1603.7003

(e) Not give instructions on enrollment. Statements on enrollment procedures, requirements, or eligibility shall be limited to those such as:

To sign up, fill out a Health Benefits Registration Form (Standard Form 2809) from your personnel office indicating the enrollment you want:

The enrollment codes for (plan’s name) are:

Self Only ________ Enrollment Code ________

Self and Family ________ Enrollment Code ________

The form must then be returned to your personnel office before the (date) deadline. Your (plan’s name) coverage will begin the first pay period in January, (year). If you are a retired Federal employee and need forms, contact the Office of Personnel Management at P.O. Box 809, Washington, DC 20044.


1604.7003 Contract clause.

The clause at 1652.203–70 shall be inserted in all FEHBP contracts.