
FEHB Program Carrier Letter

All FEHB Carriers

U.S. Office of Personnel Management
Healthcare and Insurance

Letter No. 2018-13

Date: August 22, 2018

Fee-for-Service [10]

Experience-rated HMO [10]

Community-rated [11]

Subject: Accreditation Requirements for FEHB Carriers

This letter updates Federal Employees Health Benefits (FEHB) Program accreditation requirements pursuant to the FEHB Standard Contract, Section 1.9, which states “the Carrier shall continue to pursue and maintain accreditation according to the steps and timeframes outlined by OPM.” Carrier Letter 2014-10 required all FEHB Carriers to provide proof of an existing comprehensive accreditation or obtain a comprehensive health plan accreditation from a recognized accrediting entity by April 2017.

It required FEHB Carriers to satisfy OPM’s requirement by presenting evidence of a comprehensive health plan accreditation issued by the Accreditation Association for Ambulatory Health Care (AAAHC), the National Committee for Quality Assurance (NCQA), or URAC. Changes in documentation of accreditation status are required to be submitted by Carriers to OPM within 30 days of receipt by the Carrier and include the items below:

- Accreditation certificate
- Summary of accreditation review findings

Carrier Letter 2014-10 also recognized that in rare circumstances, an FEHB Carrier’s corporate structure or benefit design might preclude accreditation as a comprehensive health plan. When this is the case, OPM’s requirement can be met through a combination of modular accreditations. OPM will consider submission of all of the following to be equivalent to a comprehensive health plan accreditation:

- Accreditation of plan management, including oversight of delegated responsibilities, subcontractor functions, and customer service
- Accreditation of provider network(s), including review of the credentialing process *
- Accreditation of at least two of the modules below: *
 - Case Management
 - Utilization Management
 - Pharmacy Benefit Management
 - Behavioral Health

In addition to the accreditors recognized earlier in this letter, OPM notes that accreditation for the above specified modules may be available from other specialized certification bodies. An example would be The Joint Commission (TJC) Behavioral Health Care Accreditation. Any Carrier seeking to satisfy OPM’s requirement through such an alternate accreditation may submit appropriate documentation for consideration.

In addition, OPM is adding two new ongoing requirements related to accreditation. These requirements are:

- Carriers' accreditation materials submitted to OPM should include an attestation from an individual authorized to bind the Carrier's contract with OPM, certifying that FEHB lives were included within the accredited product;
- Carriers receiving a provisional status or operating under an accreditor's corrective action plan must also provide details of the deficiency and a timeline for achieving full accreditation status to OPM.

We appreciate FEHB Carriers efforts to achieve and maintain accreditation milestones. Please send questions regarding FEHB accreditation requirements to the FEHBPerformance@opm.gov mailbox with a copy to your Health Insurance Specialist.

Sincerely,

Alan P. Spielman
Director
Healthcare and Insurance

* Accreditation may be held by the health plan or the vendor delivering the delegated service.