FEDERAL EMPLOYEE'S HEALTH BENEFITS
WAIVER OF IMMEDIATE RENSTATEMENT OF FEHB

Current Military Technicians who are returning from military service and have an active and/or FEHB plan may waive FEHB reinstatement or enrollment due to military TRICARE and/or TRICARE Reserve Select coverage until such coverage has ended.

Employees may select any date between the date they are restored to technician position and the date after their transitional TRICARE and/or TRICARE Reserve Select coverage ends.

Annuitants may select any date between the date they are separated from the Uniformed Service and the date after their transitional TRICARE and/or TRICARE Reserve Select coverage ends.

For further information, contact your local Human Resources Representative or visit www.opm.gov.

You are required to initial all applicable blocks to indicate your elections and that you have read and understand your options/conditions.

I. INDIVIDUAL INFORMATION		
1. Name:	2. SSAN:	3. Technician Unit:
4. Date release/discharged from military service:	5. Date TRICARE Coverage ends:	

II. Employees

I understand that, pursuant to the Uniformed Services Employment and Reemployment Rights Act (USERRA), I have a right to reinstatement of my Federal Employees Health Benefits (FEHB) coverage on the day I am restored to my civilian position under the provisions of 5 CFR part 353 or similar authority.

Initials		
	I hereby clearly and unequivocally waive my FEHB coverage until:	Date:

III. Annuitants

I understand that pursuant to the USERRA, I have a right to reinstatement of my FEHB coverage on the day I am separated from the uniformed services.

I fully understand that until my FEHB enrollment is reinstated, I will not be eligible for any health benefits that would have been available to me under an FEHB plan. This waiver will terminate upon my death.

Initials		
	I hereby clearly and unequivocally waive my FEHB coverage until:	Date:

III. TECHNCIAN SIGNATURE

I have read and understand my FEHB waiver options and the associated conditions.

Signature:	Date: