

The Federal Employees' Group Life Insurance (FEGLI) Program offers life insurance options for federal employees, including Basic Life Insurance and three types of Optional Insurance: Option A (Standard), Option B (Additional), and Option C (Family). Basic insurance is automatically provided unless waived, calculated as the greater of the employee's salary rounded up to the next \$1,000 plus \$2,000, or \$10,000, with the government covering one-third of its cost. Employees must elect Optional insurance within 60 days of appointment to an eligible position, or their options become limited. Coverage begins on the first day in a pay and duty status, and employees can cancel Basic insurance at any time, effective at the end of the pay period in which the cancellation is received. The FEGLI program operates as group term insurance, meaning it has no cash value and cannot be borrowed against. Claims are administered by the Office of Federal Employees' Group Life Insurance (OFEGLI), which typically processes them within 10 working days once fully documented. The program includes Accidental Death and Dismemberment (AD&D) insurance, providing additional benefits for specific losses, and encourages employees to reassess their life insurance needs after significant life events.

The policy outlines various coverage options, with Option A providing an additional \$10,000, and Option B allowing for coverage equal to one to five times the employee's annual pay, with costs varying by age. For example, a 38-year-old employee would pay \$6.00 biweekly for the maximum Option B coverage of \$200,000. Option C covers family members, providing \$5,000 for a spouse and \$2,500 for each eligible dependent child, with costs also dependent on the employee's age. Eligible family members for Option C include a spouse and dependent children under 22 or those over 22 who are disabled. Benefits from Option C are paid to the employee, not designated beneficiaries. Employees can change their coverage during Open Seasons, by providing medical information, or due to qualifying life events such as marriage or the birth of a child. Coverage ceases upon separation from Federal service, after 12 months in nonpay status, or under other specified conditions. The policy emphasizes understanding when coverage stops and consulting with human resources for eligibility and procedural questions.

Coverage can end on the last day of the pay period when a Life Insurance Election (SF 2817) form indicating a voluntary waiver or cancellation is received. If Basic insurance is canceled, all optional forms of insurance are also automatically canceled. Coverage may also terminate if the insured transfers to an excluded position or if the agency determines that pay will be insufficient to cover premiums for six months or more. A temporary extension of coverage for 31 days is available after termination unless coverage is voluntarily waived or benefits terminate. During this extension, no premiums are required, and conversion to an individual policy is an option if coverage cannot be continued. Policyholders can voluntarily cancel their life insurance at any time by completing the appropriate form, with the cancellation effective at the end of the pay period in which the form is received. If Option C is canceled due to the loss of eligible family members, the cancellation is retroactive. Upon retirement, coverage continues automatically if the retiree had the insurance for the five years immediately preceding retirement or all periods during which coverage was available, provided they do not convert to a private policy. The Basic Insurance Amount (BIA) remains until age 65, after which it may reduce based on the selected reduction option.

Retirees can choose from three reduction options for Basic insurance: 75% Reduction, which decreases the coverage by 2% monthly until 25% remains; 50% Reduction, which decreases by 1% monthly until 50% remains; or No Reduction, where coverage remains unchanged. Optional insurance amounts depend on the options in effect at retirement, with similar reduction choices available for Options B and C. The cost of coverage varies based on age and the number of multiples selected, with retirees paying the same rates as employees until age 65, after which premiums may change based on the reduction election. The policy provides resources for calculating premiums and making elections through the FEGLI website.

The policy outlines several key provisions regarding coverage, premium payments, and the rights of policyholders. Coverage includes a Basic insurance amount, with options for additional coverage

(Option A and Option B), but excludes Extra Benefits and Accidental Death and Dismemberment coverage. Regular premium payments cease automatically on the first day of the month following the policyholder's 65th birthday or upon retirement if it occurs after age 65. The policyholder may assign ownership of their Basic, Option A, and Option B coverage to another party, but not Option C. This assignment is irrevocable, transferring control over the coverage to the assignee. If a policyholder experiences a break in service, their coverage will be reinstated upon return, with specific provisions for breaks of less than or more than 180 days. For civilians deployed in support of contingency operations, there are options to elect additional coverage within 60 days of notification. Upon termination of employment, policyholders have a 31-day extension to convert their FEGLI coverage to an individual policy without medical examination, although certain conditions apply. If a policyholder is in nonpay status, their coverage continues for the first 12 months at no cost, but will terminate thereafter unless they meet specific criteria. The policy details the process for reconsideration of denied coverage elections and the implications for reemployed annuitants. In the event of the policyholder's death, benefits are paid in a specific order, starting with designated beneficiaries or assignees.

To file a claim, beneficiaries or survivors should contact the human resources office for a Claim for Death Benefits (FE-6) or download it from the FEGLI website. The completed claim form must be submitted with a certified death certificate. For Option C benefits, a Statement of Claim-Option C must be obtained from the human resources office. Benefits are paid to beneficiaries or survivors upon the policyholder's death, including Basic, Option A, and Option B benefits if enrolled. If the payment is less than \$5,000, it will be issued as a check; for amounts of \$5,000 or more, beneficiaries can choose between a check or a MetLife Total Control Account (TCA), which is an interest-bearing account. The TCA is not a bank account and is not insured by the FDIC, but MetLife guarantees the full amount, including interest.

The policy document outlines several key updates regarding the FEGLI program, including

provisions for civilian employees deployed in support of contingency operations to elect maximum coverage within 60 days of deployment notification. Effective January 1, 2016, changes to premiums for FEGLI coverages across most age bands were implemented, while Basic Employee coverage premiums remained unchanged. Following the U.S. Supreme Court's decision on June 26, 2013, the definition of family members was updated to include legally married same-sex spouses for FEGLI benefits. Additional changes effective October 1, 2010, include clarifications on how Basic insurance premiums are calculated and modifications to the Post-Retirement Optional insurance election process. The policy emphasizes the importance of understanding insurance coverage, costs, termination conditions, and the responsibility of policyholders to stay informed about their coverage status. For further information, the document directs users to the FEGLI website and provides contact details for the Office of Personnel Management (OPM) and OFEGLI.