna Dental Blue Cross Blue Shield Dental Delta Dental’s Federal Employees Dental Program GEHA Connection Dental Federal The MetLife Federal Dental Plan United Concordia Dental UnitedHealthcare Dental Plan	Dominion National EmblemHealth Dental HealthPartners Dental Plan Humana Dental Triple-S Salud

2023 FEDVIP Vision Carriers
Nationwide/ International
Aetna Vision Preferred Blue Cross Blue Shield Vision The MetLife Federal Vision Plan UnitedHealthcare Vision Plan VSP Vision Care

- In total, FEDVIP provides dental and vision benefits to a total of 7.5 million Federal employees, uniformed service members, annuitants, and their family members. It provides comprehensive dental and vision insurance at competitive group rates with leading dental and vision Carriers. FEDVIP enrollees give the program high marks for quality and value.

FSAFEDS

- As in past years, Federal employees are encouraged to consider the tax savings available through the Federal Flexible Spending Account Program (FSAFEDS). Setting aside the annual amount they are projected to spend in out-of-pocket health, dependent care, dental and vision expenses in a flexible spending account (FSA), saves Federal employees money.
- Participants may carry over up to \$570 of unused funds remaining in their health care flexible spending account (HCFSA) and limited expense (dental and/or vision) flexible spending account (LEX HCFSA) at the end of 2022 into 2023, if they re-enroll for the 2023 plan year.
- Carryover is not available under the dependent care flexible spending account (DCFSA). However, employees who choose a DCFSA enjoy an additional 2 ½ months grace period, through March 15, 2023, to incur eligible expenses.
- April 30, 2023, is the deadline to submit all 2022 DCFSA, HCFSA and LEX HCFSA claims.

Key Dates for FEHB, FEDVIP and FSAFEDS

- **Early November** - full FEHB and FEDVIP plan brochures available on the OPM website in a Section 508-compliant format; benefits information available on the Plan Comparison Tool. Individuals may download a PDF version of the brochure for printing, if desired.
- **November 14:** Open Season begins
- **December 12:** Open Season ends

FEHB EFFECTIVE DATES FOR PLAN YEAR 2023

Action	Employees	Annuitants	Compensationers (OWCP)
Enroll, change enrollment, premium conversion change in election	January 1, 2023	January 1, 2023	January 1, 2023
Cancellation	December 31, 2022	December 31, 2022	December 31, 2022

FEDVIP EFFECTIVE DATE FOR PLAN YEAR 2023

- January 1, 2023

FSAFEDS EFFECTIVE DATE FOR BENEFIT YEAR 2023

- January 1, 2023



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