

Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees

**In this
Section**

The following topics are covered in this section.

Topic	Page
Federal Employee Program (FEP) Overview	G – 2
No PCP or Referrals	G – 2
Enrollment Codes	G – 2
Basic Option ID Card Sample	G – 3
Standard Option ID Card Sample	G – 4
Federal Customer Service	G – 5
Federal Customer Service Telephone Number and Hours	G – 5
Federal Customer Service Mailing Address	G – 5
Federal Precertification Requirements	G – 6
Federal Outpatient Precertification	G – 6
How Do I Obtain a Precertification?	G – 6
Behavioral Health PreAuthorization	G – 6
Additional Behavioral Health Information	G – 6
Federal Claims Filing Instructions	G – 7
Federal Claim Inquiries	G – 7
Federal Pharmacy Programs	G – 7
Federal Disease Management Programs	G – 7
FEP – Blue Health Connection	G – 8

Continued on next page

Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees, continued

Overview

Blue Cross and Blue Shield Service Benefit Plan is the official name of coverage offered to federal employees and annuitants by participating Blue Cross and Blue Shield Plans. This plan is commonly referred to as the Federal Employee Program or FEP.

FEP benefits may be redefined annually as negotiated by the Blue Cross Blue Shield Association and the Office of Personnel Management in Washington, D.C.

FEP utilizes the BlueChoice network.

No PCP or Referrals

Subscribers of the Service Benefit Plan do not choose a primary care physician, and referrals are not required, however, a Federal Employee or dependent must seek care from a participating BlueChoice Physician or other Professional Provider or Facility in order to receive the highest level of benefits.

What Do Enrollment Codes Stand For?

Any federal subscriber carrying a current federal ID card is eligible to receive the Federal Preferred Provider Organization benefits.

The federal ID card is quite different from BlueChoice® ID cards. The following is a key to the Service Benefit Plan enrollment codes that appear on the federal ID card.

Enrollment Code	Benefits For	Benefit Option
104	Self Only	Standard
105	Self and Family	Standard
111	Self Only	Basic
112	Self and Family	Basic

Option Defined

Standard Option or Basic Option indicate types of service covered and how much is payable.

Note:

Federal Employee Program group number is **OFEPTX**. This group number needs to be entered in Block 11 on the CMS 1500 (08/05) claim form.

Continued on next page

Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees, continued

Sample ID Card for the Federal Employee Program (Basic Option)

Basic Option ID Card (front & back):



Reminders:

- No Referral Required
- Physician outpatient surgery, including lab, X-ray and machine diagnostic tests are subject to a \$350.00 Standard Option calendar year deductible; **no deductible is required under Basic Option**
- Eligible services payable at 85 percent with a 15 percent patient coinsurance responsibility for Standard Option

Continued on next page

Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees, continued

Sample ID Card for the Federal Employee Program (Standard Option)

Standard Option ID Card (front & back):



Reminders:

- No Referral Required
- Physician outpatient surgery, including lab, X-ray and machine diagnostic tests are subject to a \$350.00 Standard Option calendar year deductible; no deductible is required under Basic Option
- Eligible services payable at 85 percent with a 15 percent patient coinsurance responsibility for Standard Option

Continued on next page

Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees, continued

Federal Customer Service

BCBSTX provides a dedicated Federal Customer Service staff. The Customer Service representatives have access to federal subscriber information to give prompt inquiry response to:

- Benefits and subscriber eligibility
- Claims
- Current Preferred Provider network information
- Formal and informal complaint procedures

The automated phone system also provides information for:

- Benefits
 - Eligibility
 - Claims Payment
-

Telephone Numbers and Hours

You may reach the BCBSTX Federal Customer Service by calling:

800-442-4607

Hours: 9 a.m. to 5 p.m. (CT), Monday - Friday

Mailing Address

Federal Customer Service may also be contacted in writing at the following address:

**FEP Customer Service
P.O. Box 660044
Dallas, TX 75264-0044**

Continued on next page

Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees, continued

Precertification Requirement

All inpatient hospital admissions require precertification.

Outpatient Precertification

Precertification for FEP subscribers is required for the following outpatient care and services:

- Home Health Care
 - Hospice Care
 - Home Infusion Therapy
 - Organ, Tissue Transplants & Clinical Trials (Call 1-800-225-2268 for more information)
 - Prescription Drugs – Certain prescriptions require prior approval. (Call 800-624-5060 to request prior approval)
 - Partial hospitalization or intensive outpatient treatment for Mental Health/Substance Abuse
-

How Do I Obtain Precertification?

To obtain Inpatient Precertification (**excluding behavioral health**) or outpatient precertification, call:

**iEXCHANGE IVR at 800-413-0869
or access
iEXCHANGE Web at bcbstx.com/provider**

Behavioral Health Preauthorization

Inpatient hospital admissions, partial hospitalization & outpatient behavioral health visits require preauthorization under the Federal Employee Program.

To authorize behavioral health inpatient admissions, call:

800-528-7264

Additional Behavioral Health Information

For Standard Option, outpatient behavioral health services do not require preauthorization.

Basic Option subscribers must call for prior approval before receiving care. Refer to the Mental Health and Substance Abuse phone number on the back of the ID card.

If you or your FEP patient have questions or need information about behavioral health professionals, facilities or procedures, call **800-528-7264**.

Continued on next page



Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees, continued

Claims Filing Refer to Section F for the detailed instructions on claims filing.

**Federal
Claims
Inquiries** For federal claims inquiries, contact BCBSTX Federal Customer
Service by calling:
800-442-4607

Address written claims inquiries to:

**BCBSTX
FEP Customer Service
P.O. Box 660044
Dallas, TX 75264-0044**

**Federal
Pharmacy
Programs** Some prescription drugs require prior approval through the Retail
Pharmacy Program for federal subscribers. To assist the
subscriber with the prior approval process or if you need
information about the federal pharmacy programs,
please call the following toll-free numbers:

Retail Pharmacy Program Customer Service
800-624-5060

Mail Order Prescription Program
800-262-7890

**Federal
Disease
Management
Programs** The FEP Disease Management Program provides chronically ill
Federal Employees with the resources to remain healthy and
maintain their quality of life. The program is available to
subscribers diagnosed with asthma, congestive heart failure
(CHF), diabetes and hypertension (HTN). Subscriber enrollment
is voluntary; candidates are identified through continuous
recruitment. Refer to Section K for additional information.

Continued on next page

Federal Employee Program (FEP) – Service Benefit Plan Coverage for Federal Employees, continued

FEP - Blue Health Connection¹

Physicians, other Professional Providers and subscribers benefit from Blue Health Connection.

Blue Health Connection is a toll-free service that provides 24-hour health care information available to Blue Cross and Blue Shield of Texas Federal Employee Program (FEP) subscribers. The service enables subscribers to make informed, appropriate health care decisions. Subscribers can call the Blue Health Connection Audio Health Library[®] at **888-BLUE-432** and get prerecorded information and literature on more than 450 health topics.

Additionally, FEP subscribers can speak to experienced, specially trained nurses who can answer their health care questions. Using non-diagnostic, symptom-based assessment guidelines, the nurses help subscribers identify appropriate sources and time frames for care.

With Blue Health Connection, network Physicians and other Professional Providers may benefit through a reduction of after-hour and inappropriate phone calls. We also expect Blue Health Connection to reduce unnecessary hospital emergency visits. Subscribers will receive supportive information, in addition to that given by their Physician or other Professional Provider.

Note: Blue Health Connection should only be used by FEP subscribers. However, preferred Physicians or other Professional Providers are offered one courtesy call to be used as a demonstration. Preferred Physicians or other Professional Providers should identify themselves, so they will not be included in the utilization data for the program.

[®]Personal Health Advisor and Audio Health Library are registered trademarks of Access Health, Inc.

¹Blue Health Connection is the name used by Blue Cross and Blue Shield Federal Employee Program for Personal Health Advisor.