

*Guide To Making Elections To  
FEDVIP*

http://www.benefeds.com/

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Click Here If This Is Your First  
Time Accessing This Site



Did you miss open season?  
Open season ended  
December 14, 2020.

Review Options

## Manage your benefits in one convenient place

BENEFEDS is the online benefit management portal for Federal and uniformed service members. BENEFEDS allows you to access information about and make changes to your Federal dental and vision, long term care, and flexible spending programs.



### Dental and Vision

BENEFEDS administers the enrollment and premium payment processes for the Federal Employees Dental and Vision Insurance Program (FEDVIP).

We'll guide you through verifying your eligibility and creating your account before helping you enroll. Once enrolled, you'll be able to manage your plans and view your payment history.

Enroll

Click Here



### Long Term Care

BENEFEDS administers the premium payment processes on behalf of the Federal Long Term Care Insurance Program (FLTCIP).

You must enroll in FLTCIP at [www.ltcfeds.com](http://www.ltcfeds.com) before creating your My BENEFEDS account. Once enrolled, create your account to view your FLTCIP payment history or pay your direct bill.

Create account



### Flexible Spending

BENEFEDS works with the Federal payroll providers to collect allotments for the Federal Flexible Spending Account Program (FSAFEDS).

You must enroll in FSAFEDS at [www.fsafeds.com](http://www.fsafeds.com) before creating your My BENEFEDS account. Once enrolled, create your account to view your allotment history.

Create account

Information Regarding FLTCIP & FSA Can Be Found Here

### Federal Civilians

- This includes employees, annuitants, family members and survivors
- Employees eligible for dental and vision (if eligible for FEHB)
- Annuitants eligible for dental and vision
- Premiums are paid pre-tax for employees
- Dependent children are covered until age 22

Select

### Uniformed Services

- This includes retirees, reservists, family members and survivors
- Most retirees are eligible for dental coverage
- Most retirees and active duty family members are eligible for vision coverage (if enrolled in a TRICARE health plan)
- Active duty uniformed service members are not eligible for dental and vision coverage
- Premiums are paid post-tax
- Dependent children are covered until age 21 (non-students) or 23 (full-time students)

Select

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Click Here

*Note: Title 32 Dual Status Employees Are Considered Civilian*

## Select your eligibility type

What type of Federal civilian are you?

- Federal civilian employee**
- USPS employee
- Retiree (annuitant)
- Survivor annuitant
- Compensationner

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Federal civilian employees must be eligible to enroll in the Federal Employees Health Benefits Program (FEHB) and your position must not be excluded by law or regulation.

## Select your employment type

What type of employee are you?

- Full time
- Part time permanent
- Seasonal
- Intermittent
- Temporary
- Per diem

← Select What's Applicable To You

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Select an option for more information.

## Search for your agency

Tell us where you work so that we know where to deduct your premiums from.

Keyword

Alphabetical List

Search agency

department of the |

x

Search

Department of the Air Force

Department of the Army

Department of the Navy



Department Of The Army  
&

Department Of The Air Force  
Are Hired By Our Agency

*Contact HRO If You Are Unsure Of  
Your Agency*

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## Search for your agency

Tell us where you work so that we know where to deduct your premiums from.

Keyword

Alphabetical List

Search agency

Department of the Army

Search

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If your agency has asterisks(\*\*) next to it, we cannot deduct FEDVIP premiums from your pay. You must pay your prelims through automatic bank withdrawal (ABW) and provide bank information when you enroll

Agency

Bureau / Office / POI

Department of the Army

All Army Agencies - Overseas (97381100)

Department of the Army

All Army Agencies - Stateside (97380800)

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Select What's Applicable To You

## Search for your agency

Tell us where you work so that we know where to deduct your premiums from.

**Keyword** **Alphabetical List**

A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | R | S | T | U | V | W

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*Searching Alphabetically Is Also  
An Option*

Agency	Bureau / Office / POI
<input type="radio"/> Defense Nuclear Facilities Safety Board (DNFSB)	
<input type="radio"/> Delta Regional Authority	
<input type="radio"/> DENALI COMMISSION (DC)	
<input type="radio"/> Department of Agriculture (USDA)	Agricultural Marketing Service (AMS)

## Verify your agency

Make sure everything looks good before you continue.

**Selected agency**

Department of the Army

All Army Agencies - Stateside (97380800)

[Edit](#)

[Continue](#)

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## Verify your FEHB eligibility

Are you enrolled in the Federal Employees Health Benefits Program (FEHB) as the primary enrollee?

Yes  
 No

Employees must be eligible for FEHB (or for coverage under DC Health Link) to be eligible for FEDVIP.

Retirees, survivor annuitants, and compensationers do not have to be eligible for FEHB to be eligible for FEDVIP.

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## Eligibility summary

**Eligible for:** Dental and vision

Need to [check your eligibility again?](#)

Before enrolling, you will need to create a My BENEFEDS account to save your FEDVIP eligibility information (if you haven't already).

### Certification of eligibility

I certify that I am eligible to enroll in a dental and/or vision plan under the Federal Employees Dental and Vision Insurance Program (FEDVIP) as a Federal employee, U.S. Postal Service employee, annuitant, survivor annuitant, or compensationner as defined in the FEDVIP regulations (5 CFR Part 894).

I further certify that I will not be covered under more than one FEDVIP dental plan and/or FEDVIP vision plan, nor will any of my eligible family members. If I am or any of the eligible family members in my enrollment are covered or will be covered under someone else's FEDVIP dental plan and/or FEDVIP vision plan, I will not proceed with this enrollment.

If you are a legal guardian enrolling an eligible family member, you certify that the above statements are true for the eligible family member.

I certify that the above statements are correct

[Create a My BENEFEDS Account](#)

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You Will Now Need To Create A BENEFEDS Account

## Create a BENEFEDS account

Before selecting a FEDVIP plan, you need to create an account to save your eligibility information. We'll finish building your profile in the next step.

### Personal information

---

<b>Title</b>	<b>First name</b>	<b>MI (optional)</b>	<b>Last name</b>	<b>Suffix (optional)</b>
Select title ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	Select Suffix ▼

<b>Social Security Number</b>	<b>Confirm SSN</b>
<input type="text"/>	<input type="text"/>

<b>Date of birth</b>		
Month ▼	Day ▼	Year ▼

<b>Gender</b>
<input type="radio"/> Male
<input type="radio"/> Female

You must provide at least an email address –OR– a phone number as a way to contact you if needed. Do not provide your internal/agency email.

Email

Confirm email

+ Add another email

Phone

Type

+ Add another phone

Next

## Login credentials

---

We recommend using an email address for your BENEFEDS User ID.

User ID

Password

Confirm password

Security question 1

Answer 1

Select question ▼

Security question 2

Answer 2

Select question ▼



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Programs Education and Support Tools

Now Login With The User Name And Password You Created

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Did you miss open season?  
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Review Options

If You Have Dental & Vision Plans Your Login Will Look Like This

If You Do Not Have A Plan Skip To Slide 22 For Enrolling With A QLE

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### Dental & Vision (FEDVIP)

#### DENTAL

**Blue Cross Blue Shield FEP Dental, PPO Standard**

Self Plus One

\$24.64 Bi-Weekly

Effective: 01/01/2021

[Plan overview](#)

[View payment history](#)

#### VISION

**Aetna Vision Preferred, PPO High**

Self Plus One

\$11.20 Bi-Weekly

Effective: 01/01/2021

[Plan overview](#)

[View payment history](#)

## Long Term Care (FLTCIP)

Not enrolled. To enroll, go to [www.ltcfeds.com](http://www.ltcfeds.com)

[Learn more](#)

## Flexible Spending (FSAFEDS)

### HEALTH CARE

Not enrolled. To enroll, go to [www.fsafeds.com](http://www.fsafeds.com)

### DEPENDENT CARE

Not enrolled. To enroll, go to [www.fsafeds.com](http://www.fsafeds.com)

## FEDVIP Dental

Blue Cross Blue Shield FEP Dental, PPO Standard

Self Plus One

\$24.64 Bi-Weekly

Effective: 01/01/2021

Covered family members



[Back to My BENEFEDS](#)

Select What Action You'd Like To Take.

*Note: Some changes can be made outside of a QLE and opening season but cancelling can only be done in open season*



- Change plan
- Submit QLE
- Coverage details
- Cancel plan

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## Pending changes to your plan

You currently have no pending changes.

[Submit a new QLE](#)

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## Submit a qualifying life event (QLE)

To change your plan outside of open season, you must have experienced a QLE.

You must have documentation available clearly showing that you experienced this QLE. You will be responsible for providing a copy if asked for verification. Changes to your enrollment may be voided if you misrepresent yourself as having experienced a QLE.

Which QLE have you recently experienced?

- Acquiring a family member
- Losing a family member
- Losing other dental insurance coverage

 Select One Of The Following

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## Submit a qualifying life event (QLE)

To change your plan outside of open season, you must have experienced a QLE.

You must have documentation available clearly showing that you experienced this QLE. You will be responsible for providing a copy if asked for verification. Changes to your enrollment may be voided if you misrepresent yourself as having experienced a QLE.

Which QLE have you recently experienced?

- Acquiring a family member**
- Losing a family member
- Losing other dental insurance coverage

Are you acquiring family members because you got married?

- Yes
- No

Enter date you acquired family members

Month  Day  Year

← Enter QLE Date

This includes:

- Marriage
- Acquiring an eligible child
- Loss of other dental or vision coverage by an eligible family member

Date must be within the past 60 days or up to 31 days from now.

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## Cancelling your current FEDVIP enrollment



We're sorry, but the only time you can cancel your current FEDVIP enrollment is during open season, and then that's only cancelling for the next plan year.

The only time you can cancel your current FEDVIP enrollment is if:

- you or your spouse are deployed to active military duty
- you are an employee and transfer to an agency that offers its own dental and/or vision plan and pays 50% or more of the premiums and you enroll in that agency's plan

If you don't cancel your coverage when permitted, it automatically continues each year, as long as you remain eligible.

For additional questions regarding dental and vision insurance, visit [Education and Support](#).

Close

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## Get in touch

Please call us if you have any questions about FEDVIP enrollment or your account.

### Phone

**1-877-888-FEDS** (1-877-888-3337)

**TTY:** 1-877-889-5680

**International:** +1-571-730-5942

### Mail

BENEFEDS–FEDVIP

P.O. Box 797

Greenland, NH 03840-0797

### Send direct bill payments to:

BENEFEDS–FEDVIP

P.O. Box 414095

Boston, MA 02241-4095

### FEDVIP coverage and benefits

Contact your dental or vision carrier directly if you have questions about FEDVIP coverage, benefits, and services.

### FEDVIP plans

### FLTCIP and FSAFEDS coverage

Contact your program administrator directly if you have questions about your FLTCIP application, coverage, and claims, or your FSAFEDS accounts and claims.

[FLTCIP](#) | [FSAFEDS](#)