

# Blue Cross® and Blue Shield® Service Benefit Plan

## FEP® Blue Focus

[www.fepblue.org](http://www.fepblue.org)



**2026**

### A Fee-For-Service Plan (FEP Blue Focus) with a Preferred Provider Organization

#### **IMPORTANT**

- Rates: Back Cover [\[140\]](#)
- Changes for 2026: Page [16](#)
- Summary of Benefits: Page [134](#)

This Plan's health coverage qualifies as minimum essential coverage and meets the minimum value standard for the benefits it provides. See FEHB Facts for details. This Plan is accredited. See Section 1.

**Sponsored and administered by:** The Blue Cross and Blue Shield Association and participating Blue Cross and Blue Shield Plans

**Who may enroll in this Plan:** All Federal employees, Tribal employees, and annuitants who are eligible to enroll in the Federal Employees Health Benefits Program

**Postal Employees and Annuitants are no longer eligible for this plan (unless currently under Temporary Continuation of Coverage)**

**Enrollment codes for this Plan:**

**131 FEP Blue Focus - Self Only**

**133 FEP Blue Focus - Self Plus One**

**132 FEP Blue Focus - Self and Family**



Authorized for distribution by the:



United States  
Office of Personnel Management

Healthcare and Insurance  
<http://www.opm.gov/insure>

**RI 71-017**