This Booklet provides general information for employees about the Federal Employees’ Group Life Insurance (FEGLI) Program. You can get detailed information in the FEGLI Handbook, which is available only in electronic format, at www.opm.gov/life. While some information for annuitants is provided here, annuitants can visit www.opm.gov/retire for more information about FEGLI benefits in retirement. Individuals on workers’ compensation (“Compensationers”) who have retired can visit www.opm.gov/retire for more information about FEGLI benefits in retirement.
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Life Insurance Means Peace of Mind for You and Your Family

Almost everyone needs life insurance; how much is for you to decide. Through the Federal Employees’ Group Life Insurance (FEGLI) Program, you have several choices in selecting the amount of life insurance that’s right for you. FEGLI offers:

**Basic insurance:** equal to the greater of (a) your salary rounded up to the next $1,000 plus $2,000, or (b) $10,000.

Three types of **Optional insurance:**
- **Option A**—Standard, in the amount of $10,000;
- **Option B**—Additional, in an amount from one to five times your annual rate of basic pay after rounding your salary up to the next $1,000;
- **Option C**—Family, one to five multiples of coverage for your spouse and your eligible dependent children. Each multiple is equal to $5,000 for the death of your spouse and $2,500 for the death of each eligible dependent child.

**Some important points to keep in mind:**
- If eligible, you are automatically covered under Basic life insurance, unless you waive it.
- You must take action, within strict time limits, to elect Optional insurance. If you elect it when you are first eligible, you can get it without having to provide medical information to prove insurability.
- The FEGLI Program offers group rates and convenient payroll deductions.
- The Government pays one-third of the cost of your Basic life insurance. You pay 100% of the cost of Optional insurance.
- FEGLI is group term insurance. It does not have any cash or paid-up value. You cannot get a loan by borrowing from this insurance.
- The amount of life insurance one needs varies by individual. Some general guidelines to help you calculate your needs are on page 5.

**OFEGLI Service Standards**

- The Office of Federal Employees’ Group Life Insurance (OFEGLI) is an administrative unit of Metropolitan Life Insurance Company (MetLife) that pays claims for the FEGLI Program.
- Once a claim for benefits is fully documented, OFEGLI will generally pay it within 10 working days.
- OFEGLI will respond to correspondence within 30 days of receipt of your letter. If OFEGLI needs more information before giving you an answer, OFEGLI will send you an interim response.
- OFEGLI will assist you and your beneficiaries in a prompt, accurate, and courteous manner.
How Do I Choose the Right Amount of Life Insurance?

Purchasing life insurance is a personal decision that only you can make. You should first consider the funds your survivors will need for immediate expenses, such as: uninsured medical costs, funeral expenses, lawyers’ fees to settle an estate, debts, and taxes. Young single people, who often do not buy life insurance because they have no dependents, should consider that funeral expenses can amount to thousands of dollars and should be provided for in some way.

Here are some very general guidelines that may help you. Not everyone will need the same amount of life insurance. Fill in the blanks to estimate your family’s needs. If a particular line does not apply, or you think it is too much coverage, just skip it. For a complete analysis of your needs, you may want to consult a financial planner.

**LIFE INSURANCE...HOW MUCH DO I NEED?**

1. Multiple of your annual income (in dollars) that you wish to provide your family if something were to happen to you* $______(1)
2. Annual expenses above and beyond daily living costs for you and your family (e.g., tuition, care for a disabled child or parent) + ______(2)
3. Emergency funds (3 to 6 months of living expenses) + ______(3)
4. Estimated amount for your funeral expenses (U.S. average is $7,000 to $10,000+)† + ______(4)
5. Total the estimate of your family’s needs (add lines 1 through 4) = ______(5)
6. Your total liquid assets (e.g., savings accounts, CDs, money market funds, existing life insurance) - ______(6)
7. Subtract line 6 from line 5 and enter the difference here: = $______(7)

The net result (line 7) is an estimate of the shortfall your family could face upon your death. Remember, these results are just general guidelines. For a complete analysis of your needs, you may want to consult a financial planner. The maximum coverage on your life available through FEGLI is about six times your salary (or about seven times for enrollees age 35 or under), through a combination of Basic, the Extra Benefit, Option A ($10,000), and Option B (maximum of 5 times your salary). See the rest of this Booklet for details.

* Most life insurance consultants recommend a minimum of five times your annual income.
  Source: Kiplinger’s (Kiplinger.com 2014).

† Source: AARP, Funeral and Burial Costs, 2014.

**Consider the Way Things Are…**

In addition to completing the calculation above, there are some other situations you might want to consider when determining how much life insurance you need. Remember to take into account whether you have:

• a spouse and/or dependent children;
• an aging parent and/or a disabled relative who depends on you for support;
• savings and/or accumulated debt;
• a sizable estate and/or a business.

Be sure to reevaluate your life insurance needs periodically. If you think you need more coverage, see page 12 for more information.
Who Is Eligible?

Most Federal employees, including part-time employees, are eligible for Federal Employees’ Group Life Insurance (FEGLI). If you have a question about eligibility, see your human resources office at your agency. Participation is entirely voluntary. If you are eligible, however, you are automatically covered under Basic insurance, unless you waive this coverage. You will have Optional insurance only if you elect it. **Remember, there are strict time limits to elect Optional insurance.**

When Does My Coverage Begin?

Basic life insurance coverage for new employees is effective on the first day you are in a pay and duty status in an eligible position, unless you waive this coverage before the end of your first pay period. (Pay and duty status means you are not on annual leave, sick leave, donated leave, excused absence, military furlough, or otherwise absent from duty.) You may cancel Basic at any time (unless assigned) see Assignments on page 21; the cancellation will be effective at the end of the last day of the pay period in which your human resources office receives your cancellation.

Optional insurance for new employees is effective on the first day you are in a pay and duty status in an eligible position on or after the day your human resources office receives your election. **You only have 60 days from the date of your appointment to an eligible position to elect Optional insurance.** Your opportunities to enroll in Optional insurance after those 60 days are limited. See page 12.

New employees must complete a Life Insurance Election (SF 2817) to cancel Basic insurance or to elect Optional insurance. If you do not complete an election form, you will automatically be covered under Basic insurance only, and your agency will withhold premiums from your pay.

What Is Basic Insurance and How Much Does It Cost?

Basic insurance provides term life insurance at group rates. Your Basic Insurance Amount (BIA) is equal to the greater of (a) your salary rounded up to the next $1,000 plus $2,000, or (b) $10,000. **The Federal Government pays one-third of the cost of your Basic insurance. If you are eligible, you are automatically covered under Basic insurance, unless you waive this coverage.**

The FEGLI Basic insurance premium is a level rate per one thousand dollars of coverage. The rate for an individual enrollee does not change as the enrollee ages (although the rate structure for all enrollees is subject to periodic adjustments based on claims experience). This means a younger employee pays the same cost for Basic coverage as a 64-year-old retiree. For example:

<table>
<thead>
<tr>
<th>AGE</th>
<th>SAME BASIC BIWEEKLY COST (per $1000 of coverage)</th>
<th>SAME BASIC MONTHLY COST (per $1000 of coverage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>25-year-old active employee</td>
<td>$0.150</td>
<td>$0.300</td>
</tr>
<tr>
<td>64-year-old retiree</td>
<td></td>
<td>$0.325</td>
</tr>
</tbody>
</table>
This feature balances the premium over time, making the enrollee cost more predictable. The enrollee pays an average cost over the term of their coverage.

As required by law, Basic insurance coverage uses a composite premium structure. This means the Basic premium rate is the same for each enrollee in the group policy, regardless of age or health status. As such, younger employees may pay a comparatively higher premium than they would with coverage based, in part, on age (like Optional insurance) or with an individually underwritten policy. Younger employees are covered by an additional Basic insurance provision called the “Extra Benefit”, however, which doubles the amount of Basic insurance payable at no extra cost for enrollees age 35 or younger. Beginning on an enrollee’s 36th birthday, the Extra Benefit decreases 10% each year until age 45, after which there is no Extra Benefit. In this example, the Extra Benefit would increase the Basic Insurance Amount (BIA) of $48,000 by an additional 50%.

<table>
<thead>
<tr>
<th>BASIC INSURANCE AMOUNT (BIA)</th>
<th>AGE</th>
<th>COVERAGE*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joe</td>
<td>40</td>
<td>$72,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>($48,000 + $24,000)</td>
</tr>
<tr>
<td>Sara</td>
<td>52</td>
<td>$48,000</td>
</tr>
</tbody>
</table>

* These rates may change in future years. For more information, see the FEGLI website at [www.opm.gov/insure/life/rates/index.asp](http://www.opm.gov/insure/life/rates/index.asp)

Unlike many other employer-sponsored life insurance programs, FEGLI coverage can be continued into retirement. The FEGLI retirement benefit is prefunded by premium costs so that after age 65 (or at retirement, if later) some coverage can be continued by retirees at no cost. The net effect of the level premium and post-65 benefit is that younger enrollees’ premiums cover the cost of coverage they currently have, and also pre-funds a portion of the costs related to coverage they will have later in their careers and in retirement. Since the government contributes a share of the Basic premium, the employee share remains relatively competitive with the cost of private term insurance.

You may use the life insurance worksheet on page 30 to compute your BIA and, if applicable, your Extra Benefit.

<table>
<thead>
<tr>
<th>HOW MUCH DO I PAY FOR BASIC INSURANCE?*</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAYROLL METHOD</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>Biweekly</td>
</tr>
<tr>
<td>Monthly</td>
</tr>
</tbody>
</table>
What If I Want Optional Insurance and How Much Does It Cost?

While Basic insurance may be enough coverage for some people, many others want more protection. That’s why FEGLI also offers Optional insurance: Option A—Standard, Option B—Additional, and Option C—Family. **You must have or elect Basic in order to elect any Optional insurance coverage. You pay the full cost for all Optional insurance.**

Enrollment in Optional insurance is not automatic. If you want Optional insurance as a new employee, you must submit a completed *Life Insurance Election* (SF 2817 or its electronic equivalent) to your human resources office within 60 days from the date of your appointment to an eligible position. Your opportunities to enroll in Optional insurance after those 60 days are limited. See page 12.

You may elect **Option A—Standard** in the amount of $10,000.

<table>
<thead>
<tr>
<th>YOUR AGE GROUP**</th>
<th>WITHHOLDING FOR $10,000 INSURANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Biweekly</td>
</tr>
<tr>
<td>Under 35</td>
<td>0.20</td>
</tr>
<tr>
<td>35 – 39</td>
<td>0.30</td>
</tr>
<tr>
<td>40 – 44</td>
<td>0.40</td>
</tr>
<tr>
<td>45 – 49</td>
<td>0.70</td>
</tr>
<tr>
<td>50 – 54</td>
<td>1.10</td>
</tr>
<tr>
<td>55 – 59</td>
<td>2.00</td>
</tr>
<tr>
<td>60 and over</td>
<td>6.00</td>
</tr>
</tbody>
</table>

* These rates may change in future years. For more information, see the FEGLI website at [www.opm.gov/insure/life/rates/index.asp](http://www.opm.gov/insure/life/rates/index.asp)

** For insurance withholding purposes, we assume you reach these ages on the first day of the pay period that starts after your birthday.

**Consider this example**

Angie, a 47-year-old Federal employee, is married with one child. She elects Option A. She is paid on a biweekly basis. Therefore, her cost for option A coverage is $0.90 cents biweekly. Refer to the worksheet on page 30 for more information, or see the FEGLI Calculator at [http://www.opm.gov/retirement-services/calculators/fegli-calculator](http://www.opm.gov/retirement-services/calculators/fegli-calculator)
You may elect **Option B—Additional** in an amount equal to one, two, three, four or five times your annual rate of basic pay (after rounding up to the next $1,000).

### HOW MUCH DOES OPTION B COST?*

<table>
<thead>
<tr>
<th>YOUR AGE GROUP**</th>
<th>WITHHOLDING FOR EACH $1,000 INSURANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Biweekly</td>
</tr>
<tr>
<td>Under 35</td>
<td>$0.02</td>
</tr>
<tr>
<td>35 – 39</td>
<td>0.03</td>
</tr>
<tr>
<td>40 – 44</td>
<td>0.04</td>
</tr>
<tr>
<td>45 – 49</td>
<td>0.07</td>
</tr>
<tr>
<td>50 – 54</td>
<td>0.11</td>
</tr>
<tr>
<td>55 – 59</td>
<td>0.20</td>
</tr>
<tr>
<td>60 - 64</td>
<td>0.44</td>
</tr>
<tr>
<td>65 – 69</td>
<td>0.54</td>
</tr>
<tr>
<td>70 – 74</td>
<td>0.96</td>
</tr>
<tr>
<td>75 – 79</td>
<td>1.80</td>
</tr>
<tr>
<td>80 and over</td>
<td>2.64</td>
</tr>
</tbody>
</table>

* These rates may change in future years. For more information, see the FEGLI website at [www.opm.gov/insure/life/rates/index.asp](http://www.opm.gov/insure/life/rates/index.asp)

** For insurance withholding purposes, we assume you reach these ages on the first day of the pay period that starts after your birthday.

Consider this example

Bob, a 38-year-old Federal employee, is married with three children. Bob wants the maximum amount of Option B. He elects five times his annual pay of $39,500 (rounded to $40,000), which totals $200,000. He is paid on a biweekly basis. Therefore, his cost for Option B coverage is $6.00 biweekly ($0.03 x 200). Refer to the worksheet on page 30 for more information, or see the FEGLI Calculator at [http://www.opm.gov/retirement-services/calculators/fegli-calculator](http://www.opm.gov/retirement-services/calculators/fegli-calculator)

You may elect **Option C—Family** to insure your spouse and your eligible dependent children. When you elect Option C, all of your eligible family members are automatically covered. You may elect either one, two, three, four, or five multiples of coverage. Each multiple is equal to $5,000 for your spouse and $2,500 for each of your eligible dependent children.

For example, if you elect three multiples and your spouse dies, you would receive $15,000 (3 X $5,000). If one of your eligible dependent children dies, you would receive $7,500 (3 X $2,500).

Each multiple is a unit. For example, if you elect two multiples, you have two multiples of coverage on your spouse and two multiples of coverage on each of your eligible dependent children. You cannot elect a number of multiples for your spouse that is different from the number of multiples for your eligible dependent children.
Eligible family members for Option C include a spouse (including a spouse from a valid common law marriage) and eligible dependent children. To be eligible, dependent children must be unmarried and under age 22, or if age 22 or over, incapable of self-support because of a mental or physical disability that existed before the child reached age 22. Eligible dependent children include your natural children, adopted children, stepchildren who live with you in a regular parent-child relationship, recognized natural children, and foster children (if they live with you in a regular parent-child relationship). Grandchildren are not covered unless they qualify as foster children. Stillborn children are not covered.

If you have any questions about eligible family members, please consult your human resources office; that office is responsible for determining eligibility.

Option C benefits are paid to you as the insured employee; you cannot designate a beneficiary.

** How Much Does Option C Cost?**

<table>
<thead>
<tr>
<th>YOUR AGE GROUP**</th>
<th>WITHHOLDING FOR EACH MULTIPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Biweekly</td>
</tr>
<tr>
<td>Under 35</td>
<td>$0.22</td>
</tr>
<tr>
<td>35 – 39</td>
<td>0.27</td>
</tr>
<tr>
<td>40 – 44</td>
<td>0.41</td>
</tr>
<tr>
<td>45 – 49</td>
<td>0.59</td>
</tr>
<tr>
<td>50 – 54</td>
<td>0.92</td>
</tr>
<tr>
<td>55 – 59</td>
<td>1.48</td>
</tr>
<tr>
<td>60 – 64</td>
<td>2.70</td>
</tr>
<tr>
<td>65 – 69</td>
<td>3.14</td>
</tr>
<tr>
<td>70 – 74</td>
<td>3.83</td>
</tr>
<tr>
<td>75 – 79</td>
<td>5.26</td>
</tr>
<tr>
<td>80 and over</td>
<td>7.20</td>
</tr>
</tbody>
</table>

* These rates may change in future years. For more information, see the FEGLI website at www.opm.gov/insure/life/rates/index.asp

** For insurance withholding purposes, we assume you reach these ages on the first day of the pay period that starts after your birthday.

Consider this example

Tina, a 42-year-old Federal employee, is married with four children. Tina wants the maximum amount of Option C. She elects five multiples of Option C, which equals $25,000 for her spouse (5 X $5,000) and $12,500 for each child (5 X $2,500). She is paid on a biweekly basis. Therefore, her cost for Option C coverage is $2.10 biweekly ($0.42 x 5 multiples). Refer to the worksheet on page 30 for more information, or see the FEGLI Calculator at http://www.opm.gov/retirement-services/calculators/fegli-calculator
What Is Accidental Death and Dismemberment (AD&D) Insurance?

Accidental Death and Dismemberment (AD&D) insurance provides funds in the event of a fatal accident or an accident that results in the loss of a limb or eyesight. For benefits to be paid, the death or loss must occur not more than one year from the date of the accident and be a direct result of bodily injury sustained from that accident, independent of all other causes.

AD&D insurance is automatically included in Basic insurance for employees at no additional cost. It is equal to your Basic Insurance Amount (BIA), and does not include the Extra Benefit. AD&D insurance is also automatically included in Option A in the amount of $10,000 for employees at no additional cost. Option B and Option C do not include AD&D insurance. Accidental death benefits are paid in addition to other FEGLI benefits that may be payable. **Regular Benefits (Basic and Option A and B if enrolled) are payable regardless of cause or location of death.** AD&D coverage stops when your employment ends. AD&D does not carry into retirement, and does not apply for individuals who are insured as compensationers.

The following is a list of covered losses under AD&D insurance and the corresponding amounts payable:

<table>
<thead>
<tr>
<th><strong>AD&amp;D SCHEDULE OF LOSSES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>For the Loss of</td>
</tr>
<tr>
<td>Life</td>
</tr>
<tr>
<td>Two or more Members*</td>
</tr>
<tr>
<td>One Member*</td>
</tr>
</tbody>
</table>

*A Member is a hand, foot, or the sight in one eye.

Note: For all losses resulting from any one accident, no more than the Full amount is payable.

The Office of Federal Employees’ Group Life Insurance (OFEGLI) will not pay AD&D benefits if your death or loss in any way results from, is caused by, or is contributed to by:

- physical or mental illness;
- the diagnosis of or treatment of physical or mental illness;
- ptomaine or bacterial infection (however, OFEGLI will pay AD&D benefits if the loss is caused by an accidentally sustained external wound);
- a war (declared or undeclared), any act of war, or any armed aggression against the United States in which nuclear weapons are actually being used;
- a war (declared or undeclared), any act of war, or any armed aggression or insurrection in which you are in actual combat at the time bodily injuries are sustained;
- suicide or attempted suicide;
- injuring yourself on purpose;
- illegal or illegally obtained drugs that you administer to yourself;
- operating any motor vehicle while intoxicated, as defined by the laws of the jurisdiction in which you were operating the vehicle.
What If I Want to Change My Life Insurance Coverage?

If you waived Basic insurance or did not elect Optional insurance when you were first hired, or you simply want different coverage than you have now, you have three opportunities to make changes: during an Open Season, by providing medical information, or by experiencing a life event. Note: you can cancel your coverage at any time unless you assigned your coverage (see Assignment information on page 21).

Open Season
FEGLI open seasons are infrequent. Your human resources office will give you more details about any upcoming open seasons whenever they are scheduled.

Providing Medical Information
As long as at least one year has passed since the effective date of your last waiver of life insurance coverage, you may provide satisfactory medical information at your own expense using the Request for Insurance (SF 2822). The SF 2822 is available only on the FEGLI website. You can download the form at www.opm.gov/life. You and your agency must complete part of the form. Then you take the form to your physician or other medical professional. He or she will examine you, complete the rest of the form, and send the form to the Office of Federal Employees’ Group Life Insurance (OFEGLI). If OFEGLI approves your request, you will automatically get Basic insurance the first day you are in a pay and duty status (unless you already have Basic). You will have 60 days from the approval date to elect Option A and/or elect Option B or increase your Option B multiples (up to a total of 5) by completing a Life Insurance Election (SF 2817) and submitting it to your human resources office.

You cannot elect Option C or increase your Option C multiples by providing medical information—you can get Option C based on a life event, as described on page 13.

Note: If you previously elected Option C—Family on the SF 2817 (or its electronic equivalent) and are changing other Optional coverage, you must sign for Option C again in order to keep it. If you do not sign for it, you have waived/cancelled it. For example, assume you already have Basic and three multiples of Option C and you want Option A. You complete the SF 2822 and provide medical information, and OFEGLI approves your request. Then you complete the SF 2817. You must sign for Basic, Option A, and ALSO three multiples of Option C even though you are not newly electing Option C. If you do not sign for your current Option C coverage, you will effectively waive/cancel it.

Your Basic insurance coverage will be effective on the first day you are in a pay and duty status, on or after the date OFEGLI approves your request. Your Option A and/or Option B coverage will be effective on the first day you are in a pay and duty status, on or after the date OFEGLI approves your request and your human resources office receives your Life Insurance Election (SF 2817) electing such coverage. You must be in a pay and duty status within 60 days after OFEGLI approves your request for the coverage to be effective; otherwise, OFEGLI’s approval is void, and you will have to start over.
**Life Event**

A FEGLI qualifying life event includes marriage, divorce, death of a spouse, or acquisition of a child*.

You may elect Basic, Option A, Option B and Option C based on a FEGLI qualifying life event. In addition, you may increase the number of multiples of Option B and/or Option C. You may elect any number of multiples for Option B and for Option C. The total number of multiples for each option cannot exceed five.

You can increase your coverage based on a life event by completing a *Life Insurance Election* (SF 2817 or its electronic equivalent). You must submit the SF 2817 to your human resources office within **60 calendar days after the date of the event**.

You can file the SF 2817 up to 31 days before the life event and provide proof of the event no later than 60 calendar days following the event. If you are electing coverage based on the acquisition of an eligible foster child, you must file the election with your employing office no later than 60 calendar days after completing the required certification. (See [www.opm.gov/life](http://www.opm.gov/life) for a copy of the certification.)

If you miss the 60-day time frame and it is within 6 months of the life event, you can contact your agency human resources office to inquire about a belated election. Your employing office may determine that you were unable, for reasons beyond your control, to elect or increase FEGLI.

*Acquisition of an eligible child includes a child born to the insured; the insured adopts a child; the insured acquires a foster child or stepchild; the insured’s stepchild or recognized natural child moves in with the insured; an otherwise eligible child’s marriage is dissolved by divorce or annulment, or his or her spouse dies; and the insured gains custody of an eligible child.*

[There is also an additional opportunity for certain employees to elect coverage. (See Civilians Deployed in Support of a Contingency Operation or Designated as Emergency Essential on page 22).]
### COVERAGE YOU MAY ELECT WITH A LIFE EVENT

<table>
<thead>
<tr>
<th>NUMBER OF MULTIPLES YOU MAY ELECT</th>
<th>EFFECTIVE DATE OF COVERAGE WHEN SF 2817 IS SUBMITTED:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Before the Event</td>
</tr>
<tr>
<td>Basic</td>
<td>The 1st day you are in a pay and duty status, on or after the event</td>
</tr>
<tr>
<td>Option A</td>
<td>Same as Basic</td>
</tr>
<tr>
<td>Option B</td>
<td>Same as Basic</td>
</tr>
<tr>
<td>Option C (if enrolled in Basic before the QLE)</td>
<td>From one to five multiples for any life event</td>
</tr>
<tr>
<td>Option C (if NOT enrolled in Basic before the QLE)</td>
<td>From one to five multiples for any life event</td>
</tr>
</tbody>
</table>

### SUMMARY OF WHEN YOU CAN ADD COVERAGE

<table>
<thead>
<tr>
<th>COVERAGE</th>
<th>OPEN SEASON</th>
<th>PROVIDING MEDICAL INFORMATION (SF 2822)</th>
<th>LIFE EVENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic</td>
<td>Depends on details of Open Season</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td>Option A*</td>
<td>Same as Basic</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td>Option B*</td>
<td>Same as Basic</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td>Option C*</td>
<td>Same as Basic</td>
<td>NO</td>
<td>YES</td>
</tr>
</tbody>
</table>

*You must elect or re-elect Basic to elect Optional.*

Note: You are responsible for knowing when your insurance stops.

**When Will My Life Insurance Stop?**

Your life insurance coverage (including Accidental Death and Dismemberment [AD&D] insurance) as an employee will stop on the earliest of the following dates:

- The date you separate from Federal service (although you may be eligible to continue coverage as an annuitant or while in receipt of workers’ compensation benefits).
- The end of a period of 12 months in nonpay status* (see footnote on pg. 15) (although you may be eligible to continue coverage while in receipt of workers’ compensation benefits). The 12 months may be continuous or broken by periods of less than four consecutive months of pay status.
- The end of the last day of the pay period in which your human resources office receives your Life Insurance Election (SF 2817) on which you voluntarily waive/cancel some or all life insurance. Only the coverage you waive/cancel stops, although if you cancel Basic, you automatically cancel all optional forms of insurance.
- The date you transfer to an excluded position. Check with your human resources office; in some cases, you may be eligible to keep your coverage.
• The end of the last day of the last pay period in which your agency withheld life insurance premiums from your pay, if your agency determines that for the next six months or more your pay will be insufficient to cover the withholdings, and you decide that you do not want to pay the premiums directly.
• The date the Government’s life insurance contract ends.

* See “Military Reservists Called to Active Duty” on page 23.

Will I Be Entitled to a Temporary Extension of My Life Insurance?

Yes, under certain circumstances. You will have a temporary extension of coverage for 31 days after your life insurance terminates, unless you voluntarily waive/cancel coverage, or your annuity or workers’ compensation benefits terminate. This temporary extension of coverage does not include AD&D insurance. No premiums or government contributions are required during this temporary extension. See the FEGLI Handbook, which is available in electronic format only, at www.opm.gov/life for more details. If you are not entitled to continue your coverage, you may convert your FEGLI coverage to an individual policy (see Conversion on page 22).

Can I Voluntarily Cancel My Life Insurance?

You may voluntarily waive/cancel Basic, Option A, Option B, or Option C or reduce multiples of Option B and/or Option C at any time by completing a Life Insurance Election (SF 2817)* (see footnote on pg. 16). Simply sign only for the insurance you wish to keep. If you do not sign for a particular type of insurance, you have waived/cancelled it. If you cancel Basic, you automatically cancel all forms of Optional insurance.

The life insurance coverage you cancel stops at the end of the pay period in which your human resources office receives your election form cancelling the coverage. Exception: If you cancel Option C because you no longer have any eligible family members, the effective date of the cancellation is retroactive to the end of the pay period in which you ceased to have any eligible family members. You should work with your agency on a refund of any extra premiums you paid.

You will not have a temporary extension of coverage nor the right to convert any insurance that you voluntarily cancel.

What Happens to My Life Insurance Coverage When I Retire?

Your coverage will automatically continue when you retire if:
• You retire on an immediate annuity and had the coverage for:
  • The five years of service immediately before the starting date of your annuity or, for annuitants retiring under the Federal Employees Retirement System (FERS) who postpone receiving their annuity, the five years immediately before their separation date for annuity purposes** (see footnote on pg. 16); or
• All period(s) of service during which that coverage was available to you if it is less than five years (“all opportunity”); and
• You do not convert the coverage to a private policy (see Conversion on page 22).

If you meet the rules listed above for continuing your coverage into retirement, you will have several choices of how much insurance you wish to carry after you retire.

* Unless you have assigned your coverage, in which case only the assignee(s) may cancel your coverage. See Assignment on page 21.

** You must meet the five years / all opportunity requirement for Basic and each type of Optional insurance in order to continue it into retirement.

† or your assignee(s), if applicable. See Assignment on page 21.

Basic Insurance in Retirement

The amount of your Basic insurance in retirement is your BIA (Basic Insurance Amount) at the time you separated as an employee. This amount continues until you reach age 65, after which it may reduce based on the election options described below. You will not have Accidental Death and Dismemberment coverage in retirement, or while in receipt of compensation after 12 months.

When you retire, you must choose the type of reduction you want by completing a Continuation of Life Insurance Coverage As An Annuitant or Compensationer (SF 2818) provided by your human resources office. For Basic insurance, you must choose 75% Reduction, 50% Reduction, or No Reduction. You can change to 75% Reduction at any time; your coverage will be as if you had originally elected 75% Reduction and your “extra premium” will stop. You will not receive a refund of premiums.

• What is 75% Reduction?
  This means your Basic insurance will reduce by 2% of the pre-retirement amount each month. The reduction starts at the beginning of the second month after your 65th birthday or at retirement, whichever is later. Your Basic insurance will continue to reduce until 25% of the pre-retirement amount remains. Your Basic insurance is free once it starts to reduce. If you choose 75% Reduction, you cannot later change your election.

• What is 50% Reduction?
  This means your Basic insurance will reduce by 1% of the pre-retirement amount each month. The reduction starts at the beginning of the second month after your 65th birthday or at retirement, whichever is later. Your Basic insurance will continue to reduce until 50% of the pre-retirement amount remains. When you turn 65, your “regular” premium for Basic insurance stops, but you continue to pay an extra premium for this choice. See the chart on page 20 for these premiums.

• What is No Reduction?
  This means your Basic insurance will not reduce. When you turn 65, your “regular” premium for Basic insurance stops, but you continue to pay an extra premium for this choice. See the chart on page 20 for these premiums.
Optional Insurance in Retirement

The amount of your Optional insurance in retirement depends on the options you had at the time you separated as an employee. This amount continues until you reach age 65, unless you elect No Reduction (for Option B and Option C only.)

• Option A—Standard:
  If you are eligible to continue Option A into retirement, it will reduce by 2% ($200) of the pre-retirement amount ($10,000) each month until it reaches 25% ($2,500) of the pre-retirement amount. The reduction starts at the beginning of the second month after your 65th birthday or at retirement, whichever is later. Option A is free once it starts to reduce.
  You cannot choose No Reduction for Option A.

If you are eligible to continue Option B and/or Option C into retirement, you must choose whether you want these options to reduce, as explained below:

• Option B—Additional
  The amount of Option B coverage in retirement is determined by multiplying your final annual basic pay rate (rounded to the next $1,000) by the number of Option B multiples that were in effect for the five years of service immediately before your retirement or the entire periods of service during which these multiples were available to you, if less than five years. This is the maximum amount of Option B that you can carry into retirement. You can also elect to carry a lower number of Option B multiples into retirement.

  If you retire before age 65, you elect how many Option B multiples you want to carry into retirement. In addition, you elect if you want Full Reduction or No Reduction for each multiple. For example, an employee who has three multiples can elect to have two multiples with Full Reduction and one multiple with No Reduction. “Mixed elections” are allowed. At age 65, or at retirement, if later, you will have a second opportunity to choose how your multiples reduce.

  • Full Reduction  If you choose Full Reduction, coverage is free on those multiple(s) after you turn age 65 or retire (if later). Effective the month after you become age 65 or retire (if later), the value of your Full Reduction Option B multiples will reduce by 2% of the pre-retirement amount per month for 50 months, at which time coverage on those multiples will end.
  • No Reduction  If you choose No Reduction, you continue to pay the premium for your age group for the No Reduction multiples until you die, or you change those multiples to Full Reduction, or you cancel those multiples. The value of your Option B multiples with a No Reduction election will not reduce. If you choose No Reduction, you can change to Full Reduction at any time. If you change to Full Reduction after you reach age 65, however, the level of coverage you have will be as if you had originally elected Full Reduction. You will not receive a refund of premiums.
The cost of Option B depends on your age, in five-year age brackets, and the number of multiples you have. As a retiree, you pay the same rate for Option B as employees do until you reach age 65, after which your premiums may or may not continue based on your reduction election described above. When you have a birthday that moves you to another age group, the change in premiums will be effective at the beginning of the month following your birthday, and will be reflected in the annuity payment that you receive the following month. If you elected Full Reduction for Option B at retirement, the coverage begins to reduce and is free when you become age 65 (or at retirement if later) unless you changed it to No Reduction at age 65, in which case you will continue to pay the premiums.


• **Option C—Family**

The amount of Option C you may elect to carry into retirement is determined by the number of Option C multiples that were in effect for the five years of service immediately before your retirement, or the entire periods of service during which this coverage was available to you, if less than five years. To determine the amount of insurance on your spouse, multiply $5,000 by the number of Option C multiples you continued in retirement. For coverage on your eligible children, multiply these multiples by $2,500.

For example, if you elect to continue three Option C multiples into retirement, that means if your spouse dies, you would receive $15,000 (3 X $5,000). If one of your eligible dependent children dies, you would receive $7,500 (3 X $2,500).

If you retire before age 65, you elect how many Option C multiples you want to carry into retirement. In addition, you elect if you want Full Reduction or No Reduction for each multiple. For example, an employee who has three multiples can elect to have two multiples with Full Reduction and one multiple with No Reduction. “Mixed elections” are allowed. At age 65, or at retirement, if later, you will have a second opportunity to choose how your multiples reduce.

• **Full Reduction**

If you choose Full Reduction, coverage is free on those multiple(s) after you turn age 65 or retire (if later). Effective at the month after the month you become age 65 or retire (if later), the value of your Full Reduction Option C multiples will reduce by 2% of the pre-retirement amount per month for 50 months, at which time coverage on those multiples will end.
• No Reduction  □ If you choose No Reduction, you continue to pay the premium for your age group for the No Reduction multiples until you die, or you change those multiples to Full Reduction, or you cancel those multiples. The value of your Option C multiples with a No Reduction election will not reduce. If you choose No Reduction, you can change to Full Reduction at any time. If you change to Full Reduction after you reach age 65, however, the level of coverage you have will be as if you had originally elected Full Reduction. You will not receive a refund of premiums.

The cost of Option C depends on your age, in five-year age brackets, and the number of multiples you have. As a retiree, you pay the same rate for Option C as employees do until you reach age 65, after which your premiums may or may not continue based on your reduction election described above. When you have a birthday that moves you to another age group, the change in premiums will be effective at the beginning of the month following your birthday, and will be reflected in the annuity payment that you receive the following month. If you elected Full Reduction for Option C at retirement, the coverage begins to reduce and is free when you become age 65 (or at retirement if later) unless you changed it to No Reduction at age 65, in which case you will continue to pay the premiums.

## BASIC INSURANCE — ANNUITANTS

### COST* FOR EACH $1,000 OF YOUR BASIC INSURANCE AMOUNT¹ MONTHLY

<table>
<thead>
<tr>
<th>YOU HAVE FULL COVERAGE TO AGE 65 THEN:</th>
<th>Before You Reach Age 65 You Pay the TOTAL of BOTH the Regular Premium and the Extra Premium</th>
<th>After You Reach Age 65,² Continuing for Life</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Regular Premium</td>
<td>Extra Premium for 50% or No Reduction</td>
</tr>
<tr>
<td>75% Reduction — BIA reduces 2%¹ each month after you reach age 65,³ until 25% of the amount at retirement remains.</td>
<td>$0.3250</td>
<td>N/A</td>
</tr>
<tr>
<td>50% Reduction — BIA reduces 1%¹ each month after you reach age 65,³ until 50% of the amount at retirement remains.</td>
<td>$0.3250</td>
<td>$0.64</td>
</tr>
<tr>
<td>No Reduction — 100% of the BIA¹ remains for life</td>
<td>$0.3250</td>
<td>$1.94</td>
</tr>
</tbody>
</table>

### GENERAL INFORMATION

1. Basic Insurance Amount (BIA)—Your final annual rate of basic pay, rounded to the next $1,000, plus $2,000 (or a minimum of $10,000) (or the post-election BIA you had after your election of a partial Living Benefit—see page 23). Your BIA does not include the Extra Benefit or Accidental Death and Dismemberment coverage.

2. The regular premium automatically stops on the first day of the month after you reach age 65. If you retire after reaching 65, you do not pay the regular premium.

3. The reduction starts at the beginning of the second month after your 65th birthday or at retirement, whichever is later.

* These rates may change in future years. For more information, see the FEGLI website at [www.opm.gov/insure/life/rates/index.asp](http://www.opm.gov/insure/life/rates/index.asp)
**Miscellaneous Provisions**

*Assignment*

Assignment means that you give ownership and control of your Basic, Option A, and Option B life insurance coverage to someone else. You cannot assign Option C. The insurance is still on your life and you must continue to pay for the coverage, but someone else “owns” and controls your coverage. You may assign your life insurance coverage to an individual, a corporation, or an irrevocable trust. If you want to assign your life insurance, you can do so by completing an *Assignment, Federal Employees’ Group Life Insurance* (RI 76-10). Your decision to assign your life insurance coverage is irrevocable; you cannot cancel your assignment if you change your mind.

Only you can assign your life insurance coverage; a court-appointed guardian or someone with your power of attorney or other fiduciary may not. Your assignee(s) may reassign your life insurance coverage.

Enrollees generally assign insurance to comply with the requirements of a court order upon divorce, for inheritance tax purposes, to get money before death (such as for terminally ill and chronically ill persons), or to satisfy a debt.

If you assign your insurance, you give up your rights to convert your coverage (see *Conversion* on page 22), to designate beneficiaries, and to cancel your coverage. Only your assignee(s) may convert your coverage, designate beneficiaries, and cancel your coverage.

If you assign your life insurance coverage, neither you nor your assignee may elect Living Benefits (see page 23).

A court decree of divorce, annulment, legal separation, or the terms of a court-approved property settlement agreement relating to a court decree of divorce, annulment, or legal separation may direct you to assign your life insurance coverage to a specified person, unless you have previously made an assignment. Such a court decree or agreement, however, would not serve as the assignment itself. You must still complete a valid *Assignment, Federal Employees’ Group Life Insurance* (RI 76-10). If you do not, the life insurance may not be paid according to the court decree or agreement.

See *Assignment, Federal Employees’ Group Life Insurance* (RI 76-10) for more information, or the *FEGLI Handbook*, which is available in electronic format only, at [www.opm.gov/life](http://www.opm.gov/life)

*Break in Service*

When you return to work after a break in service of less than 180 days, your human resources office will automatically give you the same coverage that you had in your prior position. You can elect other coverage during an Open Season, by providing satisfactory medical information or by experiencing a qualifying life event as described on pages 12 and 13.
When you return to work after a break in service of 180 days or more, you will automatically get Basic insurance (even if you previously waived it) and the same Optional insurance (if applicable) that you had in your prior position. In addition, you may elect Optional insurance or increase the multiples of Optional insurance (if you do not already have the maximum) within 60 days of your appointment to an eligible position. If you do not make an election regarding Optional insurance, your human resources office will automatically reinstate the same coverage you had in your prior position.

_Civilians Deployed in Support of a Contingency Operation or Designated as Emergency Essential_

Per Public Law 110-417, enacted October 14, 2008, a civilian employee eligible for FEGLI who is deployed in support of a contingency operation (as that term is defined in 10 U.S.C. 101(a)(13)) or [a civilian] employee of the Department of Defense [who is eligible for FEGLI] who is designated as an emergency essential employee under U.S. C. 1580, may elect Basic, Option A and Option B (up to the maximum of 5 multiples). You must make the election within 60 days after the date of notification of your deployment in support of a contingency operation. Contact your human resources office for more information.

_Conversion_

When Federal Employees’ Group Life Insurance (FEGLI) coverage as an employee stops and you are entitled to a 31-day extension of coverage (as stated on page 15), you may convert your FEGLI coverage to an individual policy. The conversion coverage is effective at the end of the 31-day extension of coverage, regardless of when you apply. No medical examination is required, although you may be asked a few questions about your health to see if you qualify for a lower premium. You do not have to answer these questions, but if you do not, you may be paying a higher premium than necessary. You may wish to convert your life insurance coverage if you do not qualify to carry it into retirement or to continue it as a compensation.

You may convert to an individual policy an amount less than or equal to the total of your Basic and Optional insurance (if applicable). You may not convert coverage, however, if (1) you continue that same coverage as a retired employee or compensationer, (2) you return to Government service in a position in which you are eligible for FEGLI coverage within three calendar days after you left Government service, (3) your insurance ends because you voluntarily waive/cancel coverage, (4) your annuity or compensation stops, or (5) the Government’s life insurance contract ends.

If you assign your insurance, you give up your right to convert your coverage. Only your assignee(s) may convert your insurance coverage.

You must submit the request for conversion information to the Office of Federal Employees’ Group Life Insurance (OFEGLI) within 31 calendar days of the date on the SF 2819 _Notice of Conversion Privilege_ that you receive from your agency (60 days if overseas) or within 60 calendar days after the date of the terminating event (90 days if overseas), whichever is earlier.
Your agency should notify you of your conversion rights when your life insurance coverage ends. **You are responsible, however, for finding out whether you qualify to convert your insurance coverage and for getting the necessary forms and information from your human resources office. You must act promptly, since you only have a limited time (as noted above) to convert your coverage.** If you are unable to convert your coverage, an individual having a Power of Attorney may convert on your behalf.

**Direct Payment of Premiums**

If your pay is too low to allow a withholding for life insurance premiums and your human resources office expects this situation to last more than six months, you will have a choice. You can choose either to terminate some or all of your insurance coverage or to continue the coverage and pay the premiums directly. Contact your human resources office for further details.

**Incontestability**

If your agency enrolls you in some FEGLI coverage by mistake, the Incontestability provision may apply. If your erroneous coverage and the applicable premium withholdings have been in force for at least two years before the error is discovered, then that erroneous coverage becomes valid. Please see your human resources office if you think that the Incontestability provision applies to you.

**Living Benefits**

You may elect to receive a full or partial lump sum payment of your Basic insurance (living benefits) if you are terminally ill and your treating physician provides a documented medical prognosis that your life expectancy is nine months or less. To apply for living benefits, call OFEGLI at 1-800-633-4542. See the *FEGLI Handbook*, which is available only in electronic format, at [www.opm.gov/life](http://www.opm.gov/life) for more details. If you are unable to apply for a Living Benefit, an individual having Power of Attorney may apply on your behalf. The individual with a Power of Attorney should contact your human resources office and/or OFEGLI for more information.

**Military Reservists Called to Active Duty**

For military reservists who separate from service or military duty, your life insurance ends at the end of 12 months in nonpay status, or 90 days after your military service ends, whichever comes first. During this period, your coverage is free. Per Public Law 110-181 enacted January 28, 2008, however, you can continue your FEGLI coverage for an additional 12 months if you are called to active duty.

The law allows employees who enter active duty or active duty for training in one of the uniformed services for more than 30 days to continue their FEGLI for up to 24 months. FEGLI coverage is free for the first 12 months. Employees must pay both the employee and agency share of the premiums for their Basic coverage, however, and also pay the entire cost (there is no agency share) for any Optional insurance they may have for the additional 12 months of coverage. Contact your human resources office for more information.
**Nonpay Status**

Your life insurance coverage continues automatically at no cost to you for the first 12 months in nonpay status. (Exception: If you are receiving workers’ compensation benefits during these first 12 months, your continued coverage will not be free. The U.S. Department of Labor will withhold premiums from your workers’ compensation payments.) Your coverage as an employee will terminate after 12 months of nonpay status, or when you separate from your agency, if earlier. The 12 months may be continuous or broken by periods of less than four consecutive months of pay status. When your coverage terminates, you will have the right to convert your coverage to an individual policy or continue coverage as a compensator, if eligible.

For military reservists who separate from service for military duty, *(see “Military Reservists Called to Active Duty” on page 23).*

Please see your human resources office for more details. **It is your responsibility to know when your coverage terminates.**

**Part-Time Tour of Duty**

If you are a part-time employee, your annual pay is your basic pay applied to your tour of duty on record (as shown on your most recent Standard Form 50 Notification of Personnel Action or equivalent document) in a 52-week work year. For example, if your annual salary is $48,638, and you work 24 hours per week, your annual pay for FEGLI purposes is $29,183 ($48,638 ÷ 52 weeks ÷ 40 hours x 24 hours x 52 weeks). Please see your human resources office if you have questions about the level of your FEGLI coverage as a part-time employee, and use our FEGLI Calculator at [http://www.opm.gov/retirement-services/calculators/fegli-calculator](http://www.opm.gov/retirement-services/calculators/fegli-calculator)

**Reconsideration**

You are entitled to reconsideration of an agency decision to deny your election of one or more life insurance coverages or the opportunity to change coverage multiples. The reconsideration process applies only to enrollment issues. You have 31 days (60 calendar days if overseas) from the date of your agency’s initial decision in which to request reconsideration.

You should send your request for reconsideration to the agency address shown in the initial decision letter you receive from your human resources office.

**Reemployed Annuitants**

If you have FEGLI coverage, either as a Federal retiree or as a compensator in receipt of benefits from OWCP, and you return to work in the Federal government, you need to inform your employing agency of your FEGLI coverage. They will notify OPM’s Retirement Operations Center in case your coverage and premiums need to be adjusted. Contact your employing agency’s human resources office for more information or if this applies to you.
**Workers’ Compensation**

When you start receiving compensation, you remain insured under FEGLI as an employee until one of the following happens:

- You complete 12 months in nonpay status; or
- You separate from service.

You are entitled to continue life insurance for up to 12 months while you are in nonpay status. The 12-month period starts when you are in nonpay status for an entire pay period. OWCP withholds the FEGLI premiums from your compensation.

To continue life insurance benefits as an OWCP compensationer, you must meet all of the following requirements:

- On the day you separate from service or on the day you end 12 months of nonpay status, you are still receiving compensation payments;
- The Department of Labor has determined that you are unable to return to duty;
- You have been insured for the 5 years of service immediately before the beginning date of your compensation, or for the full period(s) of service during which you were eligible to be insured if less than 5 years; and
- You have not converted to an individual policy (see Conversion on page 22).

The 12 months of continued coverage while in nonpay status cannot be counted toward meeting the 5-year requirement. You must meet the 5-year/all-opportunity requirement as of the date compensation begins. You must meet the 5-year/all opportunity requirement for Basic and each type of Optional insurance in order to continue it into compensation.

If you meet the rules for continuing coverage while in receipt of workers’ compensation benefits, you will have several choices for how much insurance you wish to elect after you turn age 65. You must make this election on SF 2818 “Continuation of Life Insurance Coverage As An Annuitant or Compensationer.” Please see your human resources office if you are receiving workers’ compensation benefits, and pages 15-19 for an explanation of how coverage reduces for retirees and compensationers.

**Phased Retirement**

On August 8, 2014, OPM issued the final regulation to implement phased retirement. Phased retirement is a new human resources tool that allows full-time employees to work a part-time schedule while beginning to draw partial retirement benefits. Eligible employees who obtain the consent of an authorized agency official to enter phased retirement are deemed to be full-time employees for the purpose of the FEGLI Program, and the FEGLI withholding and employer contribution will be the same as for full-time employees. Basic and Optional coverage (if elected) for phased retirement employees is the same as for full-time employees.
If you want payment to be made differently from the order listed above, and you have not assigned your life insurance and a valid court order is not on file, you must designate a beneficiary.

If you wish to make a designation for your Federal Employees’ Group Life Insurance (FEGLI), you should complete a Designation of Beneficiary (SF 2823) and submit it to your human resources office. Your human resources office must receive the form before you die. Contact your human resources office to learn what method of delivery it accepts for FEGLI designations.

A court-appointed guardian, or someone with your power of attorney, or other fiduciary may not designate a beneficiary for your insurance. If you are satisfied with the order of payment listed above, however, you do not need to do anything.

A valid court order refers to a certified court decree of divorce, annulment, legal separation, or the terms of a court-approved property settlement agreement relating to a court decree of divorce, annulment, or legal separation that your human resources office receives before your death. Such an order must expressly provide for someone to receive your FEGLI benefits. If a valid court order is on file, it takes precedence over previously filed designations.
If there is a valid court order on file, you may not change or submit a designation of beneficiary unless the person(s) named in the court decree of divorce, annulment or legal separation agrees in writing, or unless the court decree of divorce, annulment or legal separation is modified.

You cannot designate beneficiaries if you have assigned your insurance. Only the assignee(s) may designate beneficiaries.

A designation made in any other document is valid only if the document specifies your FEGLI benefits, is signed by you, and otherwise meets the requirements of a valid FEGLI designation of beneficiary.

If you decide to file a designation, be sure it is accurate and reflects your intentions. You should review your designation and file a new designation whenever a beneficiary’s address changes. Failure to do so may mean that the Office of Federal Employees’ Group Life Insurance (OFEGLI) may not be able to locate your beneficiaries and therefore cannot pay them the death benefits.

For employees, or a compensationer during the first 12 months of nonpay status, the court order must be submitted to the insured employee’s agency human resources office.

For retirees and those on compensation for 12 months or more, the court order must be submitted to the Office of Personnel Management.

Someone who wrongfully causes your death cannot receive payment of death benefits. In addition, please refer to the list of exclusions on page 11 for Accidental Death and Dismemberment benefits.

How Should Someone File a Claim?

The Office of Federal Employees’ Group Life Insurance (OFEGLI) is an administrative unit of Metropolitan Life Insurance Company (MetLife) that pays claims for the Federal Employees’ Group Life Insurance (FEGLI) Program.

Your beneficiary or other survivor should contact your human resources office for a Claim for Death Benefits (FE-6), or download a copy from the FEGLI website at www.opm.gov/life. The completed claim form should be submitted along with a certified death certificate to your human resources office or, if instructed, directly to OFEGLI.

If you have Option C and an insured family member dies, contact your human resources office for a Statement of Claim-Option C, Family Life Insurance (FE-6 DEP) which contains further instructions, or download a copy from the FEGLI website.

How Are Benefits Paid?

As the insured person, you receive any living benefits, accidental dismemberment, or Family Option-C benefits that may be payable. You cannot designate a beneficiary(ies) for these benefits.
If you die while insured, your beneficiary(ies) or other survivors will receive your Basic, Option A and/or Option B benefits (if enrolled). If an insured family member dies, you receive any Option C benefits that may be payable.

If OFEGLI is paying your beneficiary less than $5,000, your beneficiary will receive a check.

If OFEGLI is paying your beneficiary $5,000 or more, your beneficiary will have a choice of two ways to receive the payment:

• A check;
• A MetLife Total Control Account or (TCA), an interest bearing account set up in your beneficiary’s name, with the Metropolitan Life Insurance Company (MetLife). If your beneficiary is receiving $5,000 or more and does not make a decision on how to receive payment, a MetLife Total Control Account will be set up in your beneficiary’s name.

The MetLife TCA is a settlement option offered by MetLife for the payment of claims. A MetLife TCA is not a checking, savings, or money market bank account. Since the MetLife TCA is not a bank account, it is not insured by the FDIC or any government agency. Instead, MetLife guarantees the full amount in the MetLife TCA, including all interest earned. MetLife’s guarantee is further backed by the beneficiary’s respective state guaranty association. Maximum guarantee limits vary from state to state and may change over time. If your beneficiary chooses a MetLife TCA, the relationship is between your beneficiary and MetLife, not with the federal government or any of its agencies. You or your beneficiary can find additional information about state guaranty associations at the National Association of Insurance Commissioners (NAIC) website at www.naic.org

The MetLife TCA offers a minimum guaranteed annual effective interest rate, meaning that MetLife commits to pay your beneficiary at least that specified rate of interest on the money in the account. Your beneficiary begins earning interest the day the MetLife TCA is created. Interest is earned daily, but is not credited until the last day of the month. The interest rate offered on the MetLife TCA may be better or worse than the prevailing market rates. The MetLife TCA is a product offered by MetLife on which the company may make a profit. Your beneficiary pays no monthly maintenance fees on a MetLife TCA.

Your beneficiary has complete control of, and access to, the entire amount of the insurance proceeds. Your beneficiary can withdraw the full amount from the MetLife TCA at any time. The information packet your beneficiary receives will include a draft book (similar to a checkbook). At any time and at no cost, your beneficiary can write drafts (similar to checks) from a minimum of $250 up to the full balance of the account. In addition, your beneficiary will receive periodic activity statements, and can designate a beneficiary for the account. If your beneficiary chooses the MetLife TCA settlement option, he or she will receive more detailed information when the account is opened.
FEGLI Coverage

- If eligible, you are automatically enrolled in Basic insurance, unless you waive it.
- You must elect Optional insurance, within strict time limits, if you want it.
- You must be enrolled in or elect Basic insurance in order to elect Optional insurance.
- The Government pays one-third of the cost of your Basic life insurance. You pay 100% of the cost of Optional insurance.
- You can voluntarily waive/cancel insurance coverage at any time unless you have assigned your coverage. If you cancel Basic insurance, you automatically cancel all forms of Optional insurance.
- You can newly elect or increase existing coverage by submitting satisfactory medical information (except Option C) or by experiencing a qualifying life event.
- Open Seasons are held infrequently, so if you think you need more coverage, take the necessary action within 60 days of eligibility.
- It is your responsibility to know the amount of your coverage, when it starts, when it stops, and who is entitled to payment of the death benefits.

### TABLE OF EFFECTIVE DATES – NEWLY ELIGIBLE FEDERAL EMPLOYEES

#### BASIC COVERAGE

<table>
<thead>
<tr>
<th>If You Do Nothing</th>
<th>If You WAIVE* it DURING Your First Pay Period</th>
<th>If You WAIVE* it AFTER Your First Pay Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage</td>
<td>Your coverage is voided.</td>
<td>Ends on the last day of the pay period in which your agency receives your waiver.</td>
</tr>
<tr>
<td>Begins on the first day you’re in a pay and duty status.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deductions</td>
<td>No deductions</td>
<td>End after the last day of the pay period in which your agency receives your waiver.</td>
</tr>
<tr>
<td>Begin the first pay period you’re in a pay and duty status.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### OPTIONAL COVERAGE

<table>
<thead>
<tr>
<th>If You Do Nothing</th>
<th>If You Elect* it Within the 60 Days After Your Appointment to an Eligible Position</th>
<th>If You Want it After Those 60 Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage</td>
<td>Begins on the first day you’re in a pay and duty status on or after the date your agency receives your election.</td>
<td>Your Opportunities to Elect Optional Coverage After Those 60 Days Are Limited.</td>
</tr>
<tr>
<td>No coverage</td>
<td></td>
<td>See pages 12 – 13</td>
</tr>
<tr>
<td>Deductions</td>
<td>Begin the first pay period you’re in a pay and duty status after your agency receives your election.</td>
<td></td>
</tr>
<tr>
<td>No deductions</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* “Elect it” and “Waive it” means your agency received a properly completed SF 2817 “Life Insurance Election” (or its electronic equivalent) from you.*
BASIC
1. Enter your annual rate of basic pay. $  
2. If not an even thousand, round up to the next even thousand. $  
3. Add $2,000. +$2,000  
4. Add the amounts in lines 2 and 3. $  
5. Enter the amount in line 4, or $10,000, whichever is greater. $  
6. Enter the Age Multiplication Factor* (from the table at the right).  
7. Multiply the amount in line 5 times the amount in line 6. This is the total amount of Basic you have at your present age.* $  

<table>
<thead>
<tr>
<th>Your Age</th>
<th>Age Multiplication Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>35 or under</td>
<td>2.0</td>
</tr>
<tr>
<td>36</td>
<td>1.9</td>
</tr>
<tr>
<td>37</td>
<td>1.8</td>
</tr>
<tr>
<td>38</td>
<td>1.7</td>
</tr>
<tr>
<td>39</td>
<td>1.6</td>
</tr>
<tr>
<td>40</td>
<td>1.5</td>
</tr>
<tr>
<td>41</td>
<td>1.4</td>
</tr>
<tr>
<td>42</td>
<td>1.3</td>
</tr>
<tr>
<td>43</td>
<td>1.2</td>
</tr>
<tr>
<td>44</td>
<td>1.1</td>
</tr>
<tr>
<td>45 and over</td>
<td>1.0</td>
</tr>
</tbody>
</table>

* The age multiplication factor that is used to calculate death benefits corresponds to your age at the time of your death. You are calculating the amount of insurance that you have at your present age.

Option A — Standard
8. Enter $10,000. $  

Option B — Additional
9. Enter the amount in line 2. $  
10. Enter the number of multiples you elect (1, 2, 3, 4, or 5).  
11. Multiply the amount in line 9 times the amount in line 10. This is the amount of your Option B coverage. $  

Option C — Family
12. You may choose from 1 to 5 multiples of Family Coverage. Each multiple is equal to $5,000 for your spouse and $2,500 for each of your eligible children.  
13. Add the amounts in lines 7, 8, and 11. This is the total amount of insurance on your life. $  

Note: Refer to pages 8, 9, and 10 for the current withholding rates for Option A, Option B, and Option C insurance, respectively. You may refer to the FEGLI Calculator at http://www.opm.gov/retirement-services/calculators/fegli-calculator. With this online calculator you can rapidly and conveniently:
- Determine the face value of various combinations of FEGLI coverage.
- Calculate the premiums for the various combinations of FEGLI coverage, and see how choosing different Options can change the amount of life insurance and the premiums.
- See how the life insurance carried into retirement will change over time.
When you have completed your election, submit it to your human resources office. Your confirmation of your election, plus this Booklet, serve as your certificate of insurance.

Some agencies may process life insurance elections electronically. Contact your human resources office for more information on how they will process your election.

SAMPLE ELECTION FORM

Give your name and identifying information.

Sign for the insurance you have and wish to keep and for any new insurance you are eligible for and wish to elect (anything you don’t sign for is waived/cancelled).

OR

If you do not want any insurance, you must sign here.
This Booklet differs from the previous version (FE 76-21 dated August 2004) in the following ways:

**Expanded Opportunities to Elect Coverage effective October 1, 2010**

- We expanded the timeframe to elect coverage. Effective October 1, 2010, the timeframe is 60 days after the employee becomes eligible - regardless of the reason - as a new or newly eligible employee, via a qualifying life event, or when the Office of Federal Employees’ Group Life Insurance (OFEGLI) approves an application to enroll after an employee provides satisfactory medical evidence of insurability via the SF 2822. This new timeframe is consistent with other election opportunities for Federal insurance benefits. See pages 6-10.

- We expanded the amount of coverage an employee can elect based on a qualifying life event (QLE). Effective October 1, 2010, an employee can elect any FEGLI coverage without restrictions (except the employee must have or must newly elect Basic to elect Optional coverage) up to the maximum amount available. In addition, these new regulations provide for a six-month belated opportunity election if the employee does not make an election based on a QLE within the 60-day timeframe because of reasons beyond the employee’s control. See page 13.

**Changes due to Public Law 110-181, enacted January 28, 2008**

- We added language to the section “When Will My Life Insurance Stop?” on page 14 to reflect the change in the law which allows military reservists called to active duty to elect to continue FEGLI coverage after the initial 12 month free period while in nonpay status. Reservists can continue coverage for an additional 12 months, but must pay the full cost. See page 14 and page 23.

**Changes due to Public Law 110-417, enacted October 14, 2008**

- We revised the life event information on page 13 to reflect the change in the law which allows civilian employees deployed in support of a contingency operation as defined by section 101 (a)(13) of title 10, or a Department of Defense employee designated as “emergency essential” as defined by section 1580 of title 10, to elect the maximum amount of FEGLI coverage (except Option C) within 60 days of the date of notification of deployment or the date of designation as an emergency essential employee. See page 13 and page 22.

**Changes to FEGLI Premiums effective January 1, 2016**

- We announced changes in premiums for FEGLI coverages beginning January 2016. These included changes to premiums for most age bands under Option A, Option B, and Option C, and for Post-Retirement Basic Insurance (for annuitants only). There was no change in premiums for Basic Employee coverage. See pages 8, 9, 10, and 20.

**Changes for Individuals in Same-Sex Marriages effective June 26, 2013**

- We changed the definition of family members as a result of the U.S. Supreme Court decision striking down Section 3 of the Defense of Marriage Act (DOMA). As a result, OPM now recognizes legally married same-sex spouses of Federal employees and annuitants for FEGLI benefits. This includes legal same-sex marriages granted in countries that authorize such marriages.
Other Changes and Revisions effective October 1, 2010

• We added information under “What Is Basic Insurance and How Much Does It Cost?” about how the Basic insurance premium is calculated for all enrollees. See pages 6-7.

• We changed how a retiring employee will make the Post-Retirement Optional insurance election at the time of retirement. The reduction election information on pages 17-19 has been revised to reflect this change.

• We changed the time limits for converting coverage. OFEGLI must receive the request for conversion information from the employee/assignee within 31 calendar days of the date on the conversion notice, or within 60 calendar days after the date of the event, whichever is earlier. In addition, an individual with a Power of Attorney can apply on an employee/retiree/assignee’s behalf. See pages 22-23.

• We changed how FEGLI coverage is treated for an individual in receipt of benefits from the Office of Workers’ Compensation Programs (OWCP) who returns to work under conditions that allow continuation of OWCP. The compensationer will have the FEGLI coverage treated the same as if s/he was a reemployed annuitant. See pages 24-25.

• We added a provision to the regulations regarding Living Benefits so that now someone with a Power of Attorney can apply on an employee/retiree’s behalf. See page 23.

Clarifications

• We clarified the effective date of coverage based upon providing medical information (SF 2822). Coverage is effective the day of OFEGLI’s approval if the employee is in a pay and duty status. See page 12.

• We clarified the definition of a valid court order. See page 26.

• We added more information under “How are Benefits Paid?”, including a description of the choices your beneficiaries will have when filing a claim for FEGLI benefits. We also added information about MetLife’s “Total Control Accounts” and provided a link to the National Association of Insurance Commissioners (www.naic.org) so beneficiaries can obtain more information on these accounts and how they are regulated. See pages 27-28.

• This Booklet reflects our emphasis on the new time limits for electing Optional insurance, converting your insurance, and otherwise making changes in your coverage.

• This Booklet reflects our continued emphasis on reminding employees that any coverage not signed for is considered waived/cancelled. You are responsible for knowing what your insurance coverage is, its cost, when it terminates, and who is entitled to payment of the death benefits.

• This Booklet reflects our continued emphasis on clarity and plain language.

For other changes and clarifications, as well as a current version of the FEGLI regulations, please visit the FEGLI website at www.opm.gov/life
Unless your agency requested publication of a specific form from the Government Printing Office (GPO), current versions of the forms listed below are only available electronically at www.opm.gov/life. You may also wish to check with your human resources office. Some agencies have automated versions of some of these forms.

**Standard Forms**
- SF 2817 Life Insurance Election
- SF 2818 Continuation of Life Insurance Coverage As an Annuitant or Compensationer
- SF 2819 Notice of Conversion Privilege
- SF 2820 Certification of Insured Employee’s Retired Status
- SF 2821 Agency Certification of Insurance Status
- SF 2822 Request for Insurance
- SF 2823 Designation of Beneficiary

**Office of Personnel Management Forms**
- OPM 1482 Agency Certification of Status of Reemployed Annuitants
- RI 76-10 Assignment, Federal Employees’ Group Life Insurance

**Office of Federal Employees’ Group Life Insurance Forms**
- FE-6 Claim for Death Benefits
- FE-6DEP Statement of Claim — Option C
- FE-7 Claim for Accidental Dismemberment
- FE-8† Claim for Living Benefits

**Booklets, Pamphlets, and Handbooks**
- RI 76-12 FEGLI Pamphlet for Retirees
- FE 76-20 FEGLI Program Booklet (U.S. Postal Service)
- FE 76-21 FEGLI Program Booklet (Federal)
  - FEGLI Handbook

† *Available only from the Office of Federal Employees’ Group Life Insurance (OFEGLI) by calling 1-800-633-4542.*

OFEGLI
P.O. Box 6080
Scranton, PA 18505-6080
FOR MORE INFORMATION

• Visit the FEGLI website at www.opm.gov/life
• Read the FEGLI Handbook at www.opm.gov/life
• Visit your human resources office or contact the Agency Benefits Officer for your agency.
• For more information visit http://apps.opm.gov/abo/
• Send an email to the Office of Personnel Management (OPM) at fegli@opm.gov*

* Please note: Neither OPM nor the Office of Federal Employees’ Group Life Insurance (OFEGLI) has any information about whether you are enrolled in the FEGLI Program or what types of coverage, if any, you currently have. It also does not have any information about your designation of beneficiary. If you need any of this information, you must contact your human resources office directly.