FEHB Health Plan Additions and Terminations Overview

Two hundred sixty-two (262) health plan choices will be available to FEHB participants in 2018.

Health Plan Additions

New Plans – The following health plan has been added to the FEHB Program for 2018:

• Blue Open Access POS High option (codes QM1, QM3, QM2) in Atlanta, GA metro area counties of: Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Hall, Haralson, Heard, Henry, Lamar, Meriwether, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, and Walton; and Athens, GA area counties of: Clarke, Madison, Oconee, and Oglethorpe

New Plan Options – The following health plans have new plan options for 2018:

- Health Net of California is adding a Basic option (codes T41, T43, T42) in Northern California.
- Humana Health Plan, Inc. is adding a Basic option in Denver, CO (codes RZ1, RZ3, RZ2); Colorado Springs, CO (codes R21, R23, R22); Chicago, IL (codes RW1, RW3, RW2); and North Western Illinois (codes AB1, AB3, AB2).
- Humana Employers Health Plan of Georgia, Inc. is adding a Basic option in Atlanta, GA (codes Q71, Q73, Q72); Macon, GA (code RJ1, RJ3, RJ2); and Columbus, GA (codes RM1, RM3, RM2).
- Kaiser Foundation Health Plan of the Mid-Atlantic States is adding a Basic option (codes T71, T73, T72) in Northern Virginia, the District of Columbia and the Baltimore, MD area.
- Medical Mutual of Ohio (formerly Health Span Integrated Care) is adding a Basic option (codes UX1, UX3, UX2) in Northeast Ohio
- Humana Health Plan of Texas, Inc. is adding a Basic option in San Antonio, TX (codes QX1, QX3, QX2); Austin, TX (codes QY1, QY3, QY2); Corpus Christi, TX (codes Q21, Q23, Q22); and Houston, TX (codes Q61, Q63, Q62).
- Scott & White is adding a Basic option in Central and West Texas (codes A81, A83, A82); and North Texas (codes P81, P83, P82).

Health Plan Terminations

Six health plans: Blue Cross and Blue Shield of Illinois (codes A21, A23, A22) in the Chicago, IL area; New Mexico Blue HMO Preferred (codes Q11, Q13, Q12, Q14, Q16, Q15) in all of New Mexico; Paramount Health Care (codes N81, N83, N82) in Northwest Ohio; Aetna Whole Health in the Houston, TX area (codes ES1, ES3, ES2), the Newport News, VA area (codes J91, J93, J92), and the Milwaukee, WI area (codes F71, F73, F72); United Healthcare Benefits of Texas, Inc. (codes GF1, GF3, GF2) in the San Antonio, TX area; and Innovation Health Plan (codes LQ1, LQ3, LQ2) in Northern Virginia will not participate in the FEHB Program after December 31, 2017.

Enrollment in the terminating plans is approximately 3,104 contracts. The plans' reasons for leaving continue the pattern we've seen over recent years. In most cases, the plan is making a business decision based on enrollment, penetration in the market place, and overall margin/profitability.

Health Maintenance Organizations (HMOs)

For 2018, the FEHB Program has an HMO choice in all states.

Table 1 - Health Plan Terminations Effective 12/31/17

State	Plan Name	2017 Enrollment Code	General Location
Illinois	Blue Cross and Blue Shield of Illinois	A21, A23, A22	Chicago Illinois Area
New Mexico	New Mexico Blue HMO Preferred	Q11, Q13, Q12 Q14, Q16, Q15	All of New Mexico
Ohio	Paramount Health Care	N81, N83, N82	Northwest Ohio
Texas	Aetna Whole Health	ES1, ES3, ES2	Houston Area
Texas	United Healthcare Benefits of Texas, Inc.	GF1, GF3, GF2	San Antonio Area
Virginia	Aetna Whole Health	J91, J93, J92	Newport News Area
Virginia	Innovation Health Plan	LQ1, LQ3, LQ2	Northern Virginia
Wisconsin	Aetna Whole Health	F71, F73, F72	Milwaukee Area

Table 2 - The following plan will reduce its service area and terminate an enrollment code effective 12/31/17.

State	Plan Name	2017 Enrollment Code	Area Dropped
Washington	Aetna Open Access	C31, C33, C32	All of Washington

Table 3 - History of Health Plan Terminations since 1998

Effective	Terminating Plans	Service Area Withdrawals	Affected Enrollees
12/31/2017	6 plans	1 plan (1 enrollment code termination)	3,213
12/31/2016	5 plans	4 plans (5 enrollment code terminations)	735
12/31/2015	6 plans	1 plan (1 enrollment code termination)	3,000

12/31/2014 (as of 09/12/14)	5 plans		1 plan (1 enrollment code termination)	25,248
12/31/2013 (as of 08/26/13)	2 plans		2 plans (3 enrollment code terminations)	2,966
12/31/2012	1 plan		3 plans (3 enrollment code terminations)	10,333
12/31/2011 (as of 09/06/11)	6 plans (includes 1 HDHP)	2 HDHP options		12,680
12/31/2010 (as of 08/27/10)	6 plans	2 HDHP options	4 plans (14 enrollment code terminations)	16,268
12/31/2009 (as of 09/03/09)	12 plans	2 HDHP options	6 plans (16 enrollment code terminations)	61,335
12/31/2008 (as of 09/18/08)	6 plans	4 HDHP options	7 plans (17 enrollment code terminations)	10,992
12/31/2007 (as of 08/27/07)	13		1 (enrollment code termination)	27,692
12/31/2006 (as of 09/12/06)	10			4,472
12/31/2005 (as of 08/31/05)	7			4,069
12/31/2004 (as of 09/1/04)	2		1	2,247
12/31/2003 (as of 09/5/03)	9		1	16,843
12/31/2002 (as of 08/22/02)	10		4	27,461
12/31/2001 (as of 09/13/01)	28		20	137,488
12/31/2000 (as of 10/24/00)	32		. 6	56,806
12/31/1999 (as of 08/27/99)	42		11	42,743
12/31/1998 (as of 08/24/98)	66			68,684

FEHB Health Plan Additions and Terminations Question and Answer Sheet

• How many health plans will be available in the Program next year?

FEHB Program participants will be able to choose from 262 health plan choices for the 2018 plan year. There are 15 nationwide Fee-For-Service options open to all that includes two (2) HDHP options and two (2) CDHP options. In the Washington, DC metropolitan area, there will be 31 choices (including four (4) HDHPs with HSA/HRA choices and four (4) CDHP choices).

• How many plans are terminating and how many enrollees are affected?

Six (6) health plans will no longer participate in the FEHB Program after December 31, 2017. Also, one (1) health plan will remain in the FEHB Program but will reduce its service area and terminate the respective enrollment code effective December 31, 2017. Those enrollees will have to select a new plan during Open Season; otherwise, they will be enrolled in the Standard Option of the GEHA Plan (the lowest-cost nationwide plan option for 2018 as determined by OPM). The plans' actions will require approximately 3,213 enrollees to select new plans during the upcoming Open Season. This number represents less than one percent of the FEHB population.

• How will enrollees know if their health plan is terminating?

Enrollees will know from two sources. First, we produce a pre-Open Season Letter for all agency benefit officers. It includes details about the upcoming Open Season, including the names of plans terminating from the FEHB Program.

Second, all terminating plans are required to mail a notice to their members advising them of their decision to withdraw from the Program. Also, because of the transitional care provision in the Patients' Bill of Rights, enrollees with chronic or disabling conditions, or in the second or third trimester of pregnancy, may be able to continue seeing their specialist even after the plan's termination date.

Why did the plans terminate?

Plans generally decide to withdraw based on an assessment of enrollment, utilization, and premium. However, OPM can initiate a termination if it determines that a plan is no longer able to meet its contractual obligations to the Program.