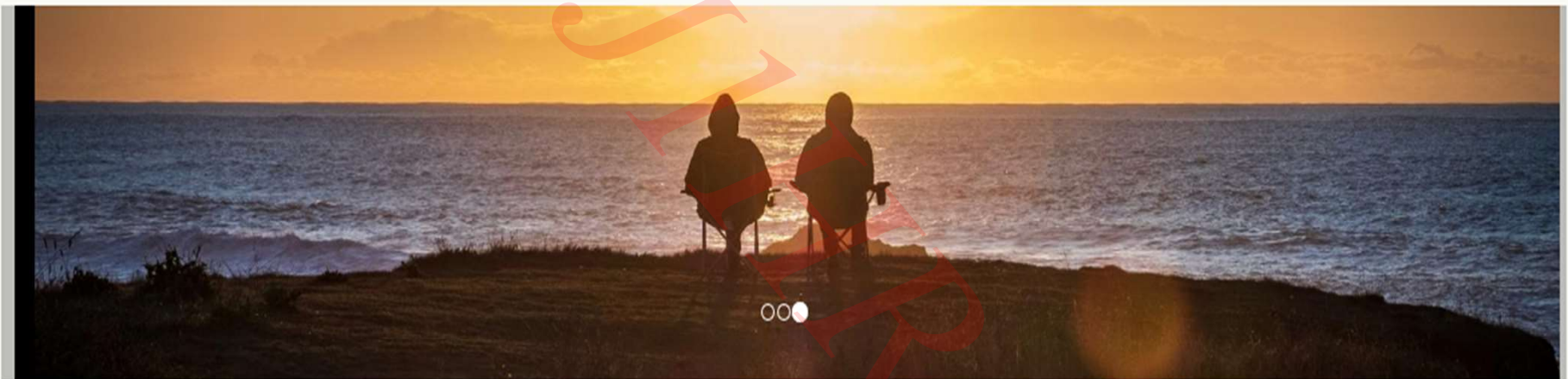


Guide To Making Benefit Elections

Via GRB Platform

Visit www.abc.army.mil/abc



Click On "GRB"



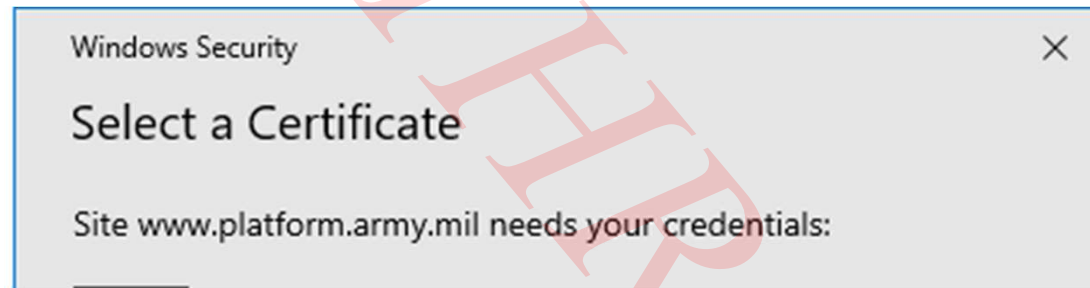
Resources

EBATS

GRB

ICE

Log On With CAC Card



GRB Platform

You have successfully signed into the GRB Platform.

Your current browser: Internet Explorer 11

Site best viewed with Chrome, Internet Explorer 11, or Edge

Security Notice

This system, including all related equipment, networks, and network devices (specifically including internet access), are provided only for authorized use only. This computer system may be monitored for all lawful purposes, including to ensure that its use is authorized, for management of the system, to facilitate protection against unauthorized access, and to verify security procedures, survivability and operational security. Monitoring includes active attacks by authorized entities to test or verify the security of this system.

Use of this computer system, authorized or unauthorized, constitutes consent to monitoring of this system. Unauthorized use may subject you to criminal prosecution. Evidence of unauthorized use collected during monitoring may be used for administrative, criminal or other adverse action. Use of this system constitutes consent to monitoring for these purposes.

By pressing "Launch", I acknowledge that I have read and accept the above notice.

To start using the GRB Platform for employee click the "Launch" button.

Click On "Launch"



Click On The Tabs To Edit Your Benefit Elections

The screenshot displays the GRB Platform interface for the Army Benefits Center - Civilian. The top navigation bar includes the GRB Platform logo, a document icon, a chat bubble, a folder, and an open book. On the right side of the navigation bar are a bell icon and a question mark icon. Below the navigation bar is a header section with the text "Army Benefits Center - Civilian" and four logos: the Department of the Army, the Department of Defense, the Defense Health Agency, and the DoD's logo. The main content area consists of a grid of eight benefit categories, each with an icon and a label: Health Insurance (a caduceus), Life Insurance (an umbrella over two people), Thrift Savings Plan (a bar chart with an upward arrow), Retirement (a sun over a person in a chair), Dental & Vision Insurance (hands holding an eye and a tooth), Long Term Care Insurance (a person with a cross on their forehead), Flexible Spending Accounts (a piggy bank), and Social Security (a building). A large orange arrow points to the Health Insurance tab.

How To Change Your FEHB Plan

Army Benefits Center - Civilian



Health Insurance

Life Insurance

Thrift Savings Plan

Retirement

Click On "Health Insurance"

Dental & Vision Insurance

Long Term Care Insurance

Flexible Spending Accounts

Social Security



Federal Employees' Health Benefits (FEHB) Program

The Federal Employees Health Benefits (FEHB) program is an employer-sponsored group health insurance program for Federal employees and their families. Employees can choose from Fee-for-Service (FFS) plans, Health Maintenance Organizations (HMO), Consumer-Driven Health Plans (CDHP), and High Deductible Health Plans (HDHP). Employees can enroll, make changes, or cancel coverage during the annual Federal Benefits Open Season or if the employee experiences a qualifying life event. Permanent employees and certain temporary employees are eligible for coverage unless their appointment is excluded from coverage by law or regulation. The Office of Personnel Management (OPM) has the overall responsibility for the administration of the FEHB Program. Premiums are based on the plan and option an employee chooses and are shared by the employee and the employing Agency. The employing Agency's share is set by law and cannot exceed 75% of the total premium. Part-time employees receive a prorated contribution and temporary employees are responsible for the full amount of the premium. Premiums are paid on a pre-tax basis (known as premium conversion) unless the employee waives this option.

Current FEHB Enrollment

Health Plan Type: FEHB
Plan Name: Blue Cross and Blue Shield Service Benefit Plan Basic Option
Plan Option: Basic Self Plus One
Enrollment Code: 113

Plan Details

Plan Brochure: 
Plan Website: <https://www.fepblue.org/>
Telephone: 202-942-1068

Premium per Pay Period

Employee Cost: \$189.17
Agency Cost: \$517.46
Premium Conversion: Participating (Pre-Tax)

[View FEHB Plans/Premiums](#) 

Click On "Submit a FEHB Transaction"
To Make a Change To Your Elections








Transactions

[Submit a FEHB Transaction +](#)

Entered	Effective	Type	Status
09/03/2020 06:20 PM	09/13/2020	Change from Self-Only t...	Processed
01/10/2020 08:02 AM	01/19/2020	New Enrollment	Processed

Resources

Type	Description
	Federal Employees Health Benefits (FEHB) Program
	Medicare
	Federal Employees Health Benefits (FEHB) Program
	Employees Returning From Active Military Duty Fast Facts
	Employees Called to Active Military Duty Fast Facts

Select From The Following

Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit:

- Cancel Enrollment
- Change from Self Plus One to Self Only
- Change from Self Plus One to Family
- Change Plan/Option
- Change Family Member

Canceling FEHB

Select The Applicable

Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit: 

Select the event that provides the opportunity for the transaction:

- Change in Family Status
- Change in Employment Status
- Change in Pay Status
- Change in Residence/Worksite
- Change in Coverage

*Canceling Due To The Gain Of
EARLY TRICARE?*


Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit:

Select the event that provides the opportunity for the transaction:

 *Select This Option*

Select the specific qualifying life event:

- Loss of Coverage Under FEHB Plan
- Loss of Coverage due to Termination of Membership
- Loss of Coverage Under Another Federal Program
- Loss of Coverage Under Medicaid
- Loss of Coverage Under Non-Federal Plan
- Loss of Coverage due to Change in Residence/Worksite
- Loss of Coverage due to Move and Spouse's Termination
- Gain Coverage Under Medicare
- Gain Coverage Under TRICARE for Life
- Gain Coverage Under TRICARE  *Select This Option*
- Gain Coverage due to Change in Residence/Worksite
- Gain Coverage due to Change Spouse/Dependent Employment Status
- Change in Spouse/Dependent Coverage Under Non-Federal Plan
- Eligible for Medicaid or CHIP

Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit:

Select the event that provides the opportunity for the transaction:

Select the specific qualifying life event:

Qualifying Life Event Description:

Enrolled employee or eligible family member gains coverage under TRICARE due to change in employment status, including: entry into active military service, retirement from reserve military service under Chapter 67, Title 10

Date of Qualifying Life Event:

Enter Date The Coverage Was Gained

*The Following Steps Require
Personal Information*

Please Contact HRO If You Need Assistance

Need To Cancel Coverage Due To The Gain Of TAMP

(Note: This is for employees that were on Title 10 Contingency Tours and elected for their FEHB deductions to be paid by the agency. Upon their Return To Duty, premiums will resume unless the employee wishes to cancel.)

Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit: 

Select the event that provides the opportunity for the transaction:   *Select This Option*

Select the specific qualifying life event:

- Change from Temp Appointment
- Change from/to Full Time or Part Time
- Return from Military Service  *Select This Option*

Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit:

Select the event that provides the opportunity for the transaction:

Select the specific qualifying life event:

Qualifying Life Event Description:

Employee restored to civilian position after serving in uniformed services

Date of Qualifying Life Event:

*Enter Your Return To Duty Date
(Day After Orders Ended)*

*The Following Steps Require
Personal Information*

Please Contact HRO If You Need Assistance

Select One Of The Following If You Wish To Cancel Due To “Change In Family Status”

Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit:

Select the event that provides the opportunity for the transaction:

Select the specific qualifying life event:

- Marriage
- Birth of a Child
- Adoption of a Child
- Acquiring a Foster Child
- Court Order Requiring Coverage for Child
- Divorce
- Annulment
- Death of Spouse or Dependent
- Last Child Loses Coverage

Submit a FEHB Transaction - Transaction Type

Select the type of transaction you would like to submit:

Select the event that provides the opportunity for the transaction:

Select the specific qualifying life event:

Qualifying Life Event Description:

Change in family status that results in increase or decrease of eligible family members

Date of Qualifying Life Event:

Enter Date Of Event

*Ex. Date Of Child Birth,
Date Of Marriage, Date Of
Divorce, etc*

Use The Same Steps To Make Changes To Your FEHB To The Options That Apply To You

*(Note: The above slides are for demonstration purposes and can be used
as guidance on how to navigate on the GRB Platform)*

Qualifying Life Event Time Frame

You have 31 days prior to and 60 days after your qualifying life event (Marriage, Child Birth, Change in Pay Status, etc) to make any changes to your benefits. Elections can only be made once during that time frame unless you have another Qualifying Life Event.

Elections Made To FEDVIP Can Be Done Via BENEFEDS

Federal Dental and Vision Insurance Program (FEDVIP) ✕

The Federal Employees Dental and Vision Insurance Program (FEDVIP) allows Federal employees to purchase dental and vision insurance on a group basis with no pre-existing condition limitations. Employees can choose between several dental and vision plans. They can enroll in either a dental or vision plan, or both. The plan can cover just the employee or can include eligible family members. Enrollment must be made through the BENEFEDS website during the annual Federal Benefits Open Season. Once enrolled in FEDVIP, opportunities to make changes to or cancel coverage are limited and generally must be done during the annual Federal Benefits Open Season, unless the employee experiences a qualifying life event. Employees are eligible to enroll in FEDVIP if they are also eligible to enroll in the Federal Employee Health Benefit (FEHB) program. It does not matter if they are actually enrolled in FEHB; eligibility is the key. The Office of Personnel Management (OPM) administers the program along with Long Term Care Partners, LLC, a third party contractor. Premiums are based on the plan and option an employee chooses, and they are paid entirely by the employee with pre-tax dollars.

Transactions

The enrollment and administration of the FEDVIP is done by BENEFEDS. Find out more by calling 1-877-888-3337 or visit www.benefeds.com

Resources

Type	Description
<input checked="" type="checkbox"/>	Federal Employees' Dental and Vision Insurance Program (FEDVIP)
<input type="checkbox"/>	Federal Employees Dental Insurance Program
<input type="checkbox"/>	Federal Employees Vision Insurance Program
<input type="checkbox"/>	BENEFEDS Fast Facts
<input type="checkbox"/>	Insurance Benefits For New Employees Fast Facts

Elections To FLTCIP

Federal Long Term Care Insurance Program (FLTCIP) ✕

The Federal Long Term Care Insurance Program (FLTCIP) is an employer-sponsored group long term care insurance program for Federal employees. Long term care insurance is designed to help pay for the costs of care when help is needed with activities performed every day, including care due to severe cognitive impairment such as Alzheimer's disease. Benefits are paid upon certification from a licensed health care practitioner and approval from the insurer. All applicants, other than newly hired employees, are subject to full underwriting procedures. Employees and qualified relatives may apply for long term care insurance at any time. Employees must be eligible for the FEHB Program in order to apply for coverage under the FLTCIP. It does not matter if they are actually enrolled in FEHB; eligibility is the key. The Office of Personnel Management (OPM) is the sponsor for the program, and Long Term Care Partners, LLC administers the FLTCIP on behalf of the insurer, John Hancock. Plan costs are based on an individual's age when the policy is purchased and the benefit options elected. The employee is responsible for the entire premium which can be paid through payroll deduction, debiting checking/savings account, or direct payment to the insurance company.

Transactions

The enrollment and administration of the FLTCIP is done by the Long Term Care Partners, LLC. Find out more by calling 1-800-582-3337 or visit www.ltcfeds.com

Resources

Type	Description
<input checked="" type="checkbox"/>	Federal Long Term Care Insurance Program (FLTCIP)
<input type="checkbox"/>	Long Term Care Insurance
<input type="checkbox"/>	Employees Returning From Active Military Duty Fast Facts
<input type="checkbox"/>	Employees Called to Active Military Duty Fast Facts
<input type="checkbox"/>	Fast Facts for FLTCIP

Elections To FSA

Flexible Spending Accounts (FSA) ✕

The Federal Flexible Benefits Plan ("FedFlex") enables employees to pay for eligible out-of-pocket health and dependent care expenses with pre-tax dollars. Eligible employees can enroll in a Flexible Spending Account (FSA) through the FSAFEDS website during the annual Federal Benefits Open Season or outside the open season if they experience a qualifying life event. A FSA is funded through payroll allotments and employees can draw upon their FSA for reimbursement as eligible expenses are incurred. FSA elections are completely voluntary, and employees must enroll each year to continue participating. The FSA benefit period runs from January 1 of the current year through December 31 of the same calendar year. Allotments not claimed at the end of the benefit period are forfeited. Employees are eligible to enroll if they are eligible for the Federal Employee Health Benefit (FEHB) program. It does not matter if they are enrolled in FEHB; eligibility is the key. The Office of Personnel Management (OPM) is responsible for the program, and Long Term Care Partners, LLC. is the third-party administrator. The employing agency covers the administrative fees on behalf of any enrolled employee. The three FSAs offered to eligible employees are:

Health Care FSA (HCFSA) - Allotments may be used to pay for certain health care expenses that are not reimbursed by FEHB or any other source and not claimed on the participant's income tax return. The maximum amount an employee may set aside in any tax year is \$2,750 and the minimum is \$100.

Dependent Care FSA (DCFSA) - Allotments may be used to pay for eligible dependent care expenses. The maximum amount an employee may set aside in any tax year is \$5,000 (\$2,500 if the employee is married and filing a separate income tax return) and the minimum amount is \$100.

Limited Expense Health Care FSA (LEXHCFSA) - Allotments may be used to pay for eligible dental and vision expenses and is only for employees enrolled in high deductible health plans with health savings accounts. The maximum amount an employee may set aside in any tax year is \$2,750 and the minimum is \$100.

Transactions

The enrollment and administration of FSAs are done through FSAFEDS. Find out more by calling 1-877-372-3337 or visit www.fsafeds.com

Resources

Type	Description
<input checked="" type="checkbox"/>	Flexible Spending Accounts
<input type="checkbox"/>	Flexible Spending Accounts
<input type="checkbox"/>	Employees Returning From Active Military Duty Fast Facts
<input type="checkbox"/>	Employees Called to Active Military Duty Fast Facts
<input type="checkbox"/>	FSAFEDS Overview