

**Office of  
Human hr.nih.gov  
Resources**

# Federal Benefits New Employee Orientation

Revised August 2023



# Topics for Discussion

- Leave Bank Program
- Federal Benefits
  - Federal Employees' Group Life Insurance (FEGLI)
  - Health Insurance (FEHB)
  - Dental & Vision Insurance (FEDVIP)
  - Flexible Spending Accounts (FSA)
- Retirement Benefits
  - Military Deposits
  - Civilian Deposits/Redeposits
  - Thrift Savings Plan (TSP)
- Designation of Beneficiaries
- Benefits Resources
- Benefits Contacts



# NIH Leave Bank Program

Presented by: Leave Bank Office



# Leave Bank Overview

## Why Should I Join?

- Acts as insurance policy for your paycheck!
- Covers personal and family medical emergencies
- Your membership contribution helps others!

*“If I had not been a member of the Leave Bank, the likely consequences would have been shattering. Certainly, I would have incurred serious debt, or I might have even lost my home. It’s too horrible to even imagine what might have happened but for the Leave Bank.”*

## Membership Details

- Annual membership contribution requirement that is equal to your annual leave accrual category (4,6,8 hours)
- Join within 60 days of employment, contribution waived if you enroll within first 2 weeks
- Enroll in the Integrated Time and Attendance System (ITAS) or with Paper Form
- Membership automatically rolls over each year

## Recipient Details

- Recipients must exhaust annual and sick leave
- Recipients can receive up to 480 hours for personal or family medical emergencies and up to 720 hours total on an annual basis
- Application are available on website or contact Leave Bank Office
- Medical documentation may be required. Kept confidential

**Join to protect yourself & your income in the event of a medical emergency**



# Who Do I Contact?



Nathaniel Jackson  
301-827-3183  
Nathaniel.Jackson@nih.gov

Lisa Parkins  
301-451-1956  
ParkinsL@od.nih.gov

Alexandra Ratie  
301-402-4181  
Alexandra.ratie@nih.gov

- NIDDK
- NICHD
- NINDS
- NIMH
- NHGRI
- NCATS
- FIC
- NIEHS
- NIDA
- NHLBI
- NIGMS
- NIDCR
- NIBIB
- NCCIH
- ARPA-H
- CC
- NINR
- NIAMS
- ORF
- ORS
- NIDCD
- NEI
- CIT
- NIAAA
- CSR
- NIA
- .nlm
- NIMHD
- NCI
- NIAID
- OD



[LeaveBank@od.nih.gov](mailto:LeaveBank@od.nih.gov)

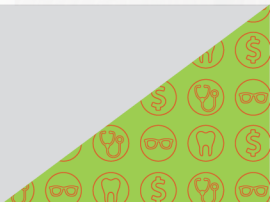


301-443-8393



[hr.nih.gov/leavebank](https://hr.nih.gov/leavebank)

The Leave, Payroll, and Workforce Support Branch within NIH's Office of Human Resources interprets, develops, and advises on policies related to leave and workplace flexibilities.



# Federal Benefits Programs

Presented by: Retirement & Employee Benefits Branch (REBB)



# What are the Federal Benefits?



Life Insurance



Flexible Spending  
Accounts



Health Insurance



Retirement Benefits



Dental and Vision  
Insurance



Thrift Savings Plan  
(TSP)

# Life Insurance

## Federal Employees Group Life Insurance (FEGLI)

[Life Insurance | Office of Human Resources \(nih.gov\)](#)

### What is FEGLI?

- The Federal Employees' Group Life Insurance Program is a group term life insurance program for Federal employees and retirees.

### FEGLI Cost

- Government pays 1/3 of Basic premium.
- Employee is responsible for 2/3 of Basic premium and all optional coverage.

### Types of Enrollment

- Basic
- Option A
- Option B
- Option C

# FEGLI Eligibility

## Employees

### Employees

Federal employees who are not excluded by law or regulation.

## Family Members

### Family Members

Spouse

Unmarried dependent children under age 22 (a child over age 22 is eligible if he/she is considered incapable of self-support.)



# FEGLI Enrollment

## BASIC

Basic coverage is automatic and does not require an election.

## OPTIONAL

New Hires who wish to have optional life insurance must submit election form (SF-2817) in [USA Jobs Onboarding Manager](#).

## Effective Date

Basic – effective on the hire date  
Optional - effective on the date the election is received, and the you are in a pay and duty status.

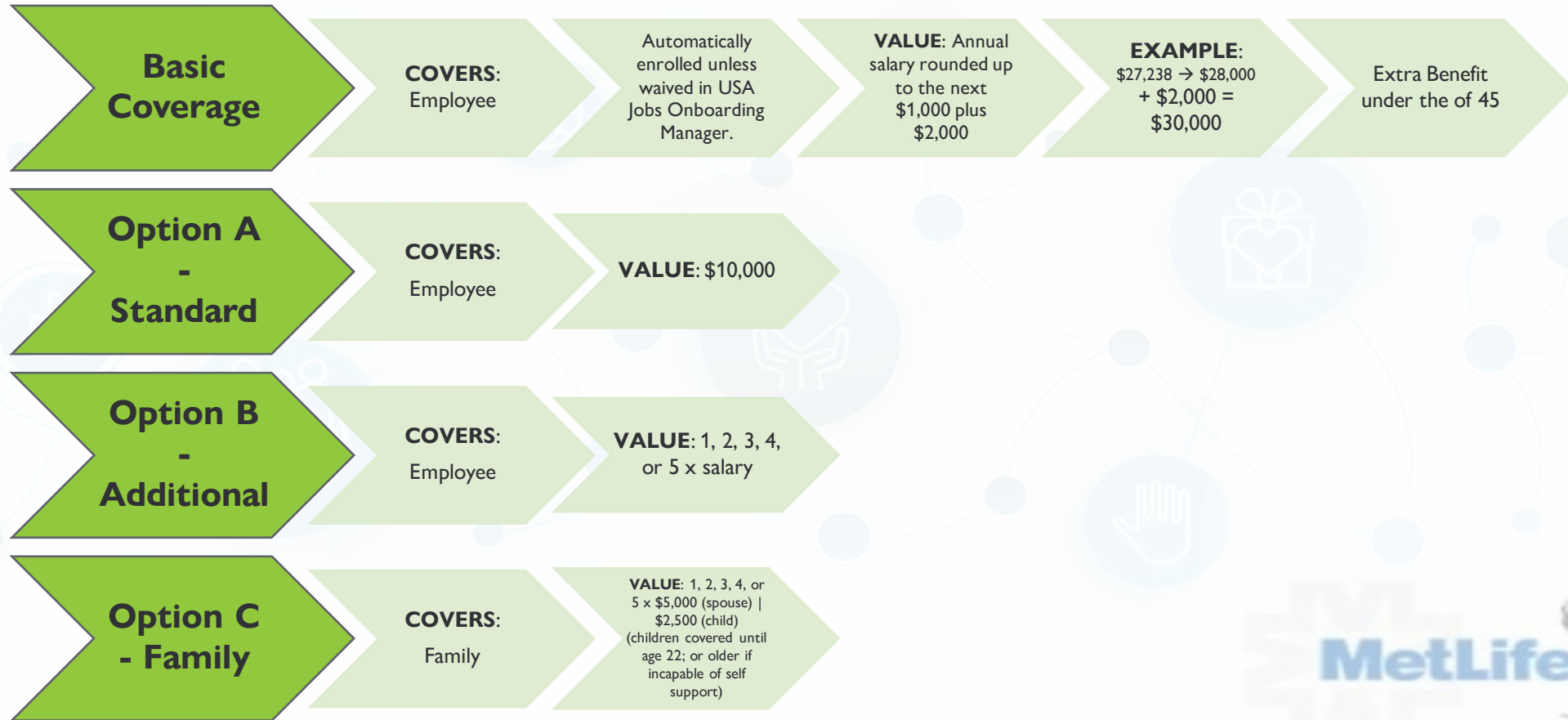
## Election Window

Optional - coverage must be elected within 60 days of the hire date.  
Must experience a [qualifying life event \(QLE\)](#) if election window is missed.

**DISCLAIMER:** If you choose to waive FEGLI coverage and one year has passed, you can get a physical exam (at your expense) and request insurance coverage.

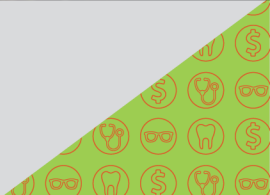
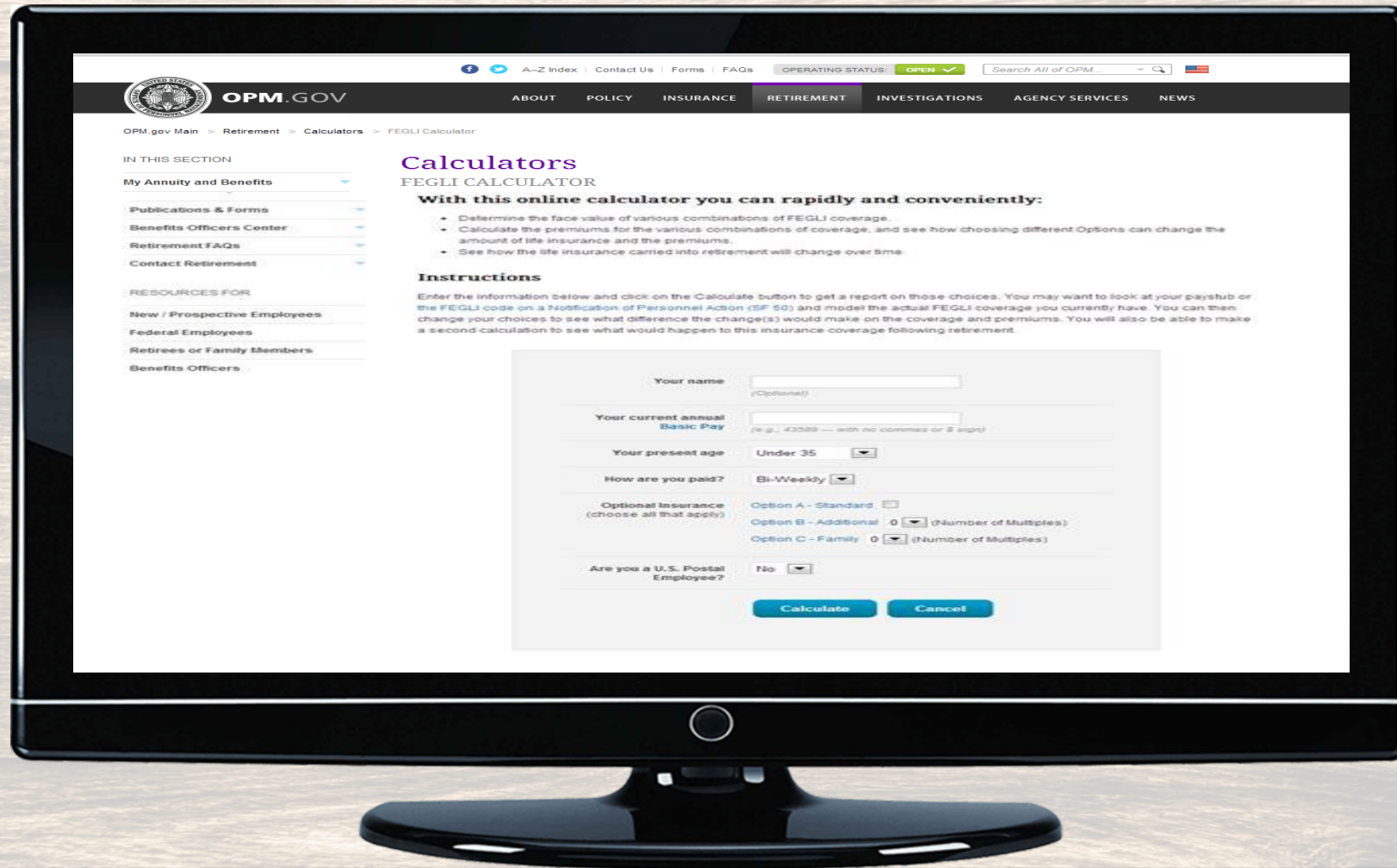
# MetLife®

# FEGLI Coverage Options



# FEGLI Calculator

<https://www.opm.gov/retirement-center/calculators/fegli-calculator/>





# HEALTH INSURANCE

## Federal Employees Health Benefits (FEHB)

Health Insurance | Office of Human Resources (nih.gov)

### What is FEHB?

- FEHB is a program that offers a wide variety of health insurance plans to support the health care needs of employees and eligible family members.

- No physical exams required.

### FEHB Cost

- On average, the government pays approximately 72% of the FEHB premium and the employee is responsible for the remainder.

- Automatically enrolled in tax savings benefit, premium conversion.

### Types of Enrollment

- Self Only
- Self Plus One
- Self and Family

# FEHB Eligibility

## Employees

Full-time and part-time employees in a benefits eligible position.

Temporary Appointment expected to work 130 hours per month or more for at least 90 days

Seasonal schedule expected to work less than six months per year and expected to work 130 hours per month or more for at least 90 days

Intermittent schedule expected to work 130 hours per month or more for at least 90 days

## Family Members

Spouse (including legally married same sex spouses)

Dependent children under age 26 (including step-children and foster children)

Children incapable of self-support

Supporting documentation is required to determine family member eligibility.

Types of documentation can be found in [BAL 21-202 attachment 2](#).

# FEHB Enrollment Process

Make FEHB election in Onboarding Manager | Sign and submit questionnaire.

The Benefits Office will process the form to be effective the beginning of the pay period following receipt of the election.

Review Leave and Earnings Statement (LES) to verify elections are correct.

Contact the Benefits Office to verify election submission.

Receive insurance cards 7-14 business days after carrier receives and processes election.

# FEHB Enrollment

## New Hires

New Hires must submit election form (SF-2809) and required dependent verification in [USA Jobs Onboarding Manager](#).

## Election Window

Coverage must be elected within 60 days of the hire date.

Must wait until Open Season or experience a [qualifying life event \(QLE\)](#) if election window is missed.

## Effective Date

Coverage is effective the pay period after your enrollment form (SF-2809) is submitted.

## Insurance Cards

7-14 business days after election is processed





# Types of Health Plans

## Fee-for-Service (FFS)

- These plans allow employees to choose their own healthcare provider and facility.

## Health Maintenance Organization (HMO)

- Enrollment in these plans is determined by where the employee lives.
- Care outside of the plan network is generally not covered. Limited exceptions apply.

## Consumer-Drive Health Plans (CDHP)

- Allows employees more freedom in spending health care dollars up to a designated amount for in-network preventative care.

## High Deductible Health Plan (HDHP)

- Have higher deductibles and out-of-pocket limits.
- Partially fund Health Savings Accounts (HSAs)



# Need help choosing a FEHB Plan?

Attend the **Virtual Multi-Carrier Webinar (Health and Dental Information Sessions)** and/or the **Blue Cross Blue Shield Events** to learn about each plan and get your specific questions answered.

Navigate to the health insurance section of the **[NIH New Employees Benefit Enrollment](#)** page.

- URL: <https://hr.nih.gov/working-nih/onboarding/new-employee-benefits-enrollment>

## Benefits Elections

You have 60 days from your start date to complete benefits elections for all programs listed below.

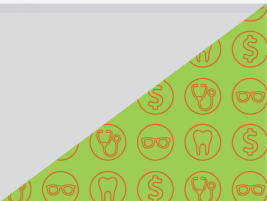
## Health Insurance

Submit election form (SF-2809) through [USA Staffing Onboarding for New Hires](#) and include [family member eligibility document\(s\)](#), if applicable. Note: Coverage is not retroactive, and it cannot be made effective the day you enter on duty. It's effective the pay period after your enrollment form is submitted.

- [Kaiser Permanente New Employee Information Sessions](#)
- [Blue Cross CareFirst New Employee Presentation](#)
- [Health and Dental Information Sessions](#)
- [Plan Types](#)
- [Plan Information](#)
- [Compare Plans](#) - A tool that allows you to compare up to 3 plans side-by-side.
- [Health Plan Comparison Tool Video](#)
- [Checkbook](#)

# FEHB Comparison Tool

<http://www.opm.gov/fehbcompare>



## Guide to Health Plans

Welcome Department of Health and Human Services employee. To access CHECKBOOK's Guide to Health Plans from work or home, you will need a personal UserName and Password. Please complete the short form below, and you will be taken to CHECKBOOK's Guide to Health Plans. You will also be emailed a valid UserName and Password that should be used for future access to CHECKBOOK's Guide at [www.guidetohealthplans.org](http://www.guidetohealthplans.org).



Employee Name:

Office/Location:

Your Email Address:

When you click the "Submit" button below, your UserName and Password will be e-mailed to you shortly.



<https://www.checkbook.org/newhig2/agency/nih>



# Dental and Vision Insurance

## Federal Employees Dental and Vision Insurance Program (FEDVIP)

[Dental and Vision | Office of Human Resources \(nih.gov\)](#)

### What is FEDVIP?

- FEDVIP is supplemental dental and vision insurance available to federal employees as a pre-tax benefit (premium conversion).
- Also available to retirees.

### Who Administers FEDVIP?

- Administered by BENEFEDS.

### Types of Enrollment

- Self-Only
- Self Plus One
- Self and Family

# FEDVIP Eligibility and Enrollment

## Who is Eligible?

### Employees

Employees who are eligible for the Federal Employees Health Benefits Program (FEHB).

\*Enrollment in FEHB is not required.

### Family Members

Including dependent children until their 22<sup>nd</sup> birthday and children incapable of self-support.

### Annuitants

Retirees (Annuitants) are eligible for FEDVIP.

## Enrollment

Enroll online at [WWW.BENEFEDS.COM](http://WWW.BENEFEDS.COM) or by calling BENEFEDS at 877-888-3337.

Insurance cards are received 7-14 business days after election is processed.

Must enroll during first 60-days of becoming eligible.

May enroll during Open Season or upon experiencing a qualifying life event (QLE).

Enrollment automatically continues each year.

Coverage is effective the pay period after your enrollment form is submitted.

# FEDVIP Enrollment Process

 Programs Enroll in FEDVIP Shop FEDVIP Plans Learn

Q Log In

Welcome to the new  
BENEFEDS!

BENEFEDS is the benefits marketplace through which eligible members of the federal civilian workforce and uniformed services shop for, enroll in, and pay for voluntary benefits, including dental and vision plans under the Federal Employees Dental and Vision Insurance Program (FEDVIP).

Enroll in FEDVIP

Modify Your Plan



Create an account at  
[WWW.BENEFEDS.COM](http://WWW.BENEFEDS.COM).

**BENEFEDS will process the election to become effective the beginning of the pay period following receipt of the election.**

**Review Leave and Earnings Statement (LES) to verify elections are correct.**

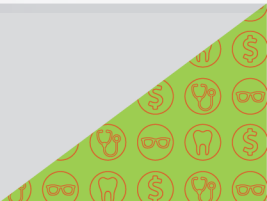
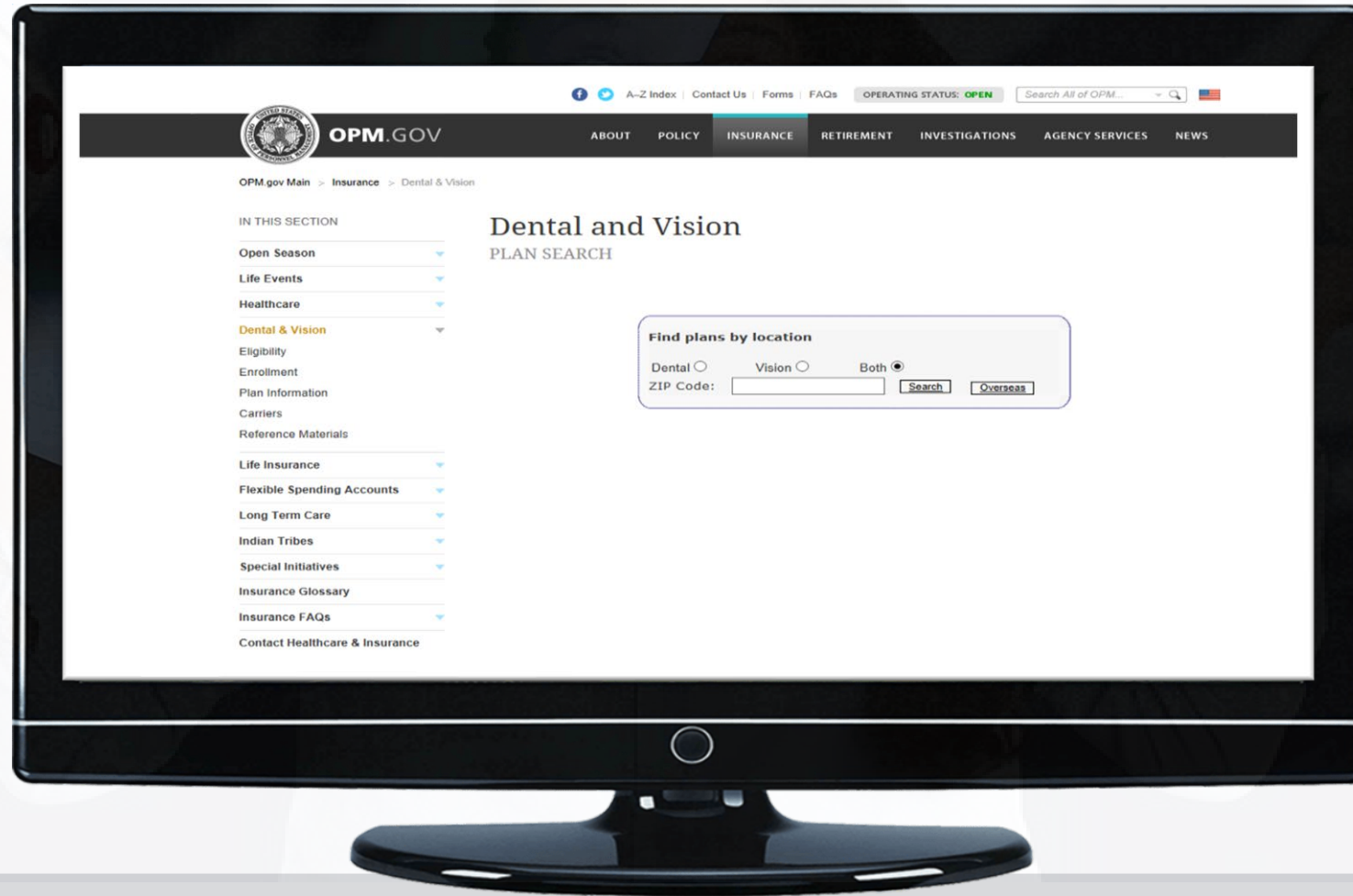
**Make dental and/or vision election in your newly established BENEFEDS account.**

**Receive insurance cards 7-14 business days after election is processed.**

For election verification and questions, contact BENEFEDS at 1-877-888-3337.

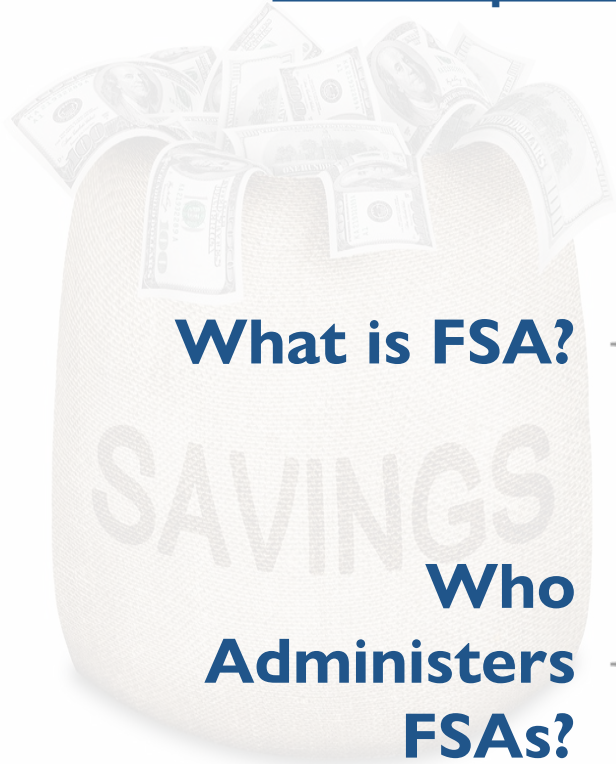
# FEDVIP Comparison Tool

<http://www.opm.gov/fedvipcompare>



# Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSAs) | Office of Human Resources (nih.gov)



**What is FSA?**

- FSA is a pre-taxed savings program that allows employees to pay for eligible out of pocket health care and dependent care expenses not covered by FEHB with pre-tax dollars.

**Who  
Administers  
FSAs?**

- Administered by FSAFEDS.

# Types of Flexible Spending Accounts (FSA)

## Health Care FSA

- **Coverage:** Covers eligible out of pocket health care expenses.
- **Employee Contribution:** Contribution limits change each year and can be found on the [OHR FSA website](#).
- **Carry Over:** Carry over funds (limited) from one plan year to the next only if you re-enroll for the next year.
- No grace period.

## Limited Expense Health Care FSA

- **Coverage:** Covers eligible out of pocket Dental and Vision expenses. **Only for employees enrolled in High-Deductible Health Plan with a Health Savings Account (HSA).**
- **Employee Contribution:** Contribution limits change each year and can be found on the [OHR FSA website](#).
- **Carry Over:** Carry over up to a designated amount from one plan year to the next only if you re-enroll for the next year.
- No grace period.

## Dependent Care FSA

- **Coverage:** Covers eligible childcare expenses before age 13 and eligible adult dependent care expenses-Must meet IRS dependent definition.
- **Employee Contribution:** Contribution limits change each year and can be found on the [OHR FSA website](#).
- **Carry Over:** NONE.
- Grace period through March 15.

Refer to the [FSA Overview Brochure](#) for yearly contribution and rollover limits.





# FSA Eligibility and Enrollment

## Who is Eligible?



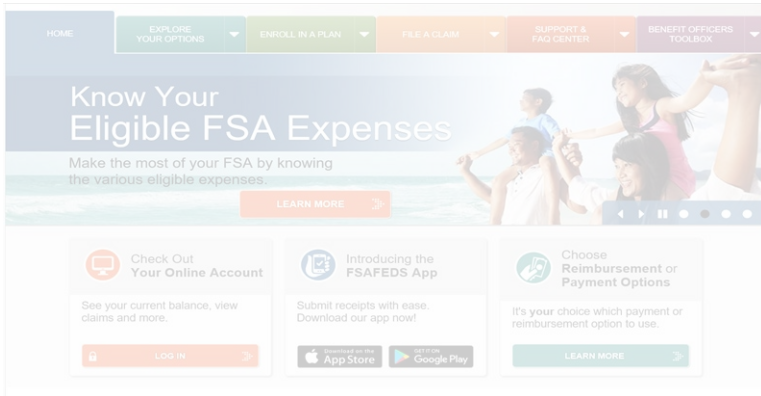
Employees who are eligible for health insurance (FEHB) may enroll in an FSA.

## Enrollment

- Enroll online at [WWW.FSAFEDS.COM](http://WWW.FSAFEDS.COM).
- Must enroll during first 60-days of becoming eligible.
- May enroll upon experiencing a qualifying life event (QLE).
- Employees must reenroll each Open Season.
- If eligibility conveys after September 30, must wait for Open Season.



# FSA Enrollment Process



Create an account at [WWW.FSAFEDS.COM](http://WWW.FSAFEDS.COM).

FSAFEDS will process the election to become effective the beginning of the pay period following receipt of the election.

Make FSA contribution election in your newly established FSAFEDS account.

Review Leave and Earnings Statement (LES) to verify elections are correct.

For election verification and questions, contact FSAFEDS at 1-877-372-3337.



# RETIREMENT BENEFITS



Federal Employee Retirement System (FERS)

Civil Service Retirement System (CSRS)

Military, Deposit and Redeposit Service

Thrift Savings Plan (TSP)

# Federal Retirement Systems

## Federal Employee Retirement System (FERS)

Provides benefits from three different sources.

\*Discussed on a later slide.

Basic Benefit requires you to pay your contribution each pay period through payroll deductions.

Required contribution varies depending on whether you are covered by FERS, FERS-RAE, or FERS-FRAE.

\*Further clarification on a later slide.

## Civil Service Retirement System (CSRS)

Defined benefit based on contributions to the system.

Required contribution to be paid each pay period through payroll deduction.

Cost is 7 – 8 percent of salary to the retirement system.

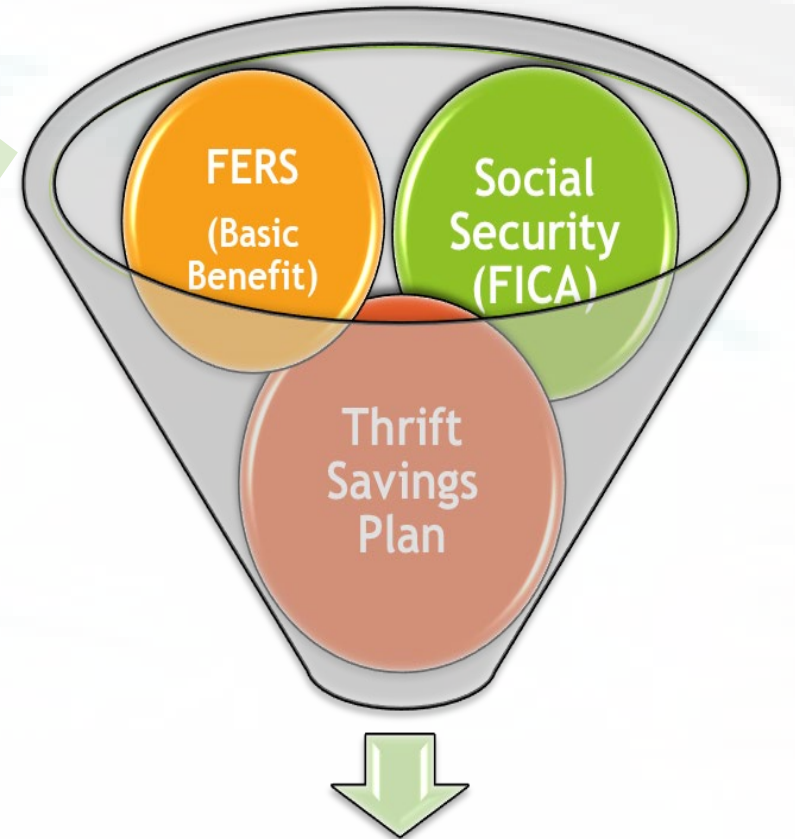
**Eligible employees automatically contribute to CSRS or FERS and cannot opt out. *No action is required.***

# Components of FERS

- **FERS- Basic Benefits**  
Retirement, Disability, Survivor Benefits
  - **Required Employee Contribution**
    - **.8% FERS**
    - **3.1% FERS-RAE**
      - \*EOD after 1/1/2013
    - **4.4% FERS-FRAE**
      - \*EOD after 1/1/2014

- **Social Security**  
Retirement, Disability, Survivor Benefits
  - **Employee Contribution: 6.2%**

- **Thrift Savings Plan**
  - **Employee Contribution:** any amount designated by the employee up to the yearly IRS limit.



**Federal Employee Retirement System**

# Military Service Deposit

<https://hr.nih.gov/benefits/retirement/military-service>

## FERS Retirement System

Military service performed after January 1, 1957 is creditable for retirement, only if a military deposit is paid.

The deposit amount is 3% of the basic military pay received, plus applicable interest.

Two years after your hire date, interest is accrued and will compound annually. Contact your Retirement Specialist to start the process.

## CSRS Retirement System

If first employed before October 1, 1982, military service is automatically creditable, unless eligible for Social Security at 60 or retirement, whichever is later. If first employed after October 1, 1982, military service is creditable for retirement only if deposit is paid.

The deposit amount is 7% of the basic military pay received, plus applicable interest.

Two years after your hire date, interest is accrued and will compound annually. Contact your Retirement Specialist to start the process.

Eligible employees **must take action** to begin the military buyback process.

# Deposit | Redeposit Service

<https://hr.nih.gov/benefits/retirement/service-credit>

## Deposit Service

A deposit service payment can be made for a period of employment when retirement deductions were not withheld from your salary, before January 1, 1989.

The deposit is, generally, 1.3% of salary plus interest.

You are not required to make this type of payment. However, not making the payment will make this service non creditable for retirement computation purposes.

## Redeposit Service

A redeposit is the repayment of retirement deductions that were previously withheld and refunded to you, plus interest

If you received a refund of FERS deductions, you may redeposit any FERS deductions previously refunded.

You are not required to make this type of payment. However, not making the payment will make this service non creditable for retirement computation purposes.



Eligible employees **must take action** to begin the civilian deposit/redeposit process.

# Thrift Savings Plan (TSP)

[www.tsp.gov](http://www.tsp.gov)

## What is TSP?

- Long-term retirement savings and investment plan like a 401(K).
- Employees can contribute up to the IRS deferral limit set forth each year.
- Traditional and Roth contributions available for regular contributions.

## How to Enroll

- Eligible employees are *automatically enrolled to contribute 5%* of their salary every pay period.

## How to Change Contribution Amount

- Complete TSP-1 in USA Jobs Onboarding Manager. Thereafter make TSP election in MyPay.

Eligible employees **must take action** to increase the automatic contribution enrollment.

# TSP Contributions

<https://www.tsp.gov/making-contributions/traditional-and-roth-contributions/>

## Regular Contributions

### Traditional and Roth

**Traditional:** Pre-tax (taxes go into TSP before tax withholdings).

**Roth:** Post-tax (taxes go into TSP after tax withholdings).

**BENEFITS:** Loans, in-service withdrawals and rollover (TSP-60 | TSP-60R)

**MATCHING:** Agency automatic 1% and agency matching up to 4%.  
\*Matching goes into the traditional account.

## Catch-Up Contributions

**ELIGIBILITY:** Must be 50+ years old or turning 50 within the calendar year.

Must be on track to meet maximum contribution for designated year under regular TSP.

**MATCHING:** Same as regular contribution matching (up to 5%).

*\*The Automatic 1% will be “vested” after 3 years of Federal civilian service.*



# TSP Contributions & Matching Breakdown

<https://www.tsp.gov/making-contributions/contribution-types/>

Employee Contribution	Agency Automatic Contribution (1%)	Agency Matching Contribution	Total Contribution
0%	1%	0%	1%
1%	1%	1%	3%
2%	1%	2%	5%
3%	1%	3%	7%
4%	1%	3.5%	8.5%
5%	1%	4%	10%
> 5%	1%	4%	Your contribution + 5%





# Thrift Savings Plan (TSP) Funds

## Individual Funds

<https://www.tsp.gov/investment-options/>

We offer 5 individual funds that you can customize based on your comfort level.

### C FUND

Common Stock Index Investment Fund

**What It Is:** Stocks of large U.S. companies

**Pros:** Potential for high investment returns over the long term

**Risks:** Can be volatile depending on stock market performance

**Benchmark Index:** Standard & Poor's 500 Stock Index

### S FUND

Small Capitalization Stock Index Investment Fund

**What It Is:** Stocks of small to medium-sized U.S. companies

**Pros:** Potential for high investment returns over the long term

**Risks:** Can be volatile depending on stock market performance

**Benchmark Index:** Dow Jones U.S. Completion TSM Index

### I FUND

International Stock Index Investment Fund

**What It Is:** International stocks from more than 20 developed countries

**Pros:** Potential for high investment returns over the long term

**Risks:** Can be volatile depending on stock market performance

**Benchmark Index:** MSCI EAFE Stock Index

### F FUND

Fixed Income Index Investment Fund

**What It Is:** Government, corporate, and asset-backed bonds

**Pros:** May earn returns that are higher than money market funds over the long term with relatively low risk

**Risks:** Bond prices fall when interest rates rise. Bonds may be repaid early, reducing your returns.

**Benchmark Index:** Bloomberg U.S. Aggregate Bond Index

### G FUND

Government Securities Investment Fund

**What It Is:** Government securities that are specially issued to the TSP

**Pros:** Does not lose money; has a consistent but relatively low investment return

**Risks:** Your money may not grow enough to meet your retirement needs or outpace inflation.

# Thrift Savings Plan (TSP) Funds

## Lifecycle Funds

<https://www.tsp.gov/investment-options/>

What is an L Fund?

- Mix of individual funds based on your projected retirement age.
- Initial contributions are placed into the L Fund.

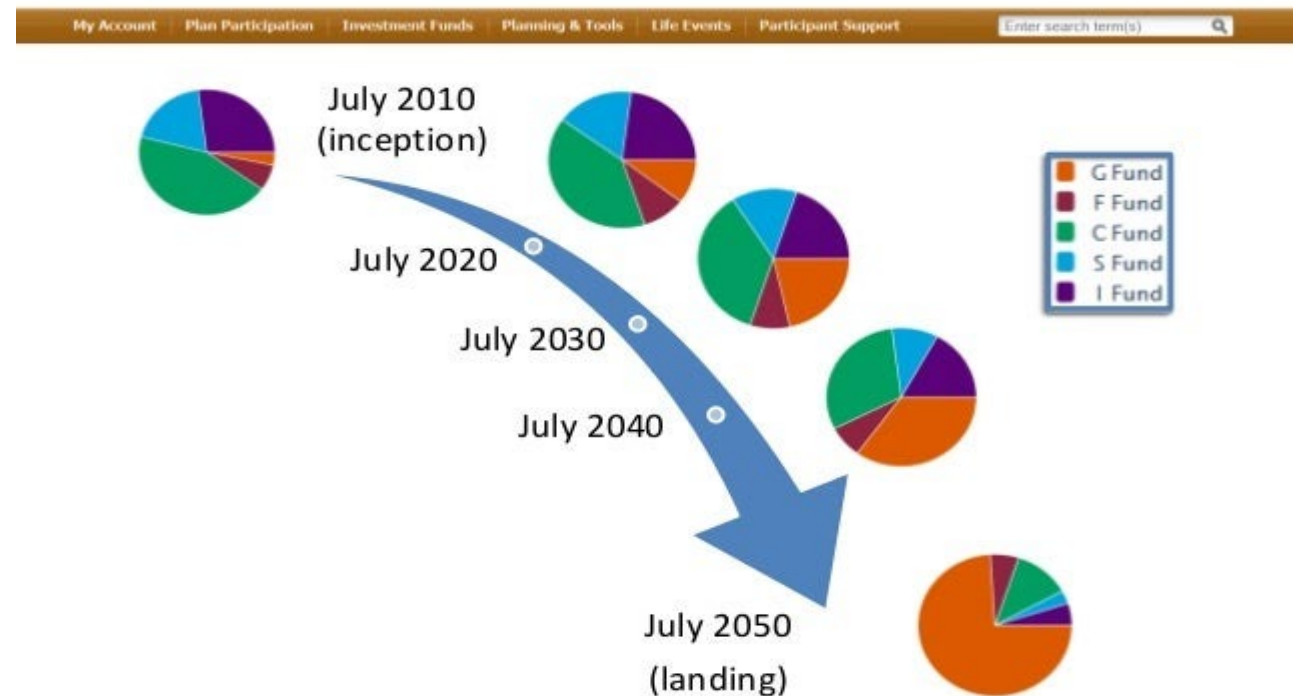
How can I make changes?

- Re-allocate funds in your account at [www.tsp.gov](http://www.tsp.gov).
- Change payroll contribution amounts through MyPay



## Reallocation in the L Funds

The L2050 Fund Glide Path



# Designation of Beneficiaries



# Designation of Beneficiary Forms

**SF-1152**

- Unpaid Compensation

**SF-2823**

- Federal Employees' Group Life Insurance

**SF-3102**

- FERS/CSRS Retirement

**\*If covered by CSRS, form should be submitted directly to OPM.**

**TSP-3**

- Thrift Savings Plan

**\*Log into your TSP account on the TSP website.**

## How to access forms

- [USA Jobs Onboarding Manager](#), [OPM.gov](#), [OHR's Benefits Website](#)

## Form Submission

- *Error free forms.* Submit copy with original signature to the Benefit Office at:

[AskBenefits@nih.gov](mailto:AskBenefits@nih.gov)

*\*with exception of TSP-3*



## When to make changes

- Changes can be made at anytime.
- Changes should be considered when there is a family status change.

# Designation of Beneficiaries: Order of Precedence







# Benefits Resources

## Benefits Newsletter

Subject Line: **NIH Benefits Information – Did You Know?**

What's New?

Topics of Interest

Where Do I Go If I have Questions About My Benefits

More  
Information



## Benefits Website for New Hires

- Refer to the Benefits Website for helpful links and information about retirement and federal benefits.

## Government Retirement and Benefits (GRB) Platform – Employee View

- The GRB Platform provides information about retirement and benefits. It offers a self-service tool that allows you to view a personalized statement of your benefits and it has a retirement calculator that you may use to perform “what-if” scenarios. It also provides access to a comprehensive reference library and informational seminars on topics related to benefits, retirement, and financial planning.



# Benefits Contacts

**I still have questions.**



# First 60 Days of Employment

OHR webpage: [www.hr.nih.gov/working-nih/onboarding/new-employee-benefits-enrollment](http://www.hr.nih.gov/working-nih/onboarding/new-employee-benefits-enrollment)



301-496-2404



[AskBenefits@NIH.gov](mailto:AskBenefits@NIH.gov)



<https://hr.nih.gov/working-nih/onboarding/new-employee-benefits-enrollment>

**Disclaimer:** When emailing, you are encouraged to send items containing PII from your NIH email address using encryption.

# After First 60 Days

OHR Webpage: <https://hr.nih.gov/about/hr-contacts?ic=All>

[Home](#) / [About](#)

## HR Contacts

- About
- Events
- HR Contacts**
- Mission and Vision
- News
- Organizational Chart
- Frequently Asked Questions
- Contact Us

### Find your contacts

Select your Institute or Center from the list below. Contacts that apply to all ICs and general information are listed separately.

Institute or Center

OHR

#### Office of Human Resources

Department	Title	Contact	Phone
Benefits and Retirement		<a href="#">Wanda Williams</a>	(301) 402-8777
Leave Bank	Case Manager	<a href="#">Alexandra Ratie</a>	(301) 402-4181
Recruitment, Staffing, and Classification	Branch Chief	<a href="#">Edward Langford</a>	(301) 402-4723
Recruitment, Staffing, and Classification	HR Specialist	<a href="#">Chantill Morris</a>	(301) 594-9039
Recruitment, Staffing, and Classification	HR Specialist	<a href="#">Chelsea Day</a>	(301) 594-3929
Recruitment, Staffing, and Classification	Team Lead	<a href="#">Sharde Grinder</a>	(301) 435-4752





REBB is a branch within NIH's Office of Human Resources that supports employees with Health Insurance, Life Insurance, Thrift Savings Plan, and Retirement.

**Disclaimer:** When emailing, you are encouraged to send items containing PII from your NIH email address using encryption.

## Retirement Employee Benefits Branch (REBB)



31 Center Drive 1B37  
Bethesda, MD 20892



301-496-2404



AskBenefits@nih.gov



[hr.nih.gov/benefits](https://hr.nih.gov/benefits)

**NO WALK-INS PERMITTED AT THIS TIME.**

**APPOINTMENTS ONLY, DUE TO SOCIAL  
DISTANCING REQUIREMENTS**

**Office of  
Human [hr.nih.gov](http://hr.nih.gov)  
Resources**

# USA Jobs Onboarding Manager Overview



# Benefit Elections to Submit through Onboarding

**Federal Employee  
Health Benefits  
(FEHB) SF-2809**

- SF-2809 Supporting Document(s)

**Life Insurance  
(FEGLI) SF-2817**

**Thrift Saving Plan  
(TSP) TSP-1**

# Access Your Onboarding Profile

Working at NIH  
Onboarding

The following links will help you orient yourself to federal employment at NIH.

New Employee Orientation - Begin Your Journey Here!

Virtual New Employee Orientation  
Employee Onboarding Checklist  
Frequently Asked Questions

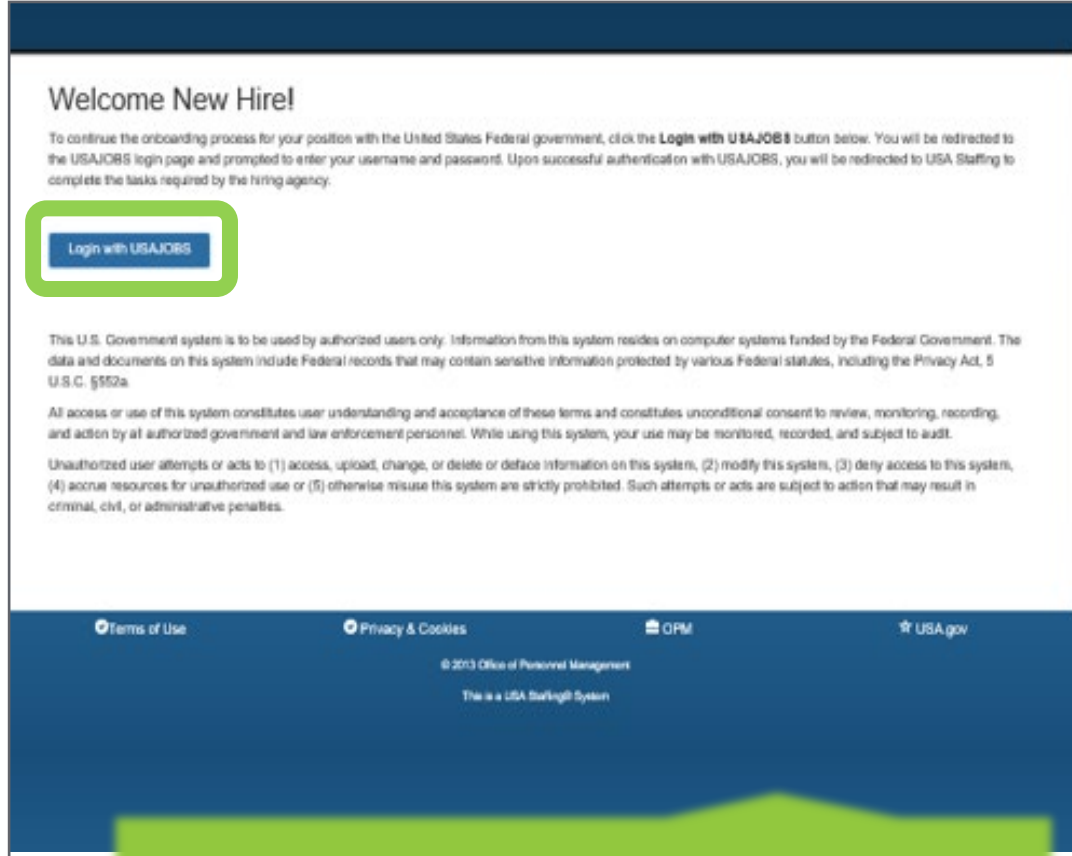
**STEP 1: Click the web address listed in your final offer letter, then click 'Employee Onboarding Checklist'.**

Task	Resource
<b>New Hire Forms</b> Complete the following forms in USA Staffing Onboarding. Print and bring them to orientation. <ul style="list-style-type: none"><li>Appointment Affidavit (SF-61)</li><li>Employment Eligibility Verification (I-9)</li><li>Declaration for Federal Employment (DF-306)</li></ul>	<ul style="list-style-type: none"><li><a href="#">USA Staffing for New Hires login</a> </li><li>For your initial login, <a href="#">use the link provided in your offer letter</a>. After your first login, use the direct link.</li></ul>
<b>Non-Benefit Related Forms</b> Submit electronically in USA Staffing Onboarding.	<ul style="list-style-type: none"><li><a href="#">USA Staffing for New Hires login</a> </li><li>For your initial login, <a href="#">use the link provided in your offer letter</a>. After your first login, use the direct link.</li></ul>
<b>Obtaining Your ID Badge</b> Enter your personal information in to the NIH Enterprise Directory (NED). <ul style="list-style-type: none"><li>Full legal name (first, middle, last)</li><li>Social Security Number</li><li>Date of birth</li><li>Place of birth (city, state, country)</li><li>Country of citizenship</li></ul>	<ul style="list-style-type: none"><li>You will receive an e-mail from <a href="mailto:ned@mail.nih.gov">ned@mail.nih.gov</a> with instructions</li></ul>
<b>Fingerprints and Photo</b> Please visit the Division of Personnel Security and Access Control website for next steps regarding your fingerprinting and photo for your badge at <a href="https://www.ors.od.nih.gov/ser/dpsac/Pages/Home.aspx">https://www.ors.od.nih.gov/ser/dpsac/Pages/Home.aspx</a>	<ul style="list-style-type: none"><li>You will receive an email from <a href="mailto:DPSACScheduler@mail.nih.gov">DPSACScheduler@mail.nih.gov</a> with instructions.</li><li>For questions, contact the <a href="#">Division of Personnel Security &amp; Access Control (DPSAC)</a>.</li></ul>
<b>Orientation</b> Confirm the location and schedule	<ul style="list-style-type: none"><li><a href="#">Virtual Orientation</a></li></ul>
<b>Insurance</b> Determine eligibility and review programs available	<ul style="list-style-type: none"><li><a href="#">Insurance Programs (IGPM)</a> </li></ul>
<b>Directions</b> Review directions to campus and accessing the Gateway	<ul style="list-style-type: none"><li><a href="#">Directions</a></li></ul>

**STEP 2: Click on "USA Staffing for New Hires login".**



# Access Your Onboarding Profile



**STEP 3: Click Login with USAJOBS.**



**STEP 4: After entering your email and password, USAJOBS will then send you a verification code to allow you to login.**



# New Hire Questionnaire | Benefits

Discover a career at NIH: It's about life

Onboarding Progress: 5%

Position Title: HHS Specialist  
Pay Plan-Series-Grade: GS-0201-12  
Duty Location: Bethesda, Maryland

**Task Details** 🔴 = Incomplete 🟢 = Complete

**Due Date:** 08/01/2018  
**Task Name:** Complete New Hire Questionnaire

**Task Instructions:**  
The table below contains a list of questionnaires for you to respond to. Your responses to the questions within these questionnaires will be used to populate data onto the forms which your Human Resources office has assigned to you through various tasks.

**Questionnaires To Complete**

Questionnaire Name	Status	Action
Biographic Information	Incomplete	<a href="#">Continue</a>
Employment Information	Incomplete	<a href="#">Continue</a>
Background Information	Incomplete	<a href="#">Continue</a>
Compensation Information	Incomplete	<a href="#">Continue</a>
<b>Benefits Information</b>	Incomplete	<a href="#">Continue</a>

Completion Date:

[Close](#)

---

**Benefits Information** 🔴 = Incomplete 🟢 = Complete ⚠️ = Required

Health Insurance | **Life Insurance** | Thrift Savings Plan | Beneficiaries

**Complete New Hire questionnaire for Health Insurance, Life Insurance, TSP and Beneficiary forms.**

# New Hire Questionnaire | Benefits

## Federal Employee Health Benefits (FEHB)

Enter all family members you would like to have covered under your FEHB plan.\*

First Name	Last Name	Select the qualifying relationship that allows this family member eligible for Federal Employee Health Benefits.	Actions
John	Doe	Child under age 26	<a href="#">Edit</a> <a href="#">Delete</a>

[Add Family Member](#)

What is the name of your new Federal Employee Health Benefits plan?\*

 ←

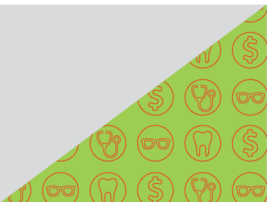
What is the enrollment code for your new Federal Employee Health Benefits plan?\*

 X ←  
0 characters remaining

[Save & Continue](#) [Return to Task](#)

**Waive coverage by selecting “I do not want to participate in FEHB.”**

**Enroll in FEHB by entering the health insurance plan name and enrollment code**



# New Hire Questionnaire | Benefits

## Federal Employee Health Benefits(FEHB)

555-555-5555

Work  
 Y  
 N

Does this person live at the same address as you?\*

To a  
req  
 Yes  
 No

Ente  
What health coverage does this family member currently have (choose all that apply)?\*

Medicare - Part A  
 Medicare - Part B  
 Medicare - Part D  
 Existing FEHB Plan  
 Private Insurance  
 TRICARE  
 None

Cancel Update

Complete personal information for dependent(s) including current insurance. If they do not have current insurance, select "none."

# Federal Employee Health Benefits (FEHB)

## Compare FEHB Plans

The screenshot shows the OPM.gov website's Plan Comparison Tool. The navigation menu on the left includes: IN THIS SECTION, Life Events, Changes in Health Coverage, Healthcare, Eligibility, Enrollment, Plan Information, **Compare Plans** (highlighted with an orange arrow), Plan Types, Summary of Benefits, Enroll, Guides, Premiums, Previous Years, Temporary Continuation of Coverage, Medicare, Health Savings Accounts, Consumer Protections, Centers, Reference Materials, Dental & Vision, Life Insurance, Flexible Spending Accounts, Long Term Care, Multi-State Plan Program, and Tribal Employers. The main content area is titled "Healthcare" and "COMPARE 2021 PLANS". It contains a disclaimer: "The information contained in this comparison tool is not the official statement of benefits. Before making your final enrollment decision, always refer to the individual FEHB brochures. Each plan's FEHB brochure is the official statement of benefits. If you decide to enroll, change health plans or plan options, or change enrollment type, please visit the Enroll page for information on submitting a change." Below this is a search section with the text "Search by one of the following: Items marked with an \* are required." and a field for "5-Digit Zip Code\*" with a dropdown arrow. A checkbox option is present: "I live overseas or outside the Continental United States. (Selecting this option will set the zip code to 99999)". A message states: "The current Plan selection below is disabled until you enter a Zip Code, Employee Type, and Pay Frequency. Pay Frequency depends on the Employee Type and may be restricted depending on Employee Type." Below this are two sections: "Employee Type\*" with radio buttons for "Federal Employee (Non-Postal)", "Federal Deposit Insurance Corporation", "Certain Temporary Employees", "Tribal Employee (Monthly)", and "Resident Monthly"; and "Pay Frequency\* (May be restricted with certain Employee Types)" with radio buttons for "Biweekly", "Every Four Weeks", "Semi-Monthly", and "Monthly".

Identify health insurance plan names and enrollment codes by using the Plan Comparison Tool on OPM.gov

# Federal Employee Health Benefits(FEHB)

## Compare FEHB Plans

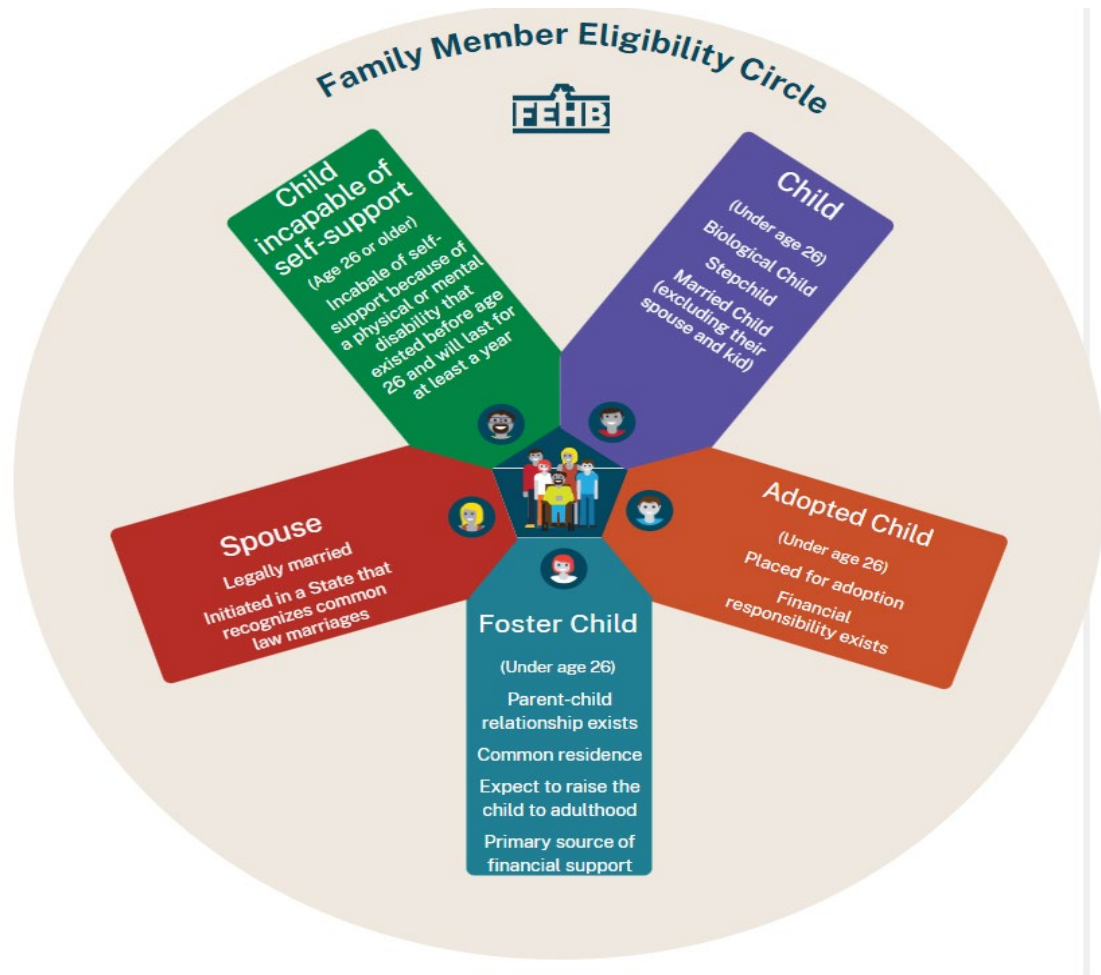
Select Plan	Plan Name (Plan Code) - Enrollment Code ⓘ	Enrollee Premium ⓘ	Annual Deductible ⓘ	Annual Out of Pocket Maximum ⓘ	Medical Account (HRA/HSA) ⓘ	Primary Care Office Visit ⓘ	Specialist Office Visit ⓘ	Doctor Costs Inpatient Surgery ⓘ	Retail Generic ⓘ	Retail Brand ⓘ	Plan Requires Referral to See Certain Specialists ⓘ
<input type="checkbox"/>	Aetna Advantage Plan - Advantage (Z2) - Z24 ⓘ	\$57.69	\$2,000	\$7,500	N/A	30%	30%	30%	Tier 1: \$10	Tier 2: 45%	No
	Aetna Advantage Plan - Advantage (Z2) - Z26 ⓘ	\$126.92	\$4,000	\$15,000	\$0 N/A	30%	30%	30%	Tier 1: \$10	Tier 2: 45%	No
	Aetna Advantage Plan - Advantage (Z2) - Z25 ⓘ	\$152.88	\$4,000	\$15,000	\$0 N/A	30%	30%	30%	Tier 1: \$10	Tier 2: 45%	No
<input type="checkbox"/>	Aetna HealthFund CDHP and Aetna Value Plan - CDHP (F5) - F51 ⓘ	\$151.53	\$1,000	\$5,000	\$1,000 HRA	15%	15%	15%	Tier 1: \$10 Tier 3: 50% \$300 max	Tier 2: 50% \$200 max Tier 3: 50% \$300 max	No
	Aetna HealthFund CDHP and Aetna Value Plan - CDHP (F5) - F53 ⓘ	\$369.99	\$2,000	\$10,000	\$2,000 HRA	15%	15%	15%	Tier 1: \$10 Tier 3: 50% \$300 max	Tier 2: 50% \$200 max Tier 3: 50% \$300 max	No
	Aetna HealthFund CDHP and Aetna Value Plan - CDHP (F5) - F52 ⓘ	\$334.07	\$2,000	\$10,000	\$2,000 HRA	15%	15%	15%	Tier 1: \$10 Tier 3: 50% \$300 max	Tier 2: 50% \$200 max Tier 3: 50% \$300 max	No
<input type="checkbox"/>	Aetna HealthFund CDHP and Aetna	\$137.72	\$700	\$6,000	N/A	\$25	\$40	20%	Tier 1: \$10 Tier 3: 50% \$600 max	Tier 2: 30% \$600 max Tier 3: 50%	No

Identify health insurance plan names and enrollment codes by using the Plan Comparison Tool on OPM.gov



# Federal Employee Health Benefits (FEHB)

## Supporting Documentation



Must provide proof of family member eligibility for New Employees and all Qualifying Life Events (QLE).

FEHB carriers must verify eligibility for situations in which premiums do not change such as adding a family member to an existing family enrollment.

All documents must be legible and issued by a corresponding official authority.

# Federal Employee Health Benefits(FEHB) Supporting Documentation

Upload all required supporting documents for eligible dependents to be enrolled through the primary employee's FEHB.



<input type="checkbox"/>	SF 2809	New Hire	Pending	07/26/2021
<input type="checkbox"/>	SF 2809 Supporting Documents	New Hire	Pending	07/26/2021
<input type="checkbox"/>	SF 2817	New Hire	Pending	07/26/2021

# Federal Employee Health Benefits (FEHB)

## Supporting Documentation

### Spouse



Government issued marriage certificate IF less than 12 months married

Government issued marriage certificate AND front page of most recent tax return IF more than 12 months married

See list of all acceptable documents provided in USA Staffing Onboarding Manager

# Federal Employee Health Benefits (FEHB)

## Supporting Documentation

### Child Under 26



Government-issued birth certificate

Certificate of Live Birth

Consular Report of Birth Abroad

Official Paternity Test

Court Order

# Federal Employee Health Benefits (FEHB)

## Supporting Documentation

### Adopted Child Under 26



Final adoption certificate or decree

Authorized letter from a placement agency

Front Page of most recent tax return with child's name

Court Order

# New Hire Questionnaire | Benefits


## Federal Employees' Group Life Insurance (FEGLI)

Benefits Information = Incomplete = Complete = Required

Health Insurance **Life Insurance** Thrift Savings Plan Beneficiaries

By law, unless you waive all coverage or are ineligible, you are automatically covered for Basic Life Insurance as an employee. When you first become eligible for Federal Employees' Group Life Insurance (FEGLI), you may (1) do nothing and have Basic automatically, (2) elect Basic and any or all of the options, or (3) waive all life insurance coverage.


Would you like to receive Federal Employees' Group Life Insurance (FEGLI)?

Yes 

No

As a new employee, you may elect or retain any of the following optional coverages. By electing any of these coverage, you authorize deductions from your paycheck to pay the full cost. If you do not elect any optional coverages at this time, your ability to enroll in the optional coverages is strictly limited. For more details on the cost and enrollment restrictions for each of the FEGLI coverages, review the FEGLI Program Booklet. You have 60 days from the date of your appointment to elect any of the Optional coverages.

Select which Optional FEGLI coverage you elect and authorize deductions from paycheck to pay the full cost? (If you do not want to elect any of the Optional coverages, do not check any of the boxes below)

Option A  
 Option B  
 Option C 

Have you been awarded a worker's compensation claim by the Department of Labor's Office of Workers' Compensation Program?

Waive Life Insurance coverage by selecting "No."

To keep Basic Only coverage, select "Yes," and do not choose additional optional.

To elect optional insurance, you must elect Basic and select any combination of optional coverage.



# New Hire Questionnaire | Benefits

## Thrift Savings Plan (TSP)

As a new hire, your agency will automatically deduct 5% of your basic pay, tax-deferred, from your paycheck each pay period and deposited into the traditional balance contributions to your account will be invested in the Lifecycle (L) Fund targeted most closely to the year you turn 62 unless you direct the TSP to allocate your contributions. If you are a rehired employee who has previously had a TSP account, your contributions will be invested according to your last contribution allocation on file with the TSP.

Select the Traditional contribution you would like to make to your TSP account. \*

- Keep my contribution at 5% per pay period
- Contribute a specific percentage per pay period (other than 5%)
- Contribute a specific dollar amount per pay period
- Make no contribution

Select the Roth contribution you would like to make to your TSP account. \*

- Contribute a specific percentage per pay period
- Contribute a specific dollar amount per pay period
- Make no contribution

Effective Date of Thrift Savings Plan (TSP) Election \*

Previous

**No Contributions: If you do not want to contribute, select the option to 'Make No Contribution'.**

**Change Contributions: To change your contribution or the type of contribution (Traditional vs Roth), select the option to change and enter in the amount.**

# New Hire Questionnaire | Benefits Complete

Task Details - Incomplete - Complete

---

**Due Date**      **Task Name**  
Complete New Hire Questionnaire

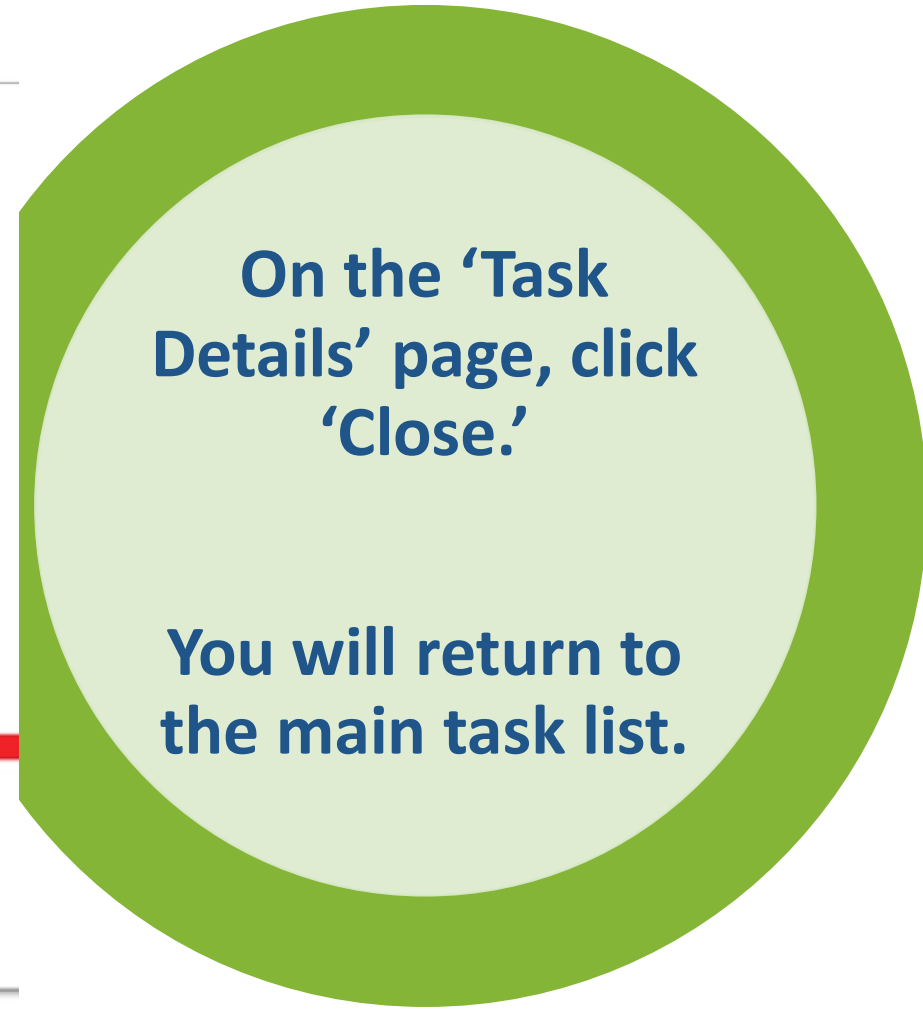
**Task Instructions**  
The table below contains a list of questionnaires for you to respond to. Your responses to the questions within these questionnaires will be used to populate data onto the forms which your Human Resources office has assigned to you through various tasks.

**Questionnaires To Complete**

Questionnaire Name	Status	Action
Biographic Information	Complete	<a href="#">Update</a>
Employment Information	Complete	<a href="#">Update</a>
Background Information	Complete	<a href="#">Update</a>
Compensation Information	Complete	<a href="#">Update</a>
Benefits Information	Complete	<a href="#">Update</a>

**Completion Date**  
08/06/2019

[Close](#)



# Completing Benefit Election Forms

## Review, Sign, and Submit

### Task List

<input type="checkbox"/>	I 9: Employment Eligibility Verification	Complete	Ineligible for Transmission	
<input type="checkbox"/>	OF 306: Declaration for Federal Employment	Review and Return Form for New Hire Signature		
<input type="checkbox"/>	SF 1152: Unpaid Compensation of Deceased Civilian Employee Designation of Beneficiary	Pending New Hire Action	Ineligible for Transmission	
<input type="checkbox"/>	SF 144: Statement of Prior Federal Service	Complete	Confirmed	2/4/2022 10:03 EST
<input type="checkbox"/>	SF 2809: Employee Health Benefits Election	Pending New Hire Action		
<input type="checkbox"/>	SF 2817: Federal Employees' Group Life Insurance Election	Pending New Hire Action		
<input type="checkbox"/>	SF 2823: Federal Employees Group Life Insurance Designation of Beneficiary	Pending New Hire Action	Ineligible for Transmission	
<input type="checkbox"/>	SF 3102: Federal Employees Retirement System Designation of Beneficiary	Pending New Hire Action	Ineligible for Transmission	
<input type="checkbox"/>	SF 61: Appointment Affidavits	Complete		
<input type="checkbox"/>	Tax MD: Maryland State Tax Withholding Form	Complete	Confirmed	2/4/2022 10:03 EST
<input type="checkbox"/>	TSP 1: Thrift Savings Plan Election Form	Pending New Hire Action		

Your list of tasks should show the three election forms you will ultimately need to sign (SF-2809, SF-2817, TSP-1).

If they have been completed correctly you will be able to select them, prompting a PDF version of the corresponding form.

# Completing Benefit Election Forms

## Review, Sign, and Submit

Task Details ○ = Incomplete   ● = Complete

**Task Name**  
SF 2809

**Instructions**  
Complete the SF 2809 Health Benefits Registration Form (FEHB).

Form Name	Next Action
SF 2809: Employee Health Benefits Election Form	Sign and Submit Form

**Completion Date**  
[Calendar icon]

[Close](#)

Click on the **Form name/Form Number** to open the form.

Verify the form information and click **“Confirm.”**

**SF 2809: Employee Health Benefits Election Form**  
The form displayed below is read-only. If you need to make changes to any data displayed on the form, you must return to the appropriate questionnaire and modify your response to the question(s) used to populate the form.

**Health Benefits Election Form**

**Uses for Standard Form (SF) 2809**  
(Use this form to:)

- Enroll dependent eligible family members in:
- Enroll or re-enroll in the FEHB Program, or
- Elect not to enroll in the FEHB Program (employees only), or
- Change your FEHB enrollment, or
- Cancel your FEHB enrollment, or
- Request your FEHB enrollment (employee or former spouse only).

**Who May Use SF 2809**

1. Employees eligible to enroll in or currently enrolled in the FEHB Program. Employees automatically participate in previous consecutive years they enroll in our page 5.
2. Annuitants in retirement systems other than the Civil Service Retirement System (CSRS) or Federal Employees Retirement System (FERS), including individuals receiving monthly compensation from the Office of Workers' Compensation Programs (OWCP).

Note: Civil Service Retirement System (CSRS) and Federal

Verify you are able to view the generated PDF form by clicking Confirm. If you cannot see the PDF form in the window above, please view our online help to troubleshoot the issue.

[Confirm](#)   [Close](#)

# Completing Benefit Election Forms

## Review, Sign, and Submit

**SF 2809: Employee Health Benefits Election Form**  
The form displayed below is read-only. If you need to make changes to any data displayed on the form, you must return to the appropriate questionnaire and modify your response to the question(s) used to populate the form.

**Who May Use SF 2809**

- Employees eligible to enroll in or remain enrolled in the FEHB Program. Employees automatically participate in previous enrollment unless they waive it, see page 2.
- Academics in retirement systems other than the Civil Service Retirement System (CSRS) or Federal Employees Retirement System (FERS), including individuals receiving monthly compensation from the Office of Workers' Compensation Programs (OWCP).
- Former special agents eligible to enroll in or remain enrolled in the FEHB Program under the Special Equity law or similar status.
- Individuals eligible for Temporary Continuation of Coverage (TCC) under the FEHB Program, including:
  - Former employees (to be re-enrolled from service).
  - Children who lose FEHB coverage.
  - Former spouses who are not eligible for FEHB under law 2.

**Provide the information requested on any other forms**  
Examples that concern you: An FEHB Self Plus One enrollment covers the individual and one eligible family member designated by the enrollee. An FEHB Self and Family enrollment covers the enrollee and all eligible family members. If you or a family member is covered under another FEHB enrollment, check the FEHB box on the Contact your Human Resources office or retirement system immediately so this is a dual coverage situation. Some examples of how this could occur are:

- You are enrolling in an FEHB Self Only plan while your spouse has either an FEHB Self Plus One or Self and Family plan, in which you are already covered.
- You are enrolling in an FEHB Self Plus One plan while you and also covered under your spouse's FEHB Self Plus One plan or FEHB Self and Family plan.
- You are enrolling in an FEHB Self and Family plan while your spouse is already enrolled in either a FEHB Self Only plan, an FEHB Self Plus One plan that covers you, or an FEHB Self and Family plan that covers you.
- You are an employee under age 20 and have an eligible family member. If you are enrolling in your own FEHB plan while you are covered under your parent's FEHB Self Plus One plan or Self and Family plan.
- You are an annuitant who is re-enrolled in the Federal government. If you are enrolling in an FEHB plan as an employee while you are covered under your own or a family member's FEHB plan.

No person may be covered under more than one FEHB enrollment. However, in certain unusual circumstances, your agency may allow you to enroll in order to:

- Enroll as an employee under age 20 who is covered under a parent's Self Plus One or Self and Family FEHB enrollment to enroll in FEHB coverage for a dependent.

**Sign and Submit** **Close**

I have reviewed the information for the form displayed and I consent that the information is accurate and true. By signing, as applicable, and/or submitting this form electronically, I acknowledge my approval of the information being submitted. I understand that an electronic signature is equivalent to signing the form. I understand there are legal implications if information has been stated fraudulently. I consent to the electronic release of information as appropriate.

**I Agree** **Cancel**

**Task Details** ○ = Incomplete ○ = Complete

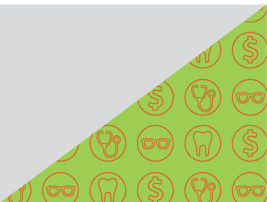
**Task Name**  
SF 2809

**Instructions**  
Complete the SF 2809 Health Benefits Registration Form (FEHB)

Form Name	Next Action
SF 2809: Employee Health Benefits Election Form	Complete

**Completion Date**  
08/14/2018

**Close**



# Onboarding Profile Complete Congratulations!

**Congratulations!**

You have successfully completed all tasks currently assigned by Human Resources.

**Note:** Human Resources may notify you when additional tasks have been assigned at a later date. If this occurs, log in to the system and complete all the newly assigned tasks.

Close

Discover a career at NIH: it's about life

Onboarding Progress: 100%

Position Title: NIH Specialist  
Pay Plan/Service Grade: GS-0205-10  
Study Location: Bethesda, Maryland

Tasks

The tasks below have been assigned by Human Resources to substantiate the registration information and actions necessary for you to start on duty. Click the **Task Name** for each individual task to view the instructions provided for Human Resources and mark the task as complete. Some tasks have quick links that allow you to **Start** or **Continue** working on the task. Note the due date for each assignment, and track your progress by referencing the completed date.

Task Name	Due	Completed
Complete New Hire Questionnaire	08/13/2018	08/13/2018
U.S.	08/13/2018	08/13/2018
FAO2017	08/13/2018	08/14/2018
NIH 401	08/13/2018	08/14/2018
NIH Tax Portal	08/13/2018	08/14/2018
OP-306	08/13/2018	08/14/2018
SI* 1032	08/13/2018	08/14/2018
SI* 144	08/13/2018	08/14/2018
SI* 181	08/13/2018	08/14/2018
SI* 203	08/13/2018	08/14/2018
SI* 2102	08/13/2018	08/14/2018
SI* 21	08/13/2018	08/14/2018
USAO CDU-01	08/13/2018	08/14/2018
US F	08/13/2018	08/14/2018
SI* 2639	10/19/2018	08/14/2018
SI* 2611	10/19/2018	08/14/2018
SI* 2625	10/19/2018	08/14/2018
TSP 1	10/19/2018	08/14/2018

Once you have submitted and printed all the required forms, your new hire record will be complete.

All tasks will display a completed date and a "green" box.

The progress bar will display 100% progress.



# Submission Review

Upload in USA Jobs	Electronically Sign in USA Jobs	Print & Sign With Wet Signatures
<ul style="list-style-type: none"><li>• SF-2809</li><li>• Supporting Documentation</li></ul>	<ul style="list-style-type: none"><li>• SF-2809</li><li>• SF-2817</li><li>• TSP-1</li></ul>	<ul style="list-style-type: none"><li>• SF-1152</li><li>• SF-2823</li><li>• SF-3102</li></ul>

Submit here



# CONTACT INFORMATION



301-496-2404



AskBenefits@NIH.gov



<https://hr.nih.gov/working-nih/onboarding/new-employee-benefits-enrollment>



**Disclaimer:** When emailing, you are encouraged to send items containing PII from your NIH email address using encryption.