



THIS WEBINAR  
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# So Many Choices: Which FEHB Plans Work Best with Medicare Parts A & B

A NARFE Federal Benefits Institute Webinar

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Federal Retirement Benefits Expert

*Sponsored by Aetna*  
*Closed Captioning (CC) is available on the recorded version of this webinar.*





## Order of Topics

### Reviewing Your Options

- Medicare eligibility
- Medicare and FEHB
- Medicare and Something Else
- FEHB alone
- Resources

### Step One: Eliminate the Obvious

- Plans available to you
- Plans must have incentives
- Medicare Advantage and FEHB
- Family considerations

### Step Two: Narrow Your Choices

- Finding Your Top Three
- Side-by-side comparison
- Decision made

### Step Three: Making the Change

- Open Season
- OPM Form 2809
  - Qualifying Life Events

# Reviewing Your Options



# Reviewing Your Options



## Medicare Eligibility

### Age 65 (IEP)

- 7-Month **I**nitial **E**nrollment **P**eriod
  - 3 months before age 65
  - The month of your birthday
  - 3 months after age 65



Part A



Part B

### January – March (GEP)

- 3-Month **G**eneral **E**nrollment **P**eriod
  - Starting January 1, 2023, your coverage will start the month after you sign up
  - Late enrollment penalty may apply



Part B

# Reviewing Your Options



## Medicare Eligibility

### After retirement (SEP)

- 8-Month **S**pecial **E**nrollment **P**eriod
  - May enroll anytime while covered by CURRENT EMPLOYMENT health insurance or within 8 months following retirement.
  - Avoids late enrollment penalty



Part B

### Note:

- Sign up for **Part A** any time after 65.
  - Coverage **starts 6 months back** from
    - when you sign up or
    - apply for SSA benefits
  - Can't start before 65



Part A

# Reviewing Your Options



## Medicare and FEHB

If your yearly income in 2021 (for what you pay in 2023) was		You pay each month in 2023	X 12 months	X two people
File individual tax return	File joint tax return			
\$97,000 or less	\$194,000 or less	<b>\$164.90</b>	\$1,978.80	\$3,957.60
Above \$97,000 up to \$123,000	Above \$194,000 up to \$246,000	<b>\$230.80</b>	\$2,769.60	\$5,539.20
Above \$123,000 up to \$153,000	Above \$246,000 up to \$306,000	<b>\$329.70</b>	\$3,956.40	\$7,912.80
Above \$153,000 up to \$183,000	Above \$306,000 up to \$366,000	<b>\$428.60</b>	\$5,143.20	\$10,286.40
Above \$183,000 up to \$500,000	Above \$366,000 up to \$750,000	<b>\$527.50</b>	\$6,330.00	\$12,660.00
\$500,000 or above	\$750,000 or above	<b>\$560.50</b>	\$6,726.00	\$13,452.00



# Reviewing Your Options



## Medicare and FEHB

### Is Part B Worth It?

- Must be enrolled to have Medicare Advantage
- Many FEHB plans provide incentives to enroll
- Medicare caters to the needs of the elderly

### The Overall Opt-out Rate is 1%

- Total number of opt-out providers: 28,700
  - 3 states (Alaska, Colorado, Wyoming) opt-out rates at or above 2.0%
  - 7.2 percent of psychiatrists opted out of Medicare
- Total non-institutional providers: 1,444,196
- 6,266 hospitals participate in Medicare (all of them) along with 14,908 skilled care facilities



# Reviewing Your Options



## Medicare and Something Else

### Original Medicare **Plus** ...

Part A and Part B **PLUS**

Medicare Supplement + Part D

**Or** FEHB as secondary payer

**Or** TRICARE For Life

### Medicare Advantage

**All-in-one / Part C**

Provider submits claim to Medicare Advantage organization

Required to enroll in Medicare Parts A and B

Automatic enrollment in Part D (usually)





# Reviewing Your Options: FEHB Alone



## When you are age 65 or over and do not have Medicare

- Under the FEHB law, FEHB plans must limit payments for inpatient hospital care and physician care to those payments you would be entitled to if you had Medicare
- Your physician and hospital must follow Medicare rules and cannot bill you for more than they could bill you if you had Medicare
- You and the FEHB benefit from these payment limits. Outpatient hospital care and non-physician-based care are not covered by this law; regular plan benefits apply

### These rules apply if you:

- are age 65 or over; and
- do not have Medicare Part A, Part B, or both; **and**
- have this Plan as an annuitant or as a former spouse, or as a family member of an annuitant or former spouse; **and**
- are not employed in a position that gives FEHB coverage.



# Reviewing Your Options: FEHB Alone



## Delayed decision due to IRMAA

- **Example:** Single / Individual Tax Return
  - IRMAA rate for Part B: \$329.70 (income between \$123,000 and \$153,000)
  - $\$329.70 \times 12 = \$3,956.40$  / year for Part B
  - $\$164.90$  per month  $\times$  10% late enrollment =  $\$16.49$  per month permanent penalty
  - $\$3,956.40 / \$16.49 = 240$  months / 12 = 20 years of paying the penalty to equal 1 year of Part B premiums

## Forever Hold Your Peace

1 year	=	10% penalty
2 years	=	20% penalty
3 years	=	30% penalty

## Postal Reform

- Details coming before 2025 when new law takes effect
- Postal retirees with FEHBP have new opportunity to add Part B without “late enrollment” penalty
- If you are or a postal annuitant as of January 1, 2025, or a postal employee who is at least 64 as of January 1, 2025, you will not be required to enroll in Part B



# Reviewing Your Options



## Resources

### Health Plan Forms:

- [Medicare: Sign up or Change Plan Information](#)
- [TRICARE FOR LIFE](#)
- [RI 79-9 FEHB Cancellation/Suspension](#)

UNITED STATES  
OFFICE OF PERSONNEL MANAGEMENT  
RETIREMENT OPERATIONS  
WASHINGTON, DC 20415-3532

*For CSRS and FERS Annuitants, Survivor Annuitants, and Former Spouse Annuitants*

	Date
	Claim number
	CS

**Health Benefits Cancellation/Suspension Confirmation**

You asked us to cancel or suspend your enrollment in the Federal Employees Health Benefits Program (FEHBP). Please read the front and back of this form and check only the ONE block that applies to you. Please note that the Affordable Care Act (ACA) requires that individuals maintain minimum essential coverage (MEC). For more information, please visit the IRS website at [www.irs.gov/uo/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision](http://www.irs.gov/uo/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision). Because many annuitants who cancel their FEHBP enrollments will not be eligible to reenroll, we want to be sure you are fully informed about the effect of any action you take. We will not process your request until you sign, date, and return this form indicating that you understand how your request will affect your future FEHBP enrollment eligibility. **Any Questions? Call OPM at 1-888-767-6738.**

A.  **I am cancelling my FEHBP enrollment to be covered under a family member's FEHBP enrollment.**  
If you are cancelling your FEHBP enrollment because you will be covered under your spouse's FEHBP enrollment and your spouse is a Federal employee, please include with this form a copy of your spouse's SF 2809, *Health Benefits Registration Form*, showing the change to a family enrollment. If your spouse is an annuitant, please give us your spouse's name and annuity claim number.

Spouse's name (Last, first, middle)	Spouse's claim number
-------------------------------------	-----------------------

If you cancel FEHBP coverage for this reason, we will coordinate the effective date with the effective date of your new coverage under your spouse's enrollment.

**Reenrollment eligibility:** As long as you are continuously covered as a family member on your spouse's FEHBP enrollment, you will be eligible to resume your own enrollment if your coverage under your spouse's enrollment ends for any reason.

B.  **I am cancelling my FEHBP coverage for reasons other than the situation described in part A.**  
We will cancel your enrollment effective the end of the month in which we receive this signed and dated form. Any health benefits premiums you pay for a period after the cancellation effective date will be refunded in one of your future monthly annuity payments.

**Reenrollment eligibility:** If you check this block to cancel your FEHB enrollment, you will not be eligible to reenroll in the FEHBP. Additionally, if you cancel your FEHBP enrollment, you and any family members covered by your enrollment will not be entitled to the free 31-day extension of coverage to convert to an individual health benefits contract or to enroll for Temporary Continuation of Coverage.

I certify that I have read and understand the information on cancelling FEHBP coverage. I understand that if I checked block B, I will never again be eligible to enroll in the Federal Employees Health Benefits Program.		
Signature	Daytime Telephone No. (including area code)	Date

**SUSPENSION INFORMATION IS SHOWN ON THE REVERSE**

RI 79-9  
Revised August 2014

Previous editions are not usable.



# Step One: Eliminate the Obvious



# Step One: Eliminate the Obvious



## Plans Available to You

### Your ZIP Code and Agency Determines Your Options

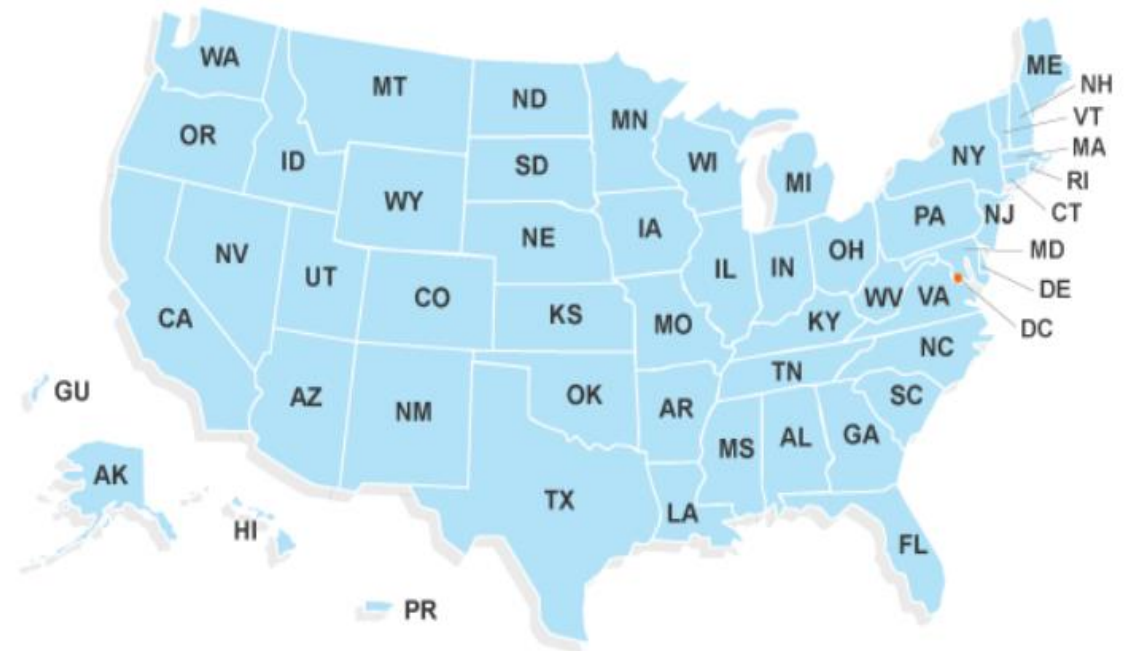
#### Healthcare

##### PLAN INFORMATION

##### [FEHB Plan Information for 2023](#)

##### [FEHB Plan Information for 2023](#)

Choosing a state below will take you to a list of all plans available in that state, as well as links to the plan brochures, changes for each plan from the previous year, information on plan patient safety programs, and links to the plan provider directories.



# Step One: Eliminate the Obvious



## Plans Available to You

- There are hundreds of plans available.
- One of the most important steps you can take is reducing your options.

Reduce **271** plans down to less than **20** or **30** plans  
38 in DC and 36 in Illinois

### Nationwide *Fee-for-Service* Open to All

Plan - Plan Code	Plan Brochure	Plan Brochure Download	Provider Directory	Plan Website
APWU Health Plan - 47	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
Blue Cross and Blue Shield Service Benefit Plan Basic Option - 11	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
Blue Cross and Blue Shield Service Benefit Plan FEP Blue Focus - 13	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
Blue Cross and Blue Shield Service Benefit Plan Standard Option - 10	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
GEHA Benefit Plan - 31	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
GEHA HDHP - 34	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
GEHA Indemnity Benefit Plan - 25	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
MHBP Consumer Option - 48	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
MHBP Standard Option - 45	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
MHBP Value Plan - 41	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
NALC Health Benefit Plan - 32	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
NALC Health Benefit Plan - KM	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>
SAMBA Health Benefit Plan - 44	<a href="#">Brochure Link</a>	<a href="#">Download PDF</a>	<a href="#">Go</a>	<a href="#">Go</a>



# Step One: Eliminate the Obvious



## Plans Must Have Incentives

### Wrap-Around Coverage

- Waive deductible, copays and coinsurance when Medicare pays first

### Part B Reimbursement

- Provides health fund or direct reimbursement for some of Part B premium

### Prescription Drug Coverage

- Part B does not cover outpatient prescription drugs
- Choose a plan that meets your prescription drug needs

### Flexibility

- Ability to use doctors of your choice
- Overseas coverage
- National or regional coverage

# Step One: Eliminate the Obvious



## Plans Must Have Incentives

### Plans will offer Medicare Advantage option with Part B reimbursement in 2023

- HMO
  - Kaiser Permanente - Georgia (Standard)
  - Kaiser Permanente - Mid-Atlantic States (Standard)
  - UPMC Health Plan (Standard)
- Restricted National Plan
  - Foreign Service Benefit Plan (High)
- Plans open to all
  - NALC Health Benefit Plan (High)
  - SAMBA Health Benefit Plan (High and Standard)





# Step One: Eliminate the Obvious



## Plans Must Have Incentives

**These plans will continue to offer Part B reimbursement when enrolled in Part B and/or Medicare Advantage:**

- HMO
  - Health Alliance Plan (High & Standard)
  - Health Partners (High)
  - Humana Coverage First (Value)
  - Medical Mutual of Ohio Southwest (Standard)
  - Medical Mutual of Ohio Northeast (Standard)
  - MD I.P.A. (High)
  - UPMC Health Plan (Standard)
- Restricted National Plan
  - Compass Rose (High)
  - Rural Carrier Benefit Plan (High)
- Plans open to all
  - APWU (High)
  - BC/BS Service Benefit Plan (Basic)
  - GEHA (High)
  - MHBP (Standard)



# Step One: Eliminate the Obvious



## Plans Must Have Incentives

### High Option with Medicare Advantage provides Part B reimbursement

- Kaiser Permanente - Colorado (High & Standard)\*
- Kaiser Permanente - Georgia (High)\*
- Kaiser Permanente - Hawaii (High)\*
- Kaiser Permanente - Mid-Atlantic States (High or Standard)\*
- Kaiser Permanente – Fresno, California (High & Standard)\*
- Kaiser Permanente - Northern California (High & Standard)\*
- Kaiser Permanente - Southern California (High & Standard)\*
- Kaiser Permanente - Northwest (High & Standard)\*
- Kaiser Permanente - Washington Core (High & Standard)\*

High or Standard	Range of Premiums
Standard Self	\$121.34 - \$243.42
Standard Self + 1	\$270.59 - \$671.97
Standard Self + fam	\$270.59 - \$561.69
High Self	\$173.70 - \$430.08
High Self + 1	\$387.37 - \$1,155.48
High Self + fam	\$387.37 - \$1,045.20

\*Senior Advantage 2 up to \$250 / month / person (for certain areas, only available with high option)

# Step One: Eliminate the Obvious



## Plans Must Have Incentives

**These plans will continue to offer Part B reimbursement when enrolled in Part B and Medicare Advantage:**

- UnitedHealthcare Choice Open Access HMO (High)
- UnitedHealthcare Choice Plus Advanced (Tampa, Orlando, Miami, and Atlanta) (Value)
- UnitedHealthcare Choice Plus Advanced (Chicago, San Antonio, DC, Northern Virginia, and Maryland) (Value)
- UnitedHealthcare Choice Plus Primary - East Region (High)
- UnitedHealthcare Choice Plus Primary - West Region (High)
- UnitedHealthcare Choice Primary - East Region (High)
- UnitedHealthcare Choice Primary - West Region (High)

# Step One: Eliminate the Obvious



## Plans Must Have Incentives

### Aetna Direct

- Designated for retirees with Medicare A & B
- Low Premiums
- A **\$900 (\$1,800** for +1 and Family) fund to help you save money on your Part B premiums
- Waived deductibles and coinsurance for medical care when Medicare Parts A and B are primary
- Prescription coverage
- Seamless coordination of claims — no claims forms
- Nationwide **network** and coverage
- No referrals

### Aetna Medicare Advantage

- Offers Part B reimbursement when enrolled in Medicare Advantage
- Low premiums
- **\$1,200** Medicare Part B premium reduction for eligible members (**\$2,400** for Medicare couple)
- **Added programs such as Silver Sneakers and Healthy Home Visits**
- \$0 deductible and coinsurance for medical care
- Prescription copays as low as \$2
- No claim forms
- Nationwide coverage
- No referrals

# Step One: Eliminate the Obvious



## Plans Must Have Incentives

- There are 10 National Plans with Medicare enrollment incentives.
- There are 7 National Plans requiring Medicare Advantage to earn incentives.
- There are 8 HMOs Offering Incentives



# Step One: Eliminate the Obvious



## Medicare Advantage and FEHB

### Things to Love About this Option

- No extra cost
- Continue FEHB coverage
- Reimbursement for Part B
- Perks, for example:
  - Transportation
  - Meal Delivery
  - Silver Sneakers



# Step One: Eliminate the Obvious



## Medicare Advantage and FEHB

### Things to Be Aware of:

- Be sure to do 2-Step enrollment
- 1 Card
  - The plan, not CMS will pay your providers
- Check drug formulary
  - You may need prior authorization or a new prescription for mail order medications
- Part D IRMAA
- Providers Must Accept Plan
  - Accepting the plan means the doctor is willing to see the retiree and bill \_\_\_\_\_ (Aetna, UnitedHealthcare, etc.)



# Step One: Eliminate the Obvious



## Medicare Advantage and FEHB

### Contact Your Providers / List of Questions

- Do you accept Medicare patients?
  - In some practices, new patients may be limited, however, if you are a current patient, you should be able to stay
  - Do you accept my plan?





# Step One: Eliminate the Obvious



## Family Considerations

### Spouse Under age 65

- Make sure the plan provides incentives for Medicare spouses, and adequate coverage and benefits for the spouse not yet eligible.

### Children Under 26

- All FEHB plans are open to eligible family members, however some plans may work better than others

### Spouse Employed in Federal Service

- If one spouse is employed, it may be best for that spouse to carry FEHB for the family
  - Employees pay with pre-tax dollars
  - Allows spouse over 65 to delay Medicare without late enrollment penalty while covered by “current employment” health coverage

### Spouse with Tricare

- Suspend FEHB in retirement
- Delay TFL and Part B while employed
- Primary FEHB (while employed) or Medicare, then Tricare as secondary or third payer

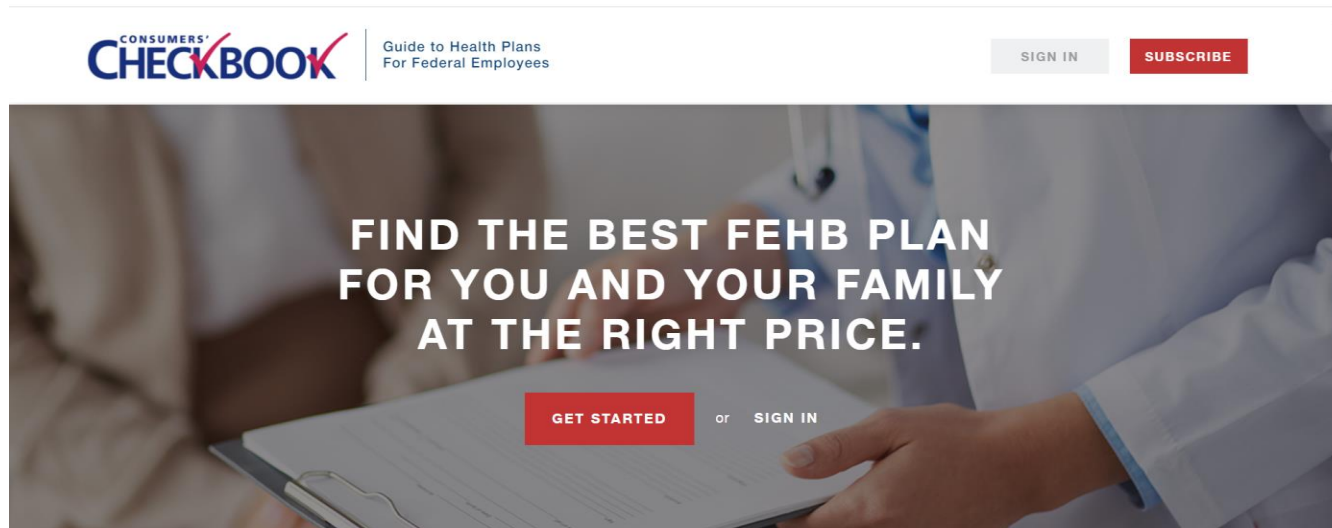
# Step Two: Narrow Your Choices



# Step Two: Narrow Your Options



## Resources and Benefits



[www.checkbook.org/newhig2/hig.cfm](http://www.checkbook.org/newhig2/hig.cfm)

Compare plan options and costs under Medicare

- ❖ **2023 Guide to Health Plans for Federal Employees**
- ❖ **NARFE Members save 20% using code 20NARFE**



# Step Two: Narrow Your Choices



## Finding Your Top Three

**CONSUMERS' CHECKBOOK** | Guide to Health Plans For Federal Employees

[READ ADVICE](#) | [HELP](#) | [LOGOUT](#)

[Start Again](#) | [Print Comparison Report](#) | [Plan Brochures](#)

STEP 1 Who will be covered | STEP 2 Medicare | STEP 3 Find My Doctor | STEP 4 Compare Plans | STEP 5 Enroll

[Return to Main Plan Comparison Table](#)

Basic Plan Information and Overall Ratings	Aetna Direct CDHP	Blue Cross Basic	GEHA-Hi	MHBP-Std
	Yearly Cost Estimate:\$4,170 Yearly Cost in a Bad Year:\$5,450	Yearly Cost Estimate:\$4,630 Yearly Cost in a Bad Year:\$6,260	Yearly Cost Estimate:\$5,440 Yearly Cost in a Bad Year:\$7,820	Yearly Cost Estimate:\$5,130 Yearly Cost in a Bad Year:\$6,360
<a href="#">Print</a>	<a href="#">Enroll</a>	<a href="#">Enroll</a>	<a href="#">Enroll</a>	<a href="#">Enroll</a>
Plan Type	CDHP	PPO	PPO-FEE	PPO-FEE
Plan Code	N61	111	311	454
Summary of Enrollment Limitations	None	None	None	None
Overall Quality Score				

Premium	Aetna Direct CDHP	Blue Cross Basic	GEHA-Hi	MHBP-Std
Monthly FEHB + Med B Premium	\$325	\$353	\$394	\$339
Annual FEHB + Med B Premium	\$3,900	\$4,230	\$4,730	\$4,070
Part B Rebate	None	\$800	\$1,000	None
Savings Account Contribution	Aetna Direct CDHP	Blue Cross Basic	GEHA-Hi	MHBP-Std
Amount	\$900	NA	NA	NA
Annual FEHB + Med B Premium	\$3,900	\$4,230	\$4,730	\$4,070

# Step Two: Narrow Your Choices



## Finding Your Top Three

### Compare FEHB with Medicare Advantage options



Guide to Health Plans  
For Federal Employees

[READ ADVICE](#)

[HELP](#)

[LOGOUT](#)

[Start Again](#)

[Print Comparison Report](#)

[Plan Brochures](#)



[Return to Main Plan Comparison Table](#)

Basic Plan Information and Overall Ratings	Aetna Advantage (Medicare Advantage) <sup>?</sup>	MHBP - Std (Medicare Advantage) <sup>?</sup>	NALC-Hi (Medicare Advantage) <sup>?</sup>	SAMBA-Std (Medicare Advantage) <sup>?</sup>
	Yearly Cost Estimate:\$3,310 Yearly Cost in a Bad Year:\$4,390	Yearly Cost Estimate:\$4,010 Yearly Cost in a Bad Year:\$4,960	Yearly Cost Estimate:\$4,290 Yearly Cost in a Bad Year:\$4,980	Yearly Cost Estimate:\$4,030 Yearly Cost in a Bad Year:\$5,050
Monthly FEHB + Med B Premium <sup>?</sup>	\$290	\$339	\$388	\$348
Annual FEHB + Med B Premium <sup>?</sup>	\$3,480	\$4,070	\$4,660	\$4,170



# Step Two: Narrow Your Choices



## Finding Your Top Three

### Blue Cross and Blue Shield Service Benefit Plan

- **Self Only BC/BS Basic: \$187.78/month**
  - \$800 Part B reimbursement
  - Must use Preferred Providers
- **Self Only MHBP Standard: \$174.65/month**

#### Blue Cross and Blue Shield Service Benefit Plan

Type of Enrollment	Enrollment Code	Premium Rate			
		Biweekly		Monthly	
		Gov't Share	Your Share	Gov't Share	Your Share
Nationwide					
Standard Option Self Only	104	\$259.72	\$142.40	\$562.73	\$308.53
Standard Option Self Plus One	106	\$560.52	\$318.85	\$1,214.46	\$690.84
Standard Option Self and Family	105	\$611.42	\$347.89	\$1,324.74	\$753.77
Nationwide					
Basic Option Self Only	111	\$259.72	\$86.67	\$562.73	\$187.78
Basic Option Self Plus One	113	\$560.52	\$217.90	\$1,214.46	\$472.12
Basic Option Self and Family	112	\$611.42	\$237.91	\$1,324.74	\$515.48

#### 2023 MHBP Standard Option and Value Plan Rate Information

Type of Enrollment	Enrollment Code	Premium Rate			
		Biweekly		Monthly	
		Gov't Share	Your Share	Gov't Share	Your Share
Nationwide					
Standard Option Self Only	454	\$241.82	\$80.61	\$523.95	\$174.65
Standard Option Self Plus One	456	\$556.64	\$185.54	\$1,206.05	\$402.01
Standard Option Self and Family	455	\$561.98	\$187.33	\$1,217.63	\$405.88



# Step Two: Narrow Your Choices



## Finding Your Top Three Comparing HMO Options

<https://www.uhcfeds.com/>




**Visit the Virtual Benefits Fair During Open Season**

Chat with our UnitedHealthcare experts during the FedPoint Virtual Benefit Fair:


- Tuesday, November 15, 2022  
10 a.m.–5 p.m. (ET)
- Tuesday, November 22, 2022  
10 a.m.–5 p.m. (ET)
- Thursday, December 1, 2022  
10 a.m.–5 p.m. (ET)
- Thursday, December 8, 2022  
10 a.m.–5 p.m. (ET)

Register at [BENEFEDS.com](https://www.uhcfeds.com/)  
Federal Benefits Open Season November 14 - December 12, 2022  
Live Chat Available November 15 | November 22 | December 1 | December 8

[Register Today](#)



### Plan Basics 2023



Take advantage of all your Medicare Advantage plan has to offer

**UnitedHealthcare Retiree Advantage Plan**  
UnitedHealthcare® Group Medicare Advantage (PPO)  
Group Number: 13712

Effective: January 1, 2023 through December 31, 2023

United Healthcare



# Step Two: Narrow Your Choices



## Side-by-Side Comparison

	Plan A	Plan B	Plan C
Hearing Aids	No Benefit	\$3,000 / every 3 years	\$1,000 / every 5 years
Skilled Care	30 days	60 days	No benefit
Physical Therapy	20 visits	40 visits	24 visits
Dental	No benefit	Little coverage	Some coverage
Vision	Once / year with frames allowance	No benefit	No benefit
Prescriptions	My prescriptions are generic	Name brand drugs: Search carefully	Part B covers many specialty medications
Other	??	??	??



# Step Three: Making the Change



# Step Three: Making the Change



## Open Season

The screenshot shows the OPM.gov website header with the OPM logo and navigation links: ABOUT, POLICY, INSURANCE, RETIREMENT, SUITABILITY, AGENCY SERVICES, NEWS. A search bar and an 'ALERT' banner are also visible. The main content area features the text: 'Open Season is November 14 – December 12, 2022' and 'Sign up by December 12'. Below this is a 'COUNTDOWN TO THE START OF OPEN SEASON' timer showing 00 DAYS, 17 HRS, 29 MINS, and 34 SECS. A 'Please note' section states: 'The Federal Benefits Open Season ends at 11:59pm Eastern Time on Monday December 12, 2022 for the Federal Employees Dental and Vision Insurance Program (FEDVIP) and the Federal Flexible Spending Account Program (FSAFEDS). Open Season for the Federal Employees Health Benefits Program (FEHB) ends at 11:59pm, per the location of your electronic enrollment system, on Monday December 12, 2022.'

<https://www.opm.gov/healthcare-insurance/open-season>

# Step Three: Making the Change



## Open Season

The screenshot shows the OPM Services Online homepage. At the top, there's a navigation bar with the OPM logo, "Services Online" text, a search bar, and links for "QUICK LINKS" and "PRIVACY STATEMENT". The main heading is "WELCOME TO OPM RETIREMENT SERVICES ONLINE". Below this, a paragraph states: "Services Online lets annuitants (federal retirees or their spouses, ex-spouses, and children) manage their account online. Your account is securely protected by the U.S. Office of Personnel Management (OPM)."

There are two main columns of content:

- SIGN IN:** A prominent blue button says "Sign in with LOGIN.GOV". Below it, a section titled "We've changed how you will login to Services Online!" explains that users must now use a Login.gov account. It includes a "Need to create a Login.gov account?" section with instructions and links to "Learn about our new login process", "How to login to Services Online", and "FAQs about Login.gov and Services Online".
- IMPORTANT LINKS:** A list of links with external icons:
  - FEHB Open Season Online (Closes Dec. 12, 2022) - highlighted in yellow
  - Combined Federal Campaign (Closes Jan. 15, 2023)
  - Report a missing annuity payment
  - Report an annuitant death
  - Report a federal employee death
  - Self-certify student enrollment
  - Go to OPM.gov
  - First time here? Get started with Services Online
  - Contact us for more support.

### Self-Service & Customer Service



#### Services Online

Services Online lets annuitants (federal retirees or their spouses, ex-spouses, and children) manage their account online.

[View More](#)



#### Customer Service Center

Get answers to your questions, learn about popular topics, and find resources for more support.



# Step Three: Making the Change



## Open Season

*This Site Can Only Be Used By Federal Retirees, Survivor Annuitants, or Former Spouse Annuitants*

The 2022 Federal Benefits Open Season will be held  
November 14, 2022, through December 12, 2022

**Open Season Express at our toll-free number, 1-800-332-9798**

**OPM does not retain registration information for your FEHB on-line account from previous Open Seasons, therefore, you must register every year.**

- Important Notice - your premium rate for 2023 may have increased.
- Please refer to your plan brochure for more information about how your plan's benefits and rates have changed.
- To speak to someone about the increase, please call 202-606-1234.
- Make sure to update your mailing address with OPM to ensure timely receipt of your Open Season materials.

[Click here to Register for 2022](#)

or

[Sign In if previously registered for 2022](#)



# Step Three: Making the Change



## OPM Form 2809

### Who May Use OPM Form 2809

- Annuitants retired under CSRS or FERS
- Survivor annuitants under CSRS or FERS
- Former spouses
- Children and former spouses who are eligible for temporary continuation of coverage

**FEHB** Federal Employees Health Benefits  
Form Approved  
OMB No. 3206-0141

### Health Benefits Election Form

**Who May Use OPM Form 2809**

- Annuitants retired under the Civil Service Retirement System (CSRS) or Federal Employees Retirement System (FERS)
- Survivor annuitants under CSRS or FERS
- Former spouses
- Children and former spouses who are eligible for temporary continuation of coverage

**Instructions for Completing OPM 2809**  
*Type or print firmly.*

**Part A — Enrollee and Family Member Information.**  
You must complete this part.

Item 1. Enter your legal name.  
Item 2. Provide your Social Security number.  
Item 3. Enter your date of birth.  
Item 4. Enter your sex.  
Item 5. If you are separated but not divorced, you are still married.  
Item 6. Enter your emailing address.  
Item 7. If you have Medicare, check which Parts you have, including prescription drug coverage under Medicare Part D.  
Item 8. If you have Medicare, enter your Medicare Claim Number. This number is on your Medicare card.  
Item 9. If you are covered by other health insurance (private, state, Medicaid, Peace Corps, TRICARE, CHAMPVA, or another FEHB enrollment), either in your name or under a family member's policy, check yes and complete item 10.  
TRICARE is a health care program for active duty and retired members of the uniformed services, their families, and survivors. This includes TRICARE for Life for members age 65 and older.  
Item 10. Select or write the name of any other insurance that covers you.  
Item 11. If applicable, provide your email address.  
Item 12. Provide your day time telephone number.  
If your enrollment is for Self and Family, complete information for your family members. (If you need extra space for additional family members, list them on a separate sheet and attach.)  
The instructions for completing items 13 through 24 for your initial family member also apply to the information you provide for additional family members in items 25 through 48.  
Item 14. Please provide Social Security numbers for your dependents, if they have one. If your dependents do not have Social Security numbers, leave blank; benefits will not be withheld. (See Privacy Act Statement on page 4.)

Item 15. Provide the date of birth of the family member.  
Item 16. Provide sex of family member.  
Item 17. Provide the code which indicates the relationship of each family member to you.

Code	Family Relationship
01	Spouse
19	Child under age 26
09	Adopted Child
17	Stepchild
10	Foster Child
09	Disabled child age 26 or older who is incapable of self-support because of a physical or mental disability that began before his/her 26th birthday.

Item 18. If your family member does not live with you, enter his/her home address.  
Item 19. If a family member has Medicare, check which Parts he/she has, including prescription drug coverage under Medicare Part D.  
Item 20. If your family member has Medicare, enter his/her Medicare Claim Number. This Number is on his/her Medicare card.  
Item 21. Indicate whether the family member has health coverage other than Medicare.  
Item 22. If a family member has TRICARE (see item 9), or other group insurance (private, state, Medicaid, Peace Corps, or another FEHB enrollment), check the box. Give the name and policy number of any other insurance this family member has.  
Item 23. Enter email address, if applicable, for your spouse or adult child.  
Item 24. Enter the preferred telephone number, if applicable, of your spouse or adult child.

**Family Members Eligible for Coverage**  
Unless you are a former spouse or survivor annuitant, family members eligible for coverage under your Self and Family enrollment include your spouse and your children under age 26. Eligible children include your legitimate or adopted children, step children, recognized natural children, or foster children, who live with you in a regular parent-child relationship.  
Other relatives (for example, your parents) are *not* eligible for coverage even if they live with you and are dependent upon you.  
If you are a former spouse or survivor annuitant, family members eligible for coverage under your Self and Family enrollment are the natural or adopted children under age 26 of **both you and your former or deceased spouse.**

Previous editions are not usable. 1 OPM Form 2809 Revised December 2013



# Step Three: Making the Change



## Qualifying Life Event

### Table of Permissible Changes in FEHB Enrollment

- Enrollment may be cancelled or changed from *+1 or family to self only* at any time
- Qualifying Life Events (QLEs):
  - QLE 2A – 2M Annuitant / Survivor Annuitant
  - QLE 3A – 3K Former spouse (spouse equity provisions)
  - QLE 4A – 4I TCC for former spouses and children
- 2L, 3J, 4I On becoming eligible for Medicare (once / life)



# Step Three: Making the Change



## Qualifying Life Event

- Using Open Season Express by calling 1-800-332-9798.
- Sending regular mail (**Postmarked no later than final date of Open Season**) to:

Office of Personnel Management  
Open Season Processing Center  
P.O. Box 5000  
Lawrence, KS 66046-0500

**When using this option**, please clearly state your Open Season request. If you are making an enrollment change, be sure to tell us the plan you want, the type of coverage (Self Only, Self Plus One or Self and Family), and the enrollment code. Remember to include your annuity claim number and social security number on your request. If you are choosing Self Plus One or Self and Family coverage, we will also need your eligible family member's information and other insurance information as specified in the instructions mailed to you at the beginning of Open Season.



# Step Three: Making the Change



## Open Season

### To get help and enroll:

- Office of Personnel Management
  - [www.opm.gov/insure](http://www.opm.gov/insure)
- Federal Dental and Vision Insurance Program (FEDVIP)
  - [www.benefeds.com](http://www.benefeds.com)
- Flexible Spending Account Program (FSA) **Employees Only**
  - [www.fsafeds.com](http://www.fsafeds.com)
- Contact OPM by phone or mail (call early for fastest service)
  - <https://www.opm.gov/retirement-center/>





# Step Three: Making the Change



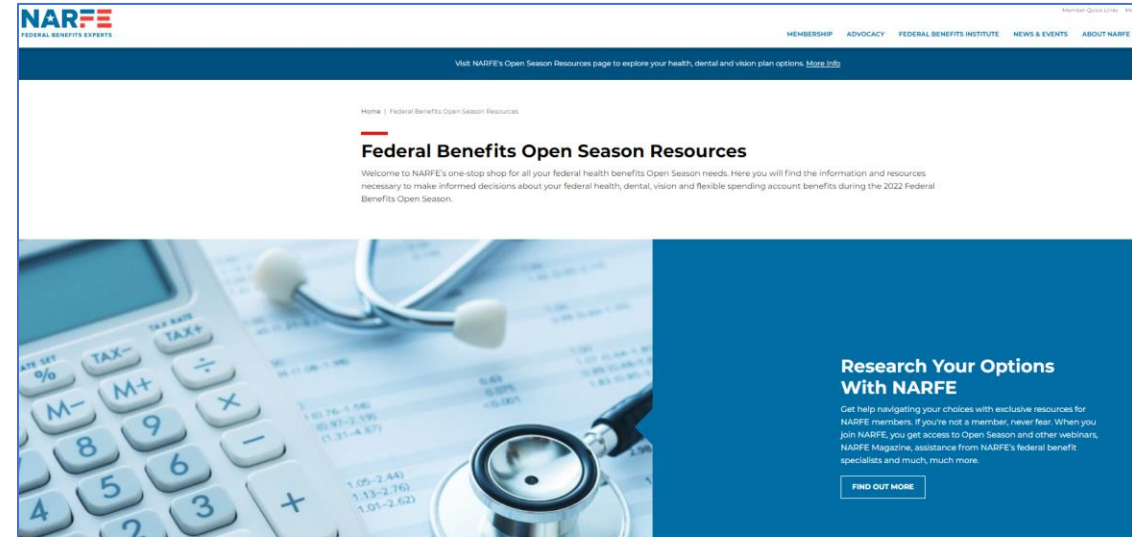
## Open Season and NARFE

To learn more about Open Season, visit:

<https://www.narfe.org/open-season/>

We provide information on/with:

- Plans
- Premiums
- Webinars
- Articles



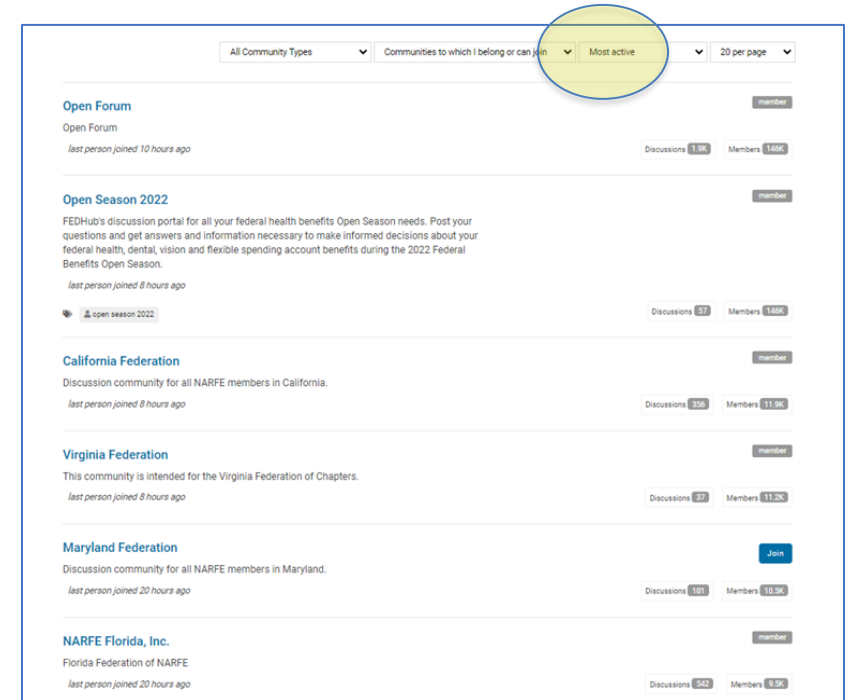
# Step Three: Making the Change



## Open Season and NARFE

### To access NARFE's Open Season Forum:

- Sign into [www.narfe.org](http://www.narfe.org)
- Go to the “For Members” area and find the link to FEDHub.
- Once inside, go to Suggested Communities and search “Most Active”.



# Step Three: Making the Change




## Open Season and NARFE

**Ask questions and find out about other NARFE members and their experience.**

4. RE: What has been your experience with Medicare and FEHB?


Posted 28 days ago  
Edited by WAYNE DEVRIES 27 days ago

  
[WAYNE DEVRIES](#)  
Actions

My Wife and I have years ago for \$800 the S.S. WEP). Wra so far. We have alv choice.  
Self + 1 is now abc Considering GEHA appears to be as g However, w/Stand: \$150/mo. in 2023. May be able to dro w/Standard. Am I missing anytl

5. RE: What has been your experience with Medicare and FEHB?


Posted 27 days ago

  
[Evelyn J Seabrook](#)  
Actions

I have had GEHA for many years as I enrolled wh GEHA because it was the only health insurance t for medical treatment if you were home or if you state. (There have always been certain provision United States.) That was an important factor bec another state, and I needed to visit as often as I GEHA. Three months prior to my 65th birthday I Medicare. This combination of insurances worke interest in changing any of these options. I have have doctor's appointments, I do not have to ope doctor recently and, needed to pay a co-pay for c was processed, I received a full refund. A portior for. Surgeries are fully paid by both insurances. C routinely paid in full, or as requested. I don't have rebate of \$600.00. I get financial credit for diagn to pay for prescriptions. There are some diagnos am on the latter side of age 75 and, that is an ex I am satisfied with GEHA. Even if the premiums i have absolutely no interest in leaving GEHA.

2. RE: What has been your experience with Medicare and FEHB?

Posted 28 days ago

  
[Ken Sosne](#)  
Actions

Tammy

I just switched to BC/BS Basic from BC/BS Standard.

Under standard with Medicare it worked very well and I had no co-pays except for prescriptions not covered by Medicare. BC/BS picks that up.It worked very well.

Now that I switched I did get back \$800 in Medicare rebates from BC/BS and one needs to contact Wageworks to set up the direct deposit of this incentive. Wageworks is on the web.

With Plan 111 and Medicare it is too soon to tell but appears to be cost saver \$173 per month compared to \$262. Rates are rising for 2023.

In my limited experience BC/BS basic with Medicare as primary is a good choice.



# Contact us to find out how you can save:




**Susan Allgood:**

- [sgallgood@cvshealth.com](mailto:sgallgood@cvshealth.com)
- **615-465-9241**

Schedule a one-on-one callback at  
[AetnaFedsLive.com](https://www.aetna.com/life/retireeplans)

View plan information at  
[AetnaFeds.com/RetireePlans](https://www.aetna.com/life/retireeplans)



Get the coverage  
and savings you're  
looking for.

Aetna offers two  
affordable health care  
plans designed for  
federal retirees with  
Medicare Parts A & B.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company. This is a brief description of the features of this Aetna health benefits plan. Before making a decision, please read the plan's applicable federal brochure(s). All benefits, limitations and exclusions set forth in the federal brochure. For more information about Aetna plans, refer to [aetnafeds.com](https://www.aetna.com).

19.12.432.1 (4/21)

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# Thank You!

A NARFE Federal Benefits Institute Webinar  
*Presented by Tammy Flanagan*  
*Email [fedbenefits@narfe.org](mailto:fedbenefits@narfe.org)*

*Closed Captioning (CC) is available on the recorded version of this webinar.*

