



Transaction ID : 000000

YOUR NAME
123 MAIN ST.
ANYTOWN, USA 12345

Your PSHB Automatic Enrollment

Dear Your Name,

Welcome to the Postal Service Health Benefits (PSHB) Program!

The PSHB Program is a new, separate program within the Federal Employees Health Benefits (FEHB) Program, which will provide health insurance to eligible Postal Service employees, Postal Service annuitants, and their eligible family members starting January 1, 2025. You can learn more about PSHB by visiting www.opm.gov/pshb.

This notice provides information on transitioning your health insurance coverage from your current FEHB plan to a PSHB plan. The Office of Personnel Management (OPM) is working to make your transition as simple as possible by automatically enrolling you into a PSHB plan based on your current FEHB enrollment.

You are currently enrolled in Your Health Plan Carrier/Option. Your Carrier will participate in PSHB in 2025 and will offer a plan option that is equivalent to the 2025 benefits and cost sharing of your current plan option. To help make this transition easier, you will be automatically enrolled in that PSHB plan option. You always have the right to choose a different PSHB plan during the Federal Benefits Open Season. This year, Open Season will run from November 11, 2024, through December 9, 2024.

We ask that you review your PSHB enrollment information below, including covered family members. If this information is correct and you do not want to make any changes to the enrollment noted below, you do not need to do anything during Open Season. Your coverage will begin automatically on January 1, 2025.

2025 Health Plan Details

Please see your plan details below

PSHB Carrier	Your Health Benefit Plan
Plan Option Name	Your Plan Option
Plan Phone Number	(XYZ) 123-5678

Your Premium (Per Pay Period)	\$ Premium amount
Enrollment Code	000
Enrollment Type	Self/Family/etc.
Covered Family Members	Name (s)
Coverage Effective Date	Month Day, Year

OPM encourages you to review all available PSHB plan options, benefits, and premiums by visiting health-benefits.opm.gov/pshb during Open Season. The enclosed user guide provides guidance on how to access the new online enrollment portal. You can also call (844)-451-1261 for assistance.

Thank you.

For More Help

- Visit health-benefits.opm.gov/pshb or health-benefits.opm.gov/healthcare/insurance/ for tips and resources
- Call the PSHB Helpline at (844)-451-1261

Reconsideration Rights

You have the right to ask your employing agency or OPM, to reconsider its initial decision denying PSHB enrollment or denying you the opportunity to change your enrollment or your participation in the premium conversion plan. You must make this request in writing within 30 calendar days of this notice. The employing agency or OPM will reconsider, through an independent review, whether the employing office or OPM properly applied law and regulations in making its initial decision. This reconsideration is your final level of administrative review for enrollment decisions under the PSHB Program. Please visit www.opm.gov/pshb-reconsideration for more information on how to seek reconsideration.

Discrimination is Against the Law

The Postal Health Benefits Program complies with applicable Federal nondiscrimination laws and does not discriminate on the basis of race, color, national origin, age, disability, religion, or sex (including pregnancy, sexual orientation, and gender identity).

This Notice has Important Information

This notice has important information about your health insurance coverage. Look for key dates in this notice. You may need to take action by certain deadlines. You have the right to get this information and help in your language at no cost. For assistance, call the PSHB Helpline at (844)-451-1261.