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# FEHB Program Carrier Letter

## All Carriers

U.S. Office of Personnel Management  
Office of Insurance Programs

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Letter No. 2002- 17

Date: April 23, 2002

Fee-for-service [15 ] Experience-rated HMO [ 15 ] Community-rated [14 ]

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**SUBJECT:** Brochure Changes for 2003

Draft brochure patterns are now available on the carrier web page (<http://www.opm.gov/carrier/index.html>) for your review and comment.

Over the past two years we have worked hard to rewrite your brochure's text and benefits in plain language so we are not expecting to make major format or wording changes for 2003. Please review the brochure pattern for your plan type and send us any suggestions you think would improve the content of the brochures for 2003. Do not add your benefits; rather, please think of your suggestions in terms of improving all plans' brochures. We will take brochure content suggestions until **May 20, 2002**. **Please email your suggestions to your OPM Contract Specialist.**

We've made a few text changes already and expect to make more later, including changes you'll suggest. Please see the Enclosure for a list of pattern changes since last October.

Sincerely,



Abby L. Block  
Assistant Director  
for Insurance Programs

Enclosure

## Changes to Brochure for 2003

4/15/02

- All Plans - change dates from 2002 to 2003 where appropriate.
- HMOs, New Plans – The required minimum benefit level for physical, occupational, and speech therapy is up to two consecutive months per year. You may limit the benefit through day, dollar, or visit limits so long as you meet the minimum benefit level. A plan may provide a richer benefit, such as 60 visits per year or 60 visits per condition, per year, if it's consistent with your plan's community benefit. Copays or coinsurance of up to 50% may apply if part of the community benefit.

Physical and occupational therapy can be further limited to rehabilitation (therapy to restore bodily function when there has been a total or partial loss of bodily function due to illness or injury), if this is consistent with their community benefit. Speech therapy may not be limited to rehabilitation.

The brochure patterns have been revised to reflect our minimum benefit requirements.

- All Plans - all references to “out-of-pocket maximum” have been changed to “catastrophic protection out-of-pocket maximum”.
- All Plans – we will not accept any exclusion of coverage or services for acts of war or terrorism. Please eliminate any such exclusions or limitations in your brochure text.
- All Plans – the Long-Term Care Section and Table of Contents entries have been revised.
- All Plans – The Department of Defense/FEHB Demonstration Project ends on December 31, 2002. Therefore, this section of the brochure has been deleted from the patterns. The Table of Contents has been revised by deleting the applicable section heading.
- All Plans – Section 9 has been revised in the Medicare, TRICARE, and Medicaid paragraphs to reflect changes authorized by our new suspension regulations.
- All Plans – the Table of Contents has been revised by separating the Medicare, TRICARE, and Medicaid headings and slightly revising them.
- All Plans - The text of the Inspector General Advisory has been revised. The new heading is entitled “Stop Health Care Fraud!”. The Table of Contents and the Index have been revised accordingly.
- FFS – the Section 1 heading, “We also have Preferred Provider Organizations” has been revised to read “We also have a Preferred Provider Organization”.
- All Plans - Section 5a, Maternity care, has been revised with an instruction for the plan to show that circumcision is a surgical benefit, not a maternity benefit, when this is the case.

- All Plans - In each numbered benefit Section under the sentence "Here are some important things you should keep in mind about these benefits", the following statement has been added for consistency. "Please remember that all benefits are subject to the definitions, limitations, and exclusions in this brochure and are payable only when we determine they are medically necessary". Please check your brochure to make sure that this sentence is fully stated in all heading areas.
- All Plans – Section 11 has been revised by making the heading entitled " Getting a Certificate of Group Health Plan Coverage" a bulleted heading.