
FEHB Program Carrier Letter

All Carriers

U.S. Office of Personnel Management

Office of Insurance Programs

Letter No. 2001-02

Date: February 6, 2001

Fee-for-service [02] Experience-rated HMO [02] Community-rated [02]

SUBJECT: FEHB Routine Reporting Requirements

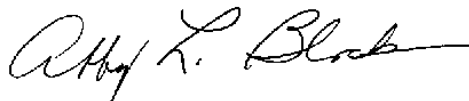
The enclosed summary of routine reports required of Federal Employees Health Benefits (FEHB) carriers replaces the summary in FEHB Program Carrier Letter 2000-09, of February 28, 2000. Changes are in red and are for:

- New contact people for information about the particular reports.

Thank you for your attention to submitting timely and accurate reports on your FEHB business. Reporting is an important factor in determining an experience-rated carrier's service charge and evaluating a community-rated carrier's compliance with the performance incentive program.

For more information about this letter, contact Agnes Kalland at 202/606-0745. For information about a particular report or carrier letter (CL) referenced in the summary, contact your OPM contract representative or the person shown as the contact for the given report.

Sincerely,



Abby L. Block
Assistant Director
for Insurance Programs

Enclosure

ROUTINE REPORTS REQUIRED OF FEHB CARRIERS

REPORT	Frequency:	Required of:	Date Due:	Reference:	Guidance:	For information about this report, contact:
Annual Accounting Statement						
<ul style="list-style-type: none"> ▪ <u>Estimated</u> Summary Statement of FEHBP Operations (see below) 	Annual	Exp-rated	Nov 4	Contract ' 1.7 Contract ' 3.2	CL 98-42	Financial Mgmt Div/ Shaffi (<i>ZShaffi@opm.gov</i>)
<p>AAS—Annual Accounting Statement (Fiscal Year Accounting Statement:)</p>	Annual	Exp-rated	Dec 15	Contract ' 1.7 Contract ' 3.2 Contract ' 3.10	CL 98-42	Financial Mgmt Div/ Shaffi (<i>ZShaffi@opm.gov</i>)
<ul style="list-style-type: none"> ▪ Summary Statement of FEHB Operations 						
<ul style="list-style-type: none"> ▪ FEHBP Balance Sheet as of 9/30 						
<ul style="list-style-type: none"> ▪ Consolidated Statement of FEHBP Cash Flows 						
<ul style="list-style-type: none"> ▪ Schedule 1 -- Health Benefits Charges Paid 						
<p>Financial Reporting Package:</p>	Annual	Exp-rated	Mar 31	Contract ' 1.7, ' 3.2, and ' 3.10	CL 98-42	Financial Mgmt Div/ Shaffi (<i>ZShaffi@opm.gov</i>)
<ul style="list-style-type: none"> ▪ Schedule 1BHealth Benefit Charges Paid 						
<ul style="list-style-type: none"> ▪ Schedule 2-Health Benefit Charges Accrued but Unpaid 						
<ul style="list-style-type: none"> ▪ Schedule 3-Administrative Expenses 						
<ul style="list-style-type: none"> ▪ Schedule 3-Addendum-Carrier Cost Containment Expenses 						