

## **Initial Election Period**

As a new employee, you have 60 days from your date of appointment to make an election for the health benefits program. Your completed Health Benefits Election Form, SF-2809, must be submitted to your servicing Human Resources Office in a timely manner. If you fail to make an election within the required deadline, you are considered to have declined coverage. You will not have another opportunity to enroll until the annual open season (conducted November/December) or unless you experience a qualifying life event (see <http://www.opm.gov/insure/health/planinfo/gle.asp>) that would allow you to enroll. Please note that the SF-2809 should be completed and submitted even if you are declining coverage.

## **Effective Date of Coverage**

Your election will become effective on the first day of the first pay period that begins after your employing office receives your enrollment request and you are in a pay status. This means that the earliest your health insurance can become effective is the beginning of the pay period that begins after the pay period in which you were hired.

## **General Eligibility Criteria for Family Members**

The following individuals are eligible for coverage as family members: your spouse (including a valid common-law marriage), unmarried dependent children under the age of 26, including legally adopted children, and recognized natural children who meet certain dependency requirements.

For a grandchild/foster child to be covered under your FEHB enrollment, you must sign a certification stating that your foster child meets all the requirements and that you will notify your employing office if the child marries, moves out of the home, or stops being financially dependent on you.

Additional detailed guidance on the FEHB program is available by reviewing the [FEHB Handbook](#)