



BENEFITS SUMMARY FOR NEW, REHIRED, AND TRANSFERRED CIVILIAN EMPLOYEES

Full Service

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APPLICABILITY: This brochure applies to new and rehired employees on eligible appointments, employees transferring from one base or agency to another without a break in service or with a break in service of 3 days or less, and temporary employees converting to an eligible appointment. If you have been hired on a temporary appointment scheduled to last 1 year or less, this brochure does not apply to you. Instead, ask your Civilian Personnel Office for the brochure titled "Benefits Summary for Temporary Employees," or download it from www.afpc.randolph.af.mil/dpc/best/bestbrochures.htm.

This brochure is for employees who receive "full" benefits and entitlements services from the Benefits and Entitlements Service Team (BEST). Not sure if you receive full or limited BEST services? Read our article "Full versus Limited Services – What Does It Mean?" located on the BEST homepage.

Your Civilian Personnel Office has provided you an in-processing package with information regarding Federal Employees Health Benefits (FEHB), Federal Employees' Group Life Insurance (FGLI), Thrift Savings Plan (TSP), retirement, and designations of beneficiary. Additional information may be obtained by visiting the BEST homepage at www.afpc.randolph.af.mil/dpc/best/menu.htm.

FOR ALL EMPLOYEES: Elections to enroll in health insurance, life insurance, regular Thrift Savings Plan (TSP), and TSP Catch-Up Contributions must be submitted through the Employee Benefits Information System (EBIS) web application or the Benefits and Entitlements Service Team (BEST) phone automated system. Instructions on how to access EBIS and the BEST phone system, and how to reach a BEST benefits counselor, are located at the end of this document.

HEALTH INSURANCE

New and rehired employees on eligible appointments and temporary employees converting to an eligible appointment **have 60 days from entry on duty** date to sign-up for a health insurance plan. If you don't make an election, you are considered to have declined coverage and you must wait until the next open season to enroll.

VERY IMPORTANT: Enrollment is not retroactive, and it cannot be made effective the day you enter on duty as you must have been in a pay status during some part of the pay period which precedes the one in which your enrollment becomes effective. Once this requirement has been met your enrollment will become effective on the first day of the first pay period that begins after you submit your enrollment through the BEST phone system or EBIS web application. Thus the earliest that your health insurance can possibly become effective is the first day of the pay period that begins after the one in which you are hired. You cannot be reimbursed for any medical expenses incurred prior to the effective date. You need to consider this in canceling any other health insurance coverage you may already have, and for scheduling of doctor visits or tests. You can obtain a copy of the SF 2809 (Health Benefits Election Form) from EBIS (until the election is effective), or by fax through the BEST phone system, to use as proof of insurance until you receive your enrollment card from the health carrier.

Transferring employees - If you transfer from a post of duty within the United States to a post of duty outside the United States, or reverse, you have from **31 days before leaving the old post of duty to 60 days after arriving at the new post** to elect to enroll or change to a new health plan. If a transfer within the United States moves you out of the servicing area of your HMO, you may elect a new health plan upon notifying your employing office of the move. Contact BEST if you need more information or if you're not sure you are eligible to elect a new health plan. Your enrollment or change is effective the first day of the first pay period that begins after you submit your enrollment election through the BEST phone system or EBIS web application.

The Federal Employees Health Benefits Program (FEHB) is one of the most valuable benefits of Federal employment, but coverage is not automatic – you must select one of the more than 100 available health plans in order to be covered. We cannot recommend a health plan -- you must do this homework for yourself. Begin by consulting the "Guide to Federal Employees Health Benefits Plans (RI 70-1) to determine which plans you are eligible for, the basic services each plan provides, and the cost. After narrowing your choices, you should then review the individual plan brochures for specific coverage information. Your local Civilian Personnel Office can tell you where you can view the guide and plan brochures locally, or you may view or download them from our Health Insurance web page (www.afpc.randolph.af.mil/dpc/best/fehb.htm).

Premium Conversion is a "pre-tax" arrangement under which the part of your salary that goes for health insurance premiums will be non-taxable. This means that you save on Federal income tax and FICA taxes. In most cases, you'll also save on State income tax and local income tax. Most employees will want to participate in premium conversion; however, there are two reasons why you might not want to participate -- flexibility and Social Security. Employees who participate in premium conversion may change to self-only or cancel coverage only during an annual open season or on experiencing a qualifying life event that corresponds with the desired change. **Premium conversion is automatic unless you waive participation by submitting the Premium Conversion Waiver/Election Form at the same time you enroll in health insurance.** The waiver form is available on the BEST Health Insurance web page at www.afpc.randolph.af.mil/dpc/best/fehb.htm or by requesting fax document #1005 via the BEST phone system. Additional information on premium conversion is available on the BEST homepage under Health Insurance and through the Fax module of the BEST phone system or you may speak with a benefits counselor.

Part-time employees working 16 to 32 hours a week are entitled to a partial Government contribution in proportion to the number of hours scheduled to work in a pay period. The amount of the Government contribution is determined by dividing the number of hours scheduled to work during the pay period by the number of hours worked by a full-time employee serving in the same or comparable position (normally 80 hours per bi-weekly pay period). That percentage is then applied to the normal government contribution identified in the plan booklet. Deduct the resulting amount from the total premium shown on the plan booklet (government share and employee share), and the remaining amount is the employee portion of the premium that will be withheld each pay period.

If you elect not to enroll in health insurance at this time, you need do nothing. However, unless you experience a qualifying life event, your next opportunity to enroll is the next annual open season, normally held in the November/December timeframe. If you wait until open season, coverage is effective the first day of the first full pay period the following January. If you experience a qualifying life event, such as marriage, birth of a child, or loss of coverage under another policy, you have 60 days from the date of the event to conduct a non-open season enrollment. There are many qualifying life events and you may obtain further information regarding them via the BEST Health Insurance web, from EBIS, the BEST phone system, or by speaking with a benefits counselor.

FLEXIBLE SPENDING ACCOUNT(S)

New employees have 60 days from entry on duty to sign-up for Flexible Spending Account(s), or until October 1, whichever comes first. Applications for the current calendar year are not accepted from October 1 through December 31. If you wish to enroll after October 1 you will need to do so during open season for the following year.

The **Federal Flexible Spending Accounts program (FSAFEDS)** allows you to pay for certain health and dependent care expenses with pre-tax dollars. You may choose to make a voluntary allotment from your salary to your FSAFEDS account(s). You will not pay employment or income taxes on your allotments and your employing agency also avoids paying employment taxes.

FSA enrollment is not automatically carried over from one Plan Year to the next, so each fall during the annual open season you must make a new election for the upcoming Plan Year.

Two types of FSA accounts are available to eligible employees:

- A **Health Care FSA (HCFSA)**, through which you may use pre-tax allotments to pay for eligible health care expenses not reimbursed by FEHB or any other medical, dental, or vision care plan you or your dependents may have. The maximum annual amount you may set aside is \$4,000 and the minimum is \$250. Eligible dependents include anyone you claim on your federal income tax return as a qualified IRS dependent and/or jointly file your taxes with. Examples of eligible expenses include, but are not limited to, co-payments, deductibles, co-insurance, dental care, orthodontic treatment, guide dogs, hearing aids, weight-loss programs at physician's directions, and laser eye correction. Insurance premiums, including those for FEHB premiums, Long Term Care, private insurance premiums and supplemental insurance premiums, are NOT eligible for reimbursement.
- A **Dependent Care FSA (DCFSA)**, through which you may use pre-tax allotments to pay for eligible dependent care expenses incurred so you can work, or if you are married, so you and your spouse can work, or your spouse can look for work or attend school full-time. The maximum annual amount you may set aside is \$5,000 (\$2,500 if you are married and filing a separate income tax return) and the minimum amount is \$250. Eligible dependents include your dependent children under age 13, or anyone you claim on your federal income tax return as a qualified IRS dependent (and who is mentally or physically incapable of caring for themselves).

Employees eligible to enroll in a HealthCare FSA include anyone eligible to enroll in the FEHB program, *even if not currently enrolled*. **All employees with qualified dependents may enroll in the Dependent Care FSA** except temporary employees with no fixed work schedule whose tour of duty is six months or less.

Employees will enroll in the FSA program directly with SHPS, Inc., the FSA program administrator. SHPS is fully responsible for enrollments and answering any questions you may have about this program. To enroll, call the SHPS toll-free telephone line: 1-877-372-3337 (TTY 1-800-952-0450), or go on-line at www.fsafeds.com. Enrollments are effective the next pay period and cannot be changed during the Plan Year unless you experience a Qualified Status Change (QSC).

Basic information regarding the FSA program can be found on the BEST Homepage, but it is strongly recommended that you check out the FSAFEDS web site and speak with an SHPS customer service representative if you have any questions about the program.

LIFE INSURANCE

New employees. If you're in a FEGLI-eligible position, you're automatically enrolled in *Basic* life insurance, which is effective on the first day you enter in a pay and duty status UNLESS you waive this coverage before the end of your first pay period. If you don't want this Basic coverage, you must waive it through the BEST phone system or EBIS.

You do NOT get any *Optional* insurance automatically – you have to take action to elect it. You must be enrolled in Basic to be eligible for *Optional* insurance.

You have 31 days from your entry date to sign up for any *Optional* life insurance through the BEST phone system or EBIS web application. *Optional* insurance is effective the date you submit the election. If you do not make an election, you are considered to have waived optional insurance.

No proof of insurability is required for the Basic insurance you get on being hired or any optional insurance you sign-up for during the first 31 days. Proof of insurability may be required for insurance changes after that time.

Rehired employees with a break in service of 180 days or less are automatically enrolled with the level of coverage in effect at the time of separation from employment. **If you do not wish this coverage, you may cancel at any time, but you may not elect to increase the coverage. If you had previously waived all coverage, you may not elect to be enrolled.**

Rehired employees with a break in service over 180 days are enrolled with Basic only. **You have 31 days from date of rehire to make a new life insurance election.** If you don't make a new election, the coverage in effect on the date of your separation from employment will be reinstated.

Transferring employees may not enroll or elect additional coverage based on the transfer.

The **Federal Employees' Group Life Insurance Program (FEGLI)** offers:

- Basic Life Insurance – equal to your annual basic pay, rounded to the next higher \$1,000, plus \$2,000.

Plus three types of optional insurance:

- Option A – Standard in the amount of \$10,000.
- Option B – Additional in an amount from one to five times your annual basic pay (after rounding up to the next \$1,000).
- Option C – Family. Provides coverage for your spouse and eligible dependent children in an amount from one to five times \$5,000 for your spouse, and from one to five times \$2,500 for children.

The FEGLI Program Booklet (RI 76-21) contains information on the life insurance program which you need to read and become familiar with. If you did not receive this booklet during in-processing, ask your Civilian Personnel Office where you can obtain it locally, or download it from the BEST Life Insurance web page at www.afpc.randolph.af.mil/dpc/best/fegli.htm.

Life insurance premiums are withheld automatically from your pay. Optional coverage is effective the date you conduct the transaction. You must be enrolled in Basic Life to elect any optional coverage. You may waive (cancel) life insurance coverage at any time, but you must wait one full year from the date of waiver before you can apply to re-enroll. This process requires that you have a medical exam, at your expense, and it will be up to the Office of Federal Employees' Group Life Insurance (OFEGLI) to approve or disapprove your request.

THRIFT SAVINGS PLAN

Newly hired employees have 60 days from date of appointment to sign up for regular TSP contributions. Elections are effective at the start of the next pay period. Enrollment elections must be submitted through the BEST phone system or EBIS. If you don't make an election during the initial 60-day eligibility period, you'll have to wait until the next open season to enroll.

Rehired employees see below for information on when you may contribute.

The Thrift Savings Plan (TSP) is a retirement savings and investment plan for Federal employees, offering the same type of savings and tax benefits that many private corporations offer their employees under 401(k) plans. During 2004, Federal Employee Retirement System (FERS) employees may contribute up to 14% of basic pay and Civil Service Retirement System (CSRS) employees may contribute up to 9%, as long as the total contribution does not exceed the Internal Revenue Service (IRS) annual limit (\$13,000 for 2004). The maximum employee contribution rates increase during the 15 Oct – 31 Dec 04 open season to 15% for FERS employees and 10% for CSRS, not to exceed the IRS annual limit of \$14,000 for 2005. However, beginning with the open season held 15 Oct - 31 Dec 05, participants may contribute any amount as long as it does not exceed the Internal Revenue Code's annual limit, set at \$15,000 for 2006.

Agency contributions to TSP accounts - Only FERS employees are eligible for agency contributions to their TSP accounts. FERS employees receive an automatic 1% agency contribution and agency matching contributions up to 4% once the required waiting period is met. The 1% automatic agency contribution is paid whether or not you elect to contribute your own money. The matching contributions are paid if you contribute your own money.

Waiting period for agency contributions - FERS employees are eligible to begin their own contributions but are *not* eligible to receive agency contributions until the second open season following appointment. For most employees this is a 6 to 12 month waiting period, as follows:

If you were hired:

1 December 2003 - 31 May 2004
1 June 2004 - 30 November 2004
1 December 2004 – 31 May 2005
1 June 2005 – 30 November 2005

Your agency contributions will begin:

First full pay period in December 2004
First full pay period in June 2005
First full pay period in December 2005
First full pay period in June 2006

Rehired employees with a break in service of 31 or more full days have 60 days from date of rehire to sign up to contribute to TSP. If you are FERS and you were previously eligible to receive agency contributions, the 1% agency contribution will begin immediately upon rehire and the agency matching contributions when you begin contributing your own money. If you were **not** previously eligible to receive agency contributions, the 1% agency contribution will begin once the waiting period has been met, as per the chart above, as will agency matching contributions if you are contributing your own money.

Rehired employees with a break in service of LESS than 31 full days - If you were previously contributing to TSP, your contributions and, if you are FERS, your agency contributions, will resume upon rehire. You cannot change the amount of your contributions until the next open season. It is your responsibility to check your Leave and Earnings Statement to ensure your contributions have resumed. If they do not, notify BEST immediately. If you were **not** previously contributing, you must wait until the next open season to elect to contribute.

Transferring employees - If you are contributing to TSP when you transfer, those contributions will continue. It is your responsibility to check Leave and Earnings Statements received for pay periods completed after the transfer effective date to ensure contributions did not stop. If your contributions do not continue, notify BEST immediately.

If you are rehired as a CSRS employee and you choose to change your retirement coverage to FERS, the 1% agency contribution will begin the day your coverage under FERS is effective. **You may also elect to begin contributing your own money to TSP within 30 days of the effective date of your transfer to FERS.** If you do, your contributions and your agency matching contributions will begin the next pay period after you enroll via EBIS or the BEST phone system. If you wish your TSP contributions to be effective the same date as your transfer to FERS, fax a completed Form TSP-1, along with SF 3109 (FERS transfer election form) to BEST at DSN 665-2936 or (210) 565-2936. (This is the only time BEST will accept a hard copy form.)

Investment of TSP contributions - Selecting the funds you wish to invest your TSP contributions in and the percentage you wish to go into each is called making a "Contribution Allocation." You'll use the TSP Web site and/or TSP ThriftLine to make your contribution allocation among the investment funds. The good news is you can change your contribution allocation as often as you like. If you're a new participant, however, your contributions are placed in the Government Securities Investment (G) Fund until you receive your TSP PIN and submit your contribution allocation. If you're a rehired employee and you already have an established TSP account, your contributions will be invested as per your most recent contribution allocation, which you can change at any time.

TSP PIN number - You'll receive your TSP Personal Identification Number (PIN) in the mail approximately 7 to 10 days after TSP receives your first contribution. On receipt of your TSP PIN, you can access the TSP Web site or ThriftLine and designate how you wish your contributions allocated among the five funds. The TSP Website is located at www.tsp.gov (click on Account Access). The ThriftLine phone number is (504) 255-8777, and unfortunately is not toll-free. If you're a rehired employee and don't remember your TSP PIN, or if you ever lose or forget your TSP PIN, you may request a new one via the TSP ThriftLine or the TSP Web site (under Account Access) - it will normally arrive at your home address within 10 business days.

TSP open seasons are held twice a year: 15 Oct – 31 Dec and 15 Apr – 30 Jun. Elections submitted from 5 Apr – 31 May 04 will be effective 13 Jun 04, and elections made 1 – 30 Jun 04 become effective at the beginning of the pay period following the one in which the election is made. Elections must be submitted via EBIS or the BEST phone line.

TSP CATCH-UP CONTRIBUTIONS

Catch-up contributions are additional tax-deferred contributions, separate from regular TSP contributions. You are eligible to make catch-up contributions if you are age 50 or older, in a pay status, and already contributing either the maximum TSP percentage or a dollar amount which will result in reaching the IRS annual elective deferral limit by the end of the year.

If you meet the eligibility requirements, you may start, change, stop, or restart catch-up contributions at any time -- they aren't restricted to open seasons like regular TSP contributions. **Eligible employees will sign up to make catch-up contributions via EBIS or the BEST phone system.** (Hard copy enrollment forms will not be accepted.) You'll designate the amount you wish to contribute each pay period as a whole dollar

amount. Catch-up contributions have their own annual limit separate from the IRS annual limit for regular TSP contributions. The catch-up contribution annual limit for 2004 is \$3,000. This increases to \$4,000 in 2005 and \$5,000 in 2006. After 2006, the \$5,000 maximum is subject to increases to reflect inflation.

Enrollment to make Catch-Up Contributions does **not** automatically carry over from year to year. You must submit an election each year. Learn more about the program by going to the BEST Homepage and clicking on "Thrift Savings Plan."

LONG TERM CARE INSURANCE

You (and your spouse, if you're married) have **60 days** from your entrance date to apply for Long Term Care Insurance using the abbreviated underwriting application with only a few health-related questions.

If you apply AFTER the 60 day period, you will have to use the long underwriting application with numerous health-related questions, and possibly a review of medical records and/or an interview with a nurse.

The **Federal Long Term Care Insurance Program (FLTCIP)** provides long term care insurance for Federal employees and their parents, parents-in-law, stepparents, spouses, and adult children. If you're newly employed in a position that conveys eligibility for FEHB coverage, you can apply for long term care insurance, even if you don't enroll in the FEHB Program. Check with BEST if you are unsure about your eligibility.

Long term care insurance is **NOT** just for older people. Forty percent of the persons receiving long term care are working age adults between the ages of 18 and 64, with many of these people receiving it as they recover from an accident, stroke, or a crippling disease such as multiple sclerosis. The cost of the insurance is based on your age when you apply – the older you are when you apply, the higher the premiums. The Office of Personnel Management (OPM) sponsored the LTC insurance program in order to obtain rates somewhat lower than what is available in the private sector, but you will pay the full cost of the premiums. Certain medical conditions, or combination of conditions, will prevent some people from being approved for coverage. Not everyone who applies will be approved for the insurance coverage.

To apply for LTC insurance, go to the LTC Partners web site at www.ltcfeds.com or call their toll-free phone number: 1-800-582-3337 or TTD 1-800-843-3557.

General information on LTC insurance is available on the BEST homepage. For more detailed information you will need to visit the OPM Long Term Care web site at www.opm.gov/insure/ltc/index.htm and the LTC Partners web site. You may also speak with a LTC Partners' certified long term care insurance specialist from Monday through Friday from 8 a.m. to 7 p.m., Eastern Time.

DESIGNATIONS OF BENEFICIARY

If you die while you are a Federal employee, payments will be made in a particular order set by law from life insurance, unpaid salary (also called unpaid compensation), Thrift Savings Plan funds, and retirement lump sum. Standard rules, called the order of precedence, determine who is eligible to receive these payments. If you are satisfied with the order of payment for that program, you do not have to take any action. But if you want these funds to go to someone else, you need to file a Designation of Beneficiary for that program. Generally, if there is not a valid court order properly filed in your Official Personnel Folder, the order of precedence is (1) the widow or widower; (2) if none, the child or children in equal shares; (3) if none, the parents in equal shares; (4) if none, the executor or administrator of the estate; (5) if none, the next of kin under the laws of the state in which the decedent was domiciled at date of death.

Beneficiary forms can be found on the Office of Personnel Management web site at www.opm.gov/insure/designations/index.htm, and include the following:

- SF 2808 (Designation of Beneficiary Civil Service Retirement System)
- SF 3102 (Designation of Beneficiary Federal Employees Retirement System)
- SF 1152 (Designation of Beneficiary Unpaid Compensation of Deceased Civilian Employee)
- SF 2823 (Designation of Beneficiary Federal Employees' Group Life Insurance)
- Form TSP-3 (Designation of Beneficiary Thrift Savings Plan)

Complete Form TSP-3 when you begin to contribute or, if FERS, when you begin receiving the 1% agency contribution, whichever happens first. Submit the SF 1152, SF 2823, and the SF 3102 to your servicing Civilian Personnel Office, who will certify and forward to our office. The SF 2808, if applicable, should be sent directly to OPM at the address on the reverse side of the form. The Form TSP-3 should be sent directly to the National Finance Center at the address on the reverse side of the form. You should make copies of your beneficiary forms prior to submitting them to the appropriate offices and review them periodically to ensure they reflect your current desires.

If you complete beneficiary forms, it is your responsibility to make sure your beneficiaries stay current. A change in marital status does **not** automatically change a beneficiary previously designated.

RETIREMENT

Newly hired Federal civilian employees, with some exceptions, participate in the Federal Employees Retirement System (FERS). However, some employees may be covered under the Civil Service Retirement System (CSRS) or a slightly revised version of it called CSRS-Offset. To determine your retirement coverage, refer to Item 30 of your latest SF 50, Notification of Personnel Action, or your Leave and Earnings Statement.

FERS - a three-tiered retirement plan. The three components are: 1) Social Security benefits, 2) FERS Annuity, and 3) Thrift Savings Plan. Under FERS, you pay full Social Security taxes and a small contribution to the FERS Basic Benefit Plan for a total of 7.00% of your basic pay (slightly more for special groups such as firefighters, law enforcement officers, and air traffic controllers). The three components work together to form a strong financial foundation for your retirement years. If you are a rehired FERS employee who took a refund of FERS retirement contributions, be advised that refunded FERS service is not creditable for retirement purposes. If you are uncertain whether you have refunded FERS service, please contact the Office of Personnel Management at (724) 794-2005.

CSRS - Generally, if you were hired before 1984 you are covered under CSRS unless you elected to transfer to FERS, or unless you have a break in service over one year. CSRS employees contribute 7.00% of basic pay (slightly more for firefighters, law enforcement officers, and some air traffic controllers); there are no contributions to social security. Some employees may be covered under CSRS with a Social Security overlap. This coverage was specifically created by Congress and is known as "CSRS Offset." On rehire, whether you are full CSRS or CSRS-Offset, you will have a six-month window from the date of rehire to elect FERS coverage.

POST-1956 MILITARY DEPOSITS

The military began deducting Social Security from military wages on 1 Jan 57. Congress enacted a law in 1982 giving employees the opportunity to make a deposit into their civilian retirement system for active military time served after 1956. Individuals who make the deposit are entitled to credit for the military service under both the Social Security system and the applicable civilian retirement system. No interest will be computed if a deposit for military service is made within two years after the date you first became employed. If the deposit is not completed in the two-year period, interest will be posted to your account one year after the two-year period; thus the total effective interest-free period is three years minus one day.

FERS - If you are covered under FERS, you will receive retirement credit for military service **only** if a deposit for military service is made. For periods of active duty service prior to 1 Jan 99, the deposit equals 3.00% of base pay (does not include allowances earned during the post-56 military service). For periods of service performed during 1999, the deposit equals 3.25%, during 2000, the deposit equals 3.40%, and after 31 Dec 00, the deposit returns to 3.00% of base pay.

CSRS - If you were **first employed under CSRS on or after 1 Oct 82**, you will receive retirement credit for post-56 military service **only** if a deposit for the military service is made. Prior to 1 Jan 99, the deposit required is 7.00% of the basic military pay you received for the post-56 military service. For periods of service during 1999, the deposit required is 7.25%; for 2000, the deposit is 7.40%; and after 31 Dec 00, the deposit returns to 7.00%. If you were **first employed under CSRS BEFORE 1 Oct 82**, you have two options: 1) make the deposit for the post-56 military service; or 2) receive service credit but have your annuity recomputed at age 62 to eliminate post-56 military service. (This only occurs if you are eligible for Social Security. If you do not currently have enough quarters to be eligible for Social Security benefits and

will not have enough quarters by age 62, there is no advantage to making a deposit for the post-56 military service.)

Retired Military - If you are retired military, you may combine your active duty military service and civilian service for one annuity. This requires a deposit into the civilian retirement system for the active military service *and* you must waive your military retired pay effective with the beginning of the civilian annuity. There are two exceptions to the requirement to waive military retired pay: (1) if it was awarded for a disability incurred in combat or caused by an instrumentality of war, or (2) awarded for reserve service under Chapter 67, Title 10.

HOW TO ACCESS EBIS AND THE BEST PHONE SYSTEM, AND REACH A COUNSELOR

The web system, called the Employee Benefits Information System (EBIS), is located on the AFPC Secure Web site. As a result, to access EBIS you must first log into AFPC Secure. To get started, go to www.afpc.randolph.af.mil/dpc/BEST_GRB/EBIS.htm. Once there, click on "Enter the AFPC Secure Web Sites Login." There are two ways to access AFPC Secure: via DoD PKI certificate/CAC card, or the regular AFPC Secure UserID and password.

DoD PKI Certificate. You may use this method if your web browser has been configured for use with the DoD PKI Certificate/Common Access Card (CAC) and CAC personal identification number (PIN). Click "OK" when you see your name and certificate number in the "Client Authentication" dialog box. Then insert your CAC card into the reader on your computer and enter your CAC PIN at the prompt. The AFPC Secure Main Menu page will appear - click on the "EBIS" button. When the EBIS Welcome Page appears, you'll login by entering your SSN and BEST PIN (referenced under the phone system). Your PIN for the BEST phone system and EBIS is the same, and you may change it as often as you wish via either system. In addition, if you forget your PIN, you can select a new one - via either system.

UserID and Password. If your browser is not configured to use the CAC, or you prefer to log into AFPC Secure via UserID and password, or if you are logging into AFPC Secure from your home or another work station, click the "Cancel" button when the "Client Authentication" dialog box appears on your screen. (Say "OK" to the security prompt that pops up.) The AFPC Secure Login page will appear - enter your UserID and password. If this is your **first** time accessing AFPC Secure, you'll have to create a UserID and password by clicking on the "Civilian" button and following the prompts. After logging into AFPC Secure, click the "EBIS" button and the EBIS Welcome Page will appear. Login by entering your SSN and BEST PIN number referenced under the phone system. Your PIN for the BEST phone system and EBIS is the same, and you may change it as often as you wish through either system. In addition, if you forget your PIN, you can select a new one through either system.

The BEST phone system. Employees located in the United States will dial 1-800-616-3775. Overseas employees will dial a toll-free AT&T direct access number for the country they are in, then 800-997-2378. (AT&T direct access numbers can be obtained from www.att.com/business_traveler/guides_and_access/dialing_instr.html#outside.) If you dial 1-800-616-3775, when the system answers press "2" for current Air Force-serviced civilian employee, then "2" for BEST benefits and entitlements services. You'll hear a few click and several seconds of silence, but don't hang up. You should then hear "Welcome to the Air Force Personnel Center." (*Note: This is where overseas employees enter the phone system.*) Press "2" for benefits and entitlements, then "1" for current Air Force-serviced employees. The system will prompt you to enter your Social Security Number (SSN) and Personal Identification Number (PIN). For security reasons, the system will then require you to change your four-digit PIN to a six-digit PIN of your choice. When you reach the benefits main menu, press the number for the appropriate benefits area. If you are unable to access the phone system after your second duty day, please notify your local Civilian Personnel Office.

About PIN numbers - We don't mail PIN numbers. For first-time hires and employees transferring from another agency (such as Army or Navy) to the Air Force, the BEST automated system automatically sets your PIN as a four-digit number equivalent to your month and year of birth (MMYY). For example, if born in February 1975, your PIN will be 0275. If you are a rehired employee who was previously serviced by BEST, the six-digit PIN you previously set will still be in the system. If you don't remember this PIN, you can change or reset it within the BEST phone system or EBIS.

EBIS and the BEST phone system are available 24 hours a day, 7 days a week (except on Saturdays from 8:45 p.m. - midnight Central Time for systems backup and Sundays from 7 a.m. - 10 a.m. Central Time for maintenance). Detailed information on the BEST automated systems can be found in the Questions and Answers Booklet provided to you by your Civilian Personnel Office during in-processing. If you did not receive this booklet, ask your Civilian Personnel Office for one or download it from www.afpc.randolph.af.mil/dpc/best/bestbrochures.htm. Be sure to download the one listed under "Full Service Employees." We urge you to review this booklet, and keep it close for future reference.

Benefits counselors can be reached by dialing our telephone number(s) listed above and selecting the options specified above. When you reach the benefits main menu, the system will voice: "press 1 for health benefits, 2 for retirement, 3 for TSP, and 4 for life insurance." Press the number for the benefits area relating to your call, then "0" to transfer to a benefits counselor. Counselors are available Monday through Friday from 7 a.m. - 6 p.m. Central Time. If you're not able to access the phone system after your second duty day, or it tells you your SSN is not on file, please notify your servicing Civilian Personnel Office and they will contact us.

Hearing impaired employees may contact a benefits counselor via our toll-free Telecommunications Device for the Deaf (TDD) number: 1-800-382-0893 (or commercial 565-2276 if calling within the San Antonio area).

Benefits and Entitlements Service Team (BEST)

HQ AFPC/DPCMB
550 C Street W Ste 57
Randolph AFB TX 78150-4759

BEST Phone Line: In the United States: 1-800-616-3775

Overseas: Dial a Toll-Free AT&T Direct Access Number, then 800-997-2378 (AT&T Direct Access Numbers can be obtained at www.att.com/international_business/dialing_guide/country-diallist.cgi)

Hearing Impaired TDD Number: 1-800-382-0893 Local: (Commercial) 565-2276

BEST Fax Number: DSN 665-2936 or (210) 565-2936

BEST Homepage: www.afpc.randolph.af.mil/dpc/best/menu.htm

EBIS Web Application: http://www.afpc.randolph.af.mil/dpc/BEST_GRB/EBIS.htm

OPM Long Term Care Web Page: www.opm.gov/insure/ltc/index.htm

LTC Partners Web Site: www.ltcfeds.com

FSAFEDS Web Site: www.fsafeds.com

FSAFEDS Phone: 1-877-372-3337 TTY: 1-800-952-0450

REVIEW YOUR LEAVE AND EARNINGS STATEMENT EVERY PAY PERIOD!