Approved For Release 2000/06/07 : CIA-RDP79-00639A000100060003-4

COORDINATION PAGE

25X1A	SUBJECT: subj: Insurance)
	CONCURRENCES:	
	Chief, DDP/PC	
	Chief, Operational Services	
	(Note: Coordination by DD/P Operating Divisions required.)	10t

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25X1A

TO:

SUBJECT:

Insurance

25X1A

REFERENCES: (a)

29 August 1963

22 April 1963

25X1A

(c) Booklet, Association Insurance Programs, 31 March 1960 Acese 15580 Wi DATED IN JANUARY 1961.

1. Federal Employees Health Benefits Program.

a. Reference (a) announced an open period for enrollment or changes in enrollment in a health benefits program for the period I through 15 October 1963. After the Notice was promulgated we learned that Executive Order 11116, 5 August 1963, established the following charges for hospital-

services; also we have been informed that

elements have announced these new rates to be effective 1 January 1964:

- (1) Impatient care; Daily RATE 5:
- (a) For employees of the United States who are not citizens of the United States and their dependents \$5,00
 - (b) For all others
- (2) Each outpatient treatment, examination, or consultation:
 - (a) For employees of the United States and their dependents
 - (b) For all others

\$8.00

\$1.00

\$37.00

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- b. Because these rate changes will affect KUBARK employees who are eligible to receive hospital

 KUBARK announces an open period for enrollment or change in enrollment

 (e.g., from low option to high option) from 20 CEMBER 13

 1963.
- c. If an eligible individual is unable to apply during the open period, a written justification to Headquarters is required along with the Health Benefits Registration Form (S. F. 2809).
 - 2. Parents Associated Medical Assurance. (PAMA)
- a. Reference (b) announced a plan to provide hospitalisation and surgical insurance coverage to eligible parents or step-parents and parents—in-law, contingent upon the enrollment of 1000 parents during the initial enrollment period.
- b. We request that all personnel who applied for PAMA, be advised that more than 1000 parents were enrolled, hence the program is in effect. If an individual authorized payroil deductions for PAMA, these deductions are being made and forwarded to the Insurance Branch.
- 3. Emergency Travel Plan. The Emergency Travel Plan coverage described in the booklet, "Association Insurance Programs", dated 31 March 1960 has been expanded to include round-trip travel from any location in the world to points anywhere else in the world for emergencies that involve

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a. This concept recognizes that emergencies may occur which affect the employee or the employee's immediate family who are at the post with him. The employee can purchase Emergency Travel Insurance and name himself and/or the other family members with him at the post to provide for the contingency of emergency travel which may not qualify for payment by ODYOKE. For example, the employee may become critically ill and be evacuated to PBPRIME or to ODYOKE medical facilities at an intermediate location. Normally, his travel expenses would qualify for payment under KUBARK however, the employee's wife would have to assume the travel cost as a personal expense if she Wished to be with her husband unless she qualified as an attendant. Under the provisions of the Emergency Travel Plan if the employee is the first named he can designate his spouse as the person to make the trip. In the event he becomes critically ill and must be evacuated, his wife, relying on the insurance coverage, can accompany him. A similar use can be made of the Emergency Travel Plan if the emergency involves the family members at the post with the employee. By naming these family members and paying the additional premium, the employee can be assured of payment of travel expenses if he wishes to accompany a critically ill family member.

b. The premium rates for the emergency travel plan are as follows:

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Age of Named Person	First Named Person	Each Additional Person
0 through 49	\$32.00	\$13.00
50 through 64	\$40.00	\$21.00
65 through 69	\$50.00	\$31.00
70 through 75	\$65.00	\$46 . 0 0
(renewals only)		

c. The "Important Instructions" listed on page 33 of the
Association Insurance Programs Booklet must be followed to be assured
that the application will be promptly approved.

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7	. UNCLASSIFIED	CONFIDE	NTIAL	1000	SECR	ET
CENTRAL INTELLIGENCE AGENCY OFFICIAL ROUTING SLIP						
TO	NAME AND	ADDRESS	DAT	E	INIT	ALS
1			844	63	lpoh	<u>X</u>
2	5E56 Headquarters					<u> </u>
3	SSA/DDS					
4	7D-18 Headquarters			-		
5					_	
6						
	ACTION	DIRECT REPLY			REPLY	
	APPROVAL	DISPATCH			IENDATIO	N
	COMMENT					
	CONCURRENCE	INFORMATION	SIGNATURE			
Re	marks:					

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Early distribution of this dispatch will be appreciated.

FOLD HERE TO RETURN TO SENDER

FROM: NAME, ADDRESS AND PHONE NO.

C/BSD

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FORM NO. 237 Use previous editions

* U.S. GOVERNMENT PRINTING OFFICE: 1961 0-587282

SECRET

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TO:

25X1A2g

SUBJECT:

Insurance

25X1A

REFERENCES: (a)

: (a)

, 29 August 1963

b) _____, 22 April 1963

(c) Booklet, Association Insurance Programs, 31 March 1960

1. Federal Employees Health Benefits Program.

a. Reference (a) announced an open period for enrollment or changes in enrollment in a health benefits program for the period 1 through 15 October 1963. After the Notice was promulgated we learned that Executive Order 11116, 5 August 1963, established the following charges for hospitalization and dispensary services; also we have been informed that elements have announced these new rates to be effective 1 January 1964:

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- (1) Inpatient care:
- (a) For employees of the United States who are not citizens of the United States and their dependents \$5.00
 - (b) For all others

\$37.00

- (2) Each outpatient treatment, examination, or consultation:
- (a) For employees of the United States and their dependents
 - (b) For all others

\$1.00

\$8.00

25X1A

- b. Because these rate changes will affect KUBARK employees who are eligible to receive hospital

 KUBARK announces an open period for enrollment or change in enrollment

 (e.g., from low option to high option) from 25 November through 6 December 1963.
- c. If an eligible individual is unable to apply during the open period, a written justification to Headquarters is required along with the Health Benefits Registration Form (S. F. 2809).

2. Parents Associated Medical Assurance. (PAMA)

- a. Reference (b) announced a plan to provide hospitalization and surgical insurance coverage to eligible parents or step-parents and parents-in-law, contingent upon the enrollment of 1000 parents during the initial enrollment period.
- b. We request that all personnel who applied for PAMA, be advised that more than 1000 parents were enrolled, hence the program is in effect. If an individual authorized payroll deductions for PAMA, these deductions are being made and forwarded to the Insurance Branch.
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Age of Named Person	First Named Person	Each Additional Person
0 through 49	\$32.00	\$13.00
50 through 64	\$40.00	\$21.00
65 through 69	\$50.00	\$31.00
70 through 75	\$65.00	\$ 46. 00
(renewals only)		•

c. The "Important Instructions" listed on page 33 of the Association Insurance Programs Booklet must be followed to be assured that the application will be promptly approved.

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