START YOUR RETIREMENT OFF STRONG

FEDERAL EMPLOYEES HEALTH BENEFITS (FEHB)

GEHA.COM | 1-888-407-7623

G.E.H.A Government Employees Health Association

What's inside

4 Making sense of Medicare

5 G.E.H.A and Medicare Advantage

6 When to enroll in Medicare

8 G.E.H.A makes Medicare better

9 Get more with Medicare Advantage

10 Plan comparison

14 Next steps

15 Contact information

16 Our story

YOU'VE WORKED HARD FOR THIS

Turning 65 means you're officially eligible for Medicare.

This guide explains how Medicare works, when to enroll and how pairing Medicare with a G.E.H.A health plan can help you get more coverage and peace of mind in retirement.

You've worked hard for your federal benefits. Now it's time to make sure they're working for you.

Our federal benefit experts are available year-round to answer questions and help you understand your options.

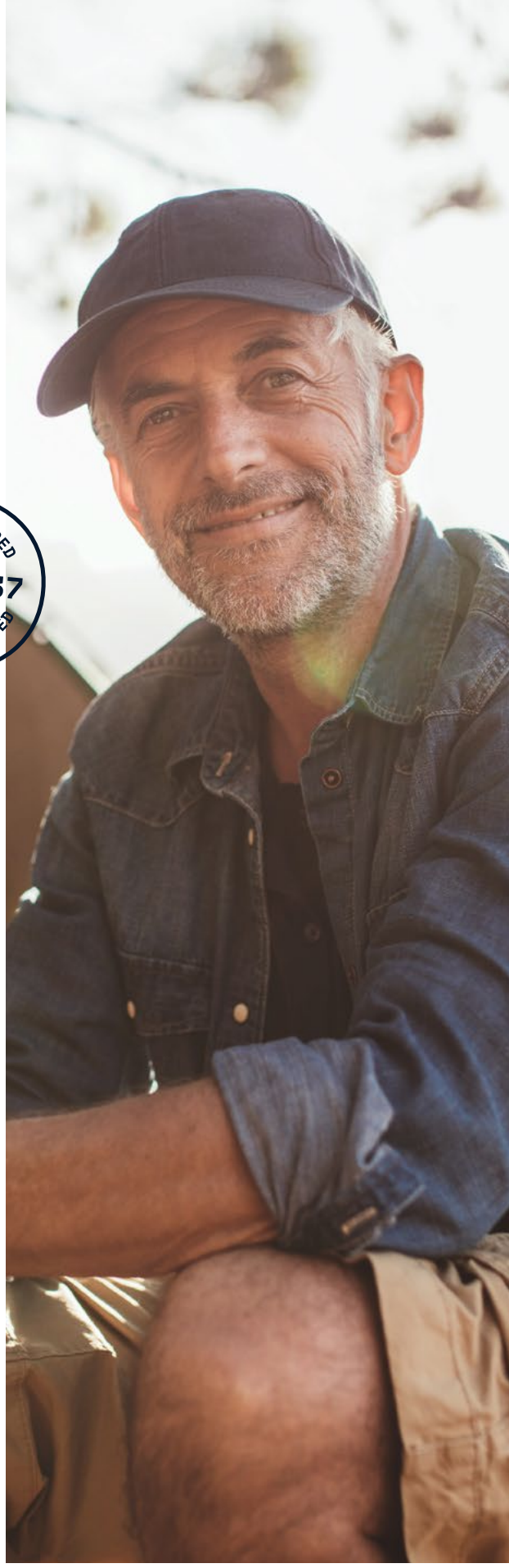
Contact us

Reach a FedViser Monday–Friday from 8 a.m.–8 p.m. Eastern time in three easy ways:

- Call 1-888-407-7623
- Meet with a FedViser at geha.com/FEHBRetirementPrep
- Chat live by visiting geha.com

RETIREMENT BENEFITS YOU CAN RELY ON

Trusted by millions of federal employees, retirees and their families since 1937.



Why G.E.H.A?

We're member founded, member dedicated

+ As a non-profit, our dollars are reinvested in additional benefits and services exclusively for our members

Dedicated solely to federal workers since our founding in 1937

+ Established by Postal workers in 1937, G.E.H.A remains dedicated to assisting federal employees and retirees like you

Benefits that go beyond

+ Our plans include the extra benefits[1] most demanded by federal employees and retirees to fit every stage of life

1 These benefits are neither offered nor guaranteed under contract with the FEHB Program but are made available to all Enrollees who become members of a G.E.H.A health plan and their eligible family members.

MAKING SENSE OF MEDICARE

Understanding the different parts of Medicare

What is Medicare?

Medicare is health coverage managed by the federal government that you've likely paid into throughout your working years. Adding Medicare coverage may lower your deductibles and copays, reduce overall out-of-pocket costs, provide additional dental and vision benefits and more. But it's important to do your research since each part works differently.

ORIGINAL MEDICARE

Original Medicare includes:

PART A
(HOSPITAL COVERAGE)

Covers inpatient hospital care, skilled nursing facility care, and some home health care and hospice care. Most people do not pay a monthly premium for Part A.

PART B
(MEDICAL COVERAGE)

Covers doctor visits, outpatient hospital care, lab tests, diagnostic services and durable medical equipment. Part B is voluntary, and has a monthly premium separate from what you pay for a G.E.H.A plan.

You can also choose to add **Part D** (prescription coverage), offered through private insurance companies approved by Medicare.

When you become eligible for Medicare, you have choices:

+ Keep your FEHB plan as-is
+ Pair your FEHB plan with Medicare Parts A & B
+ Consider the UnitedHealthcare® G.E.H.A Group Medicare Advantage (PPO) Plan, designed to work in place of your coverage with even greater benefits at no additional premium

MEDICARE ADVANTAGE

Original Medicare provides foundational coverage, but it doesn't cover everything. Once your deductible is met, you'll pay 20% coinsurance for many services. There is no annual out-of-pocket maximum, and routine dental, vision and prescription drugs are not automatically included.

PART C

Some retirees choose an alternative to Original Medicare called Medicare Advantage, also known as Part C. They combine Parts A & B, and often include a Part D drug plan.

To enroll in Medicare Advantage, you must be enrolled in Parts A & B.

Go to **page 9** to learn more about Medicare Advantage offerings. →

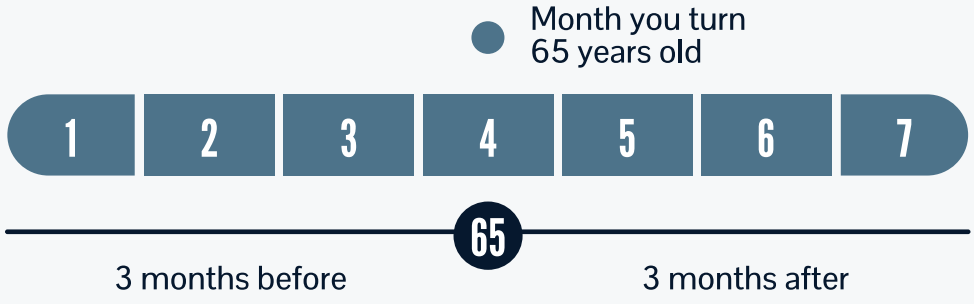
WHEN TO ENROLL IN MEDICARE

Determining your Medicare enrollment window

For most individuals, Medicare eligibility begins during the Initial Enrollment Period (IEP), which starts three months before your 65th birthday and ends three months after your birthday month.

+ **If you are retired** when you turn 65, enrolling in Medicare Part B during this window helps you avoid a lifelong late enrollment penalty.
+ **If you continue working** past age 65 and have health coverage through your employer, you can usually delay enrolling in Medicare Part B and sign up later when you retire without a penalty.

Some people who continue working past 65 choose to enroll in Medicare Part A before they retire. Part A typically has no monthly premium and can help cover hospital stays.



Becoming Medicare-eligible is a qualified life event, which is an opportunity for you to switch health plans outside of Open Season.

See **page 14** for step-by-step enrollment instructions. →

You can change your FEHB enrollment to any plan 30 days before turning 65. You may make an enrollment change under this event only once.

G.E.H.A MAKES MEDICARE BETTER

Maximize your retirement health coverage.

G.E.H.A + MEDICARE PARTS A & B

Pairing G.E.H.A Standard or High coverage with Medicare Parts A & B is like having two coverages in one, with Medicare paying first and your G.E.H.A coverage paying second. This can mean no copays, coinsurance or deductibles — dramatically reducing your out-of-pocket costs.

WHICH G.E.H.A PLAN WORKS BEST WITH MEDICARE?

G.E.H.A's Standard and High plans paired with Medicare will help you get the most coverage. Your benefits will include:

+ **100%** coverage for all covered Medicare services
+ Valuable extras like a vision discount for glasses and contacts[1]
+ A **$2,500** hearing aid benefit
+ G.E.H.A High with Medicare members also receive a **$1,000** Part B premium subsidy to help cover Part B premium costs.

G.E.H.A PRESCRIPTION DRUG PLAN PART D

Our Medicare PDP / EGWP provides comprehensive prescription coverage, helping you save on the medications you need — at no additional cost to your G.E.H.A premium.

1 These benefits are neither offered nor guaranteed under contract with the FEHB Program but are made available to all Enrollees who become members of a G.E.H.A health plan and their eligible family members.

GET MORE WITH MEDICARE ADVANTAGE

Looking for more value from Medicare?

The UnitedHealthcare® G.E.H.A Group Medicare Advantage (PPO) Plan brings together medical and prescription drug coverage — plus extra benefits — in one convenient plan. After enrolling in Medicare Parts A & B, you can add this Medicare Advantage plan to your current G.E.H.A Standard or High plan at any point throughout the year.

United Healthcare Group Medicare Advantage

Enhance your coverage with the G.E.H.A Medicare Advantage Plan:

No out-of-pocket costs

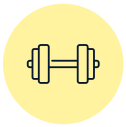
$0 copays for covered medical services

Large national network

Flexibility to see any participating provider

Monthly Part B subsidy

Get a monthly Part B premium subsidy:
+ **$100** High Medicare Advantage
+ **$75** Standard Medicare Advantage



Complimentary gym membership

Renew Active®[1] gym membership to help you stay active

Prescription drug coverage

Look up your medications and search for a participating pharmacy near you

Hearing aid benefit[2]

Access to hundreds of brand name hearing aids and a **$2,500** hearing aid allowance

1 The fitness benefit and gym network varies by plan/area and participating locations may change. The fitness benefit includes a standard fitness membership at participating locations. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine.
2 The plan only covers hearing aids from a UnitedHealthcare Hearing network provider. Other hearing exam providers are available in the UnitedHealthcare network.
Benefits, features, and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.

STANDARD Medicare parts A & B and Medicare Advantage

Plan options	with Medicare	with G.E.H.A Medicare Advantage
Self Only **CODE 314**	**$187.95** per month	Zero additional premium for additional coverage and benefits.
Self Plus One **CODE 316**	**$404.11** per month	
Self and Family **CODE 315**	**$501.47** per month	

These rates do not apply to all Enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.

Plan basics	with Medicare	with G.E.H.A Medicare Advantage
Part B premium subsidy	$0	Receive up to **$900** per year
100% coverage for all covered Medicare services with Medicare A & B primary	$0	$0
Yearly deductible (In-network)	$0	$0
Out-of-pocket maximum[1] (In-network)	**$8,000** for Self Only; **$16,000** for Self Plus One or Self and Family enrollment	$0

Plan extras	with Medicare	with G.E.H.A Medicare Advantage
Over-the-counter medication benefit	Not included	Receive **$40** per quarter on your UCard[2]
Vision discount	Pay only **$20** for an eye exam, plus receive discounts on frames and contact lenses[3]	Pay **$0** for an eye exam, plus receive an allowance toward eyeglasses or contact lenses
Dental benefits	G.E.H.A pays 50% of the cost for two preventive dental visits per year	100% coverage for preventive and diagnostic services, plus additional coverage for other minor and major dental services
Hearing aid allowance	$2,500	$2,500[4]

1 Out-of-pocket maximum excludes premiums, prescription costs, and non-Medicare covered benefits.
2 OTC benefits have expiration timeframes. Call your plan or review your Evidence of Coverage (EOC) for more information.
3 These benefits are neither offered nor guaranteed under contract with the FEHB Program but are made available to all Enrollees who become members of a G.E.H.A Standard plan and their eligible family members.
4 Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider.

While all G.E.H.A plans work with Medicare Parts A & B, G.E.H.A's Standard plan can help maximize your coverage in retirement, along with access to Medicare Advantage.

Medical benefits	G.E.H.A Standard with Medicare — You pay	G.E.H.A Standard Medicare Advantage — You pay
Preventive care	$0	$0
Primary care office visits	$0	$0
Mental health office visits	$0	$0
Specialist office visit	$0	$0
Urgent care facility visit	$0	$0
Emergency room visit	$0	$0
Hospital care; outpatient / inpatient	$0 / $0	$0 / $0
Labs, X-rays and other diagnostic services	$0	$0
Durable medical equipment and diabetic supplies	$0	$0
Chiropractic care	$0 for 20 visits (covered by Medicare)	$0 unlimited visits
Physical, speech and occupational therapy	$0 for 60 visits	$0 unlimited visits

Prescription drug benefits Retail 30-day supply	G.E.H.A Standard + EGWP Prescription Drug Plan	G.E.H.A Standard Medicare Advantage
Tier 1 – Generic	$9[1]	$8
Tier 2 – Preferred brand	25% ($200 max)	$40
Tier 3 – Non-preferred brand	50% ($300 max)	$70
Tier 4 – Specialty	33% ($250 max)	33% ($150 max)

Prescription drug benefits Mail 90-day supply	G.E.H.A Standard + EGWP Prescription Drug Plan	G.E.H.A Standard Medicare Advantage[2]
Tier 1 – Generic	$20[1]	$16
Tier 2 – Preferred brand	25% ($500 max)[1]	$80
Tier 3 – Non-preferred brand	50% ($600 max)[1]	$140
Tier 4 – Specialty (limited to 30-day supply)	33% ($250 max)	33% ($150 max)

1 Cost share is more if using a non-preferred pharmacy.
2 Optum® Home Delivery Pharmacy and Optum Rx are affiliates of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery Pharmacy for medications you take regularly. There may be other pharmacies in our network.

You must continue to pay your G.E.H.A Standard premium if you elect to enroll in the Medicare Advantage Plan, but there is no additional premium for the G.E.H.A Medicare Advantage plan. Benefits, features, and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.

HIGH Medicare parts A & B and Medicare Advantage

Plan options	with Medicare	with G.E.H.A Medicare Advantage
Self Only **CODE 311**	**$423.13** per month	Zero additional premium for additional coverage and benefits.
Self Plus One **CODE 313**	**$938.06** per month	
Self and Family **CODE 312**	**$1,137.89** per month	

These rates do not apply to all Enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.

Plan basics	with Medicare	with G.E.H.A Medicare Advantage
Part B premium subsidy	Receive up to **$1,000** per year	Receive up to **$1,200** per year
100% coverage for all covered Medicare services with Medicare A & B primary	**$0**	**$0**
Yearly deductible (In-network)	**$0**	**$0**
Out-of-pocket maximum[1] (In-network)	**$7,500** for Self Only; **$15,000** Self Plus One or Self and Family enrollment	**$0**

Plan extras	with Medicare	with G.E.H.A Medicare Advantage
Over-the-counter medication benefit	Not included	Receive **$40** per quarter on your UCard[2]
Vision discount	Pay only **$20** for an eye exam, plus receive discounts on frames and contact lenses[3]	Pay **$0** for an eye exam, plus receive an allowance toward eyeglasses or contact lenses
Dental benefits	G.E.H.A pays **$22** per visit for two preventive dental visits per year	100% coverage for preventive and diagnostic services, plus additional coverage for other minor and major dental services
Hearing aid allowance	$2,500	$2,500[4]

1 Out-of-pocket maximum excludes premiums, prescription costs, and non-Medicare covered benefits.
2 OTC benefits have expiration timeframes. Call your plan or review your Evidence of Coverage (EOC) for more information.
3 These benefits are neither offered nor guaranteed under contract with the FEHB Program but are made available to all Enrollees who become members of a G.E.H.A High plan and their eligible family members.
4 Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider.

While all G.E.H.A plans work with Medicare Parts A & B, G.E.H.A's High plan can help maximize your coverage in retirement, along with access to Medicare Advantage.

Medical benefits	G.E.H.A High with Medicare — You pay	G.E.H.A High Medicare Advantage — You pay
Preventive care	$0	$0
Primary care office visits	$0	$0
Mental health office visits	$0	$0
Specialist office visit	$0	$0
Urgent care facility visit	$0	$0
Emergency room visit	$0	$0
Hospital care; outpatient / inpatient	$0 / $0	$0 / $0
Labs, X-rays and other diagnostic services	$0	$0
Durable medical equipment and diabetic supplies	$0	$0
Chiropractic care	$0 for 20 visits (covered by Medicare)	$0 unlimited visits
Physical, speech and occupational therapy	$0 for 60 visits	$0 unlimited visits

Prescription drug benefits Retail 30-day supply	G.E.H.A High + EGWP Prescription Drug Plan	G.E.H.A High Medicare Advantage
Tier 1 – Generic	$9[1]	$3
Tier 2 – Preferred brand	20% ($150 max)	$35
Tier 3 – Non-preferred brand	35% ($200 max)	$65
Tier 4 – Specialty	15% ($150 max)	15% ($150 max)

Prescription drug benefits Mail 90-day supply	G.E.H.A High + EGWP Prescription Drug Plan	G.E.H.A High Medicare Advantage[2]
Tier 1 – Generic	$15[1]	$6
Tier 2 – Preferred brand	15% ($350 max)[1]	$70
Tier 3 – Non-preferred brand	30% ($500 max)[1]	$130
Tier 4 – Specialty (limited to 30-day supply)	15% ($150 max)	15% ($150 max)

1 Cost share is more if using a non-preferred pharmacy.
2 Optum® Home Delivery Pharmacy and Optum Rx are affiliates of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery Pharmacy for medications you take regularly. There may be other pharmacies in our network.

You must continue to pay your G.E.H.A High premium if you elect to enroll in the Medicare Advantage Plan, but there is no additional premium for the G.E.H.A Medicare Advantage plan. Benefits, features, and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.

WHAT'S NEXT?

Take these steps to make sure your benefits and coverage are something you never have to worry about.

1. SIGN UP FOR MEDICARE PARTS A & B

You have a 7-month window to sign up for Medicare before any penalties are applied.

Learn more at medicare.gov

2. TALK TO A G.E.H.A FEDERAL BENEFITS EXPERT

You have access to exclusive federal benefits. Speak to one of our FedVisers to discuss your G.E.H.A health plan options. Standard and High plans work best with Medicare.

Call 1-888-407-7623
Monday through Friday 8 a.m.–8 p.m. Eastern time

3. ENROLL IN MEDICARE ADVANTAGE

If the G.E.H.A Medicare Advantage Plan is right for you, you can enroll by calling the G.E.H.A UnitedHealthcare® Customer Service line at 1-844-491-9898, TTY 711, 8 a.m.–8 p.m. local time, Monday–Friday.

To qualify, you must be enrolled in Medicare Parts A & B with a G.E.H.A Standard or High plan.

4. ENJOY RETIREMENT

Once enrolled in Medicare Advantage, like other G.E.H.A plans, you always have access to our support line. We're here to help with any questions so you can get back to enjoying retirement.

Medicare enrollment windows are time-sensitive.
Even if you're satisfied with your current FEHB plan, reviewing your Medicare choices could uncover additional value or cost savings.

G.E.H.A IS HERE TO HELP

Get expert support in choosing the perfect plan for you.

Our FedViser benefits experts are available to help you find your best-fit plan, provide additional plan details and answer any questions you may have.

Contact us

Reach a FedViser Monday–Friday from 8 a.m.–8 p.m. Eastern time in three easy ways:

- Call 1-888-407-7623
- Meet with a FedViser at geha.com/FEHBRetirementPrep
- Chat live by visiting geha.com

This is a brief description of the features of Government Employees Health Association, Inc.'s health plans. Before making a final decision, please read the G.E.H.A Federal brochures, which are available at geha.com/PlanBrochure. All benefits are subject to the definitions, limitations, and exclusions set forth in the Federal brochures.

For information and changes to G.E.H.A's health plans, see our three plan brochures — RI 71-006 (High and Standard), RI 71-014 (HDHP) and RI 71-018 (Elevate and Elevate Plus) — which are available at geha.com/PlanBrochure

Notice of Summary of Benefits and Coverage (SBC): Availability of Summary Health Information: The Federal Employees Health Benefits (FEHB) Program offers numerous health benefits plans and coverage options. Choosing a health plan and coverage option is an important decision. To help you make an informed choice, each FEHB plan makes available a Summary of Benefits and Coverage (SBC) about each of its health coverage options, online and in paper. The SBC summarizes important information in a standard format to help you compare plans and options. G.E.H.A's SBCs are available on the internet at geha.com/SBC. Paper copies are also available, free of charge, by calling 1-800-821-6136.

To find out more information about plans available under the FEHB Program, including SBCs for other FEHB plans, please visit opm.gov/Insure

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MA-BKT-0226-001

FOUNDED BY FEDERAL EMPLOYEES IN 1937

Our spirit of service dates back nine decades to our founding by railway postal clerks who “passed the hat” to cover each other in times of need. 88 years later, we honor our origin by delivering comprehensive coverage and benefits that go beyond for federal employees, retirees and their families.

Get the coverage that millions of federal employees have counted on through the years

As a member-built organization, our dollars are put back into expanding the coverage that supports and protects those who support and protect our country.

G.E.H.A Government Employees Health Association