



GEHA[®]

Government Employees
Health Association

2024 GEHA Medicare benefits

Learn how GEHA's
medical plans
work with your
Medicare benefits.

NEW for 2024

GEHA Medicare
Advantage Plans



[geha.com](https://www.geha.com)

833.362.GEHA (4342)

Get help choosing the right plan

Contact a FedViser benefits expert today.
Your benefits. Your adviser. Your advocate.



Meet one-on-one with a FedViser benefits expert to help answer your questions

geha.com/Connect



Chat online

Chat or text with a FedViser benefits expert in real time Monday–Friday, 7 a.m.–7 p.m. Central time.

geha.com



Call us

Talk to a FedViser benefits expert Monday–Friday, 7 a.m.–7 p.m. Central time.

[833.362.GEHA \(4342\)](tel:833.362.GEHA)

Tools to help you find the right plan for your needs



Plan recommender tool

Answer a few questions to see a plan that matches your individual or family needs.

geha.com/Select-A-Plan



Compare plans

Easily compare GEHA's medical plans.

geha.com/CompareMedical

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86 years. 2 million members.

- We serve 2 million federal employees, retirees and their families
- We believe health care should be affordable
- We believe you can achieve better health
- We make it easy for you to work with us
- We care for the communities where our members live and work

For more than 86 years, GEHA (Government Employees Health Association) has provided medical plans designed exclusively for federal employees. Founded by Railway Postal employees in 1937, we have a legacy of service to federal workers. We seek to be the first choice for federal workers and retirees of both.

GEHA makes it easy to explore plan options best for you:

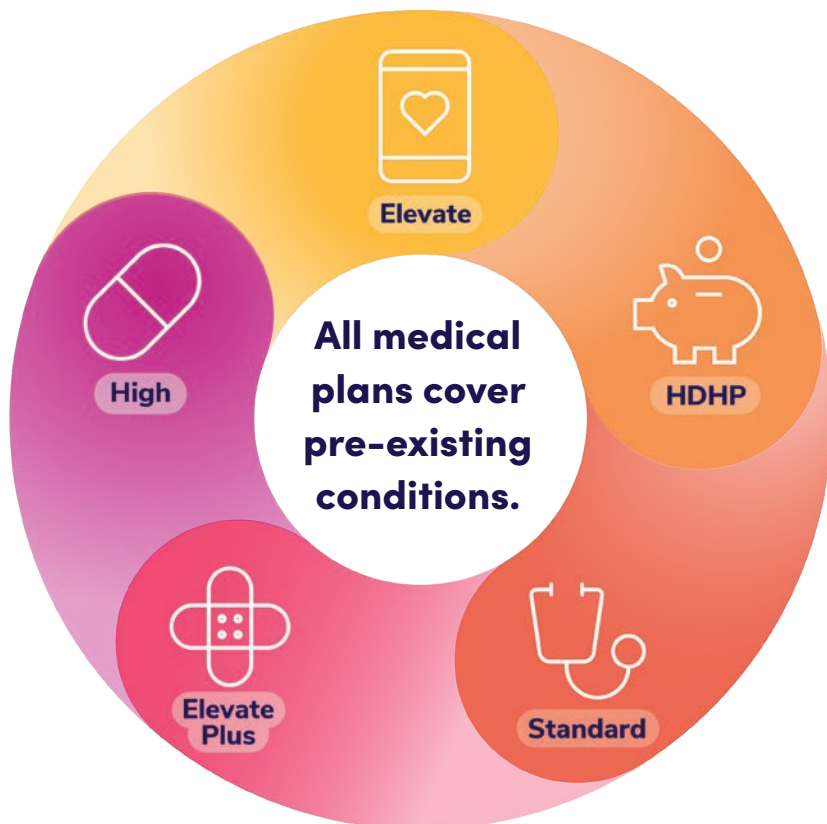
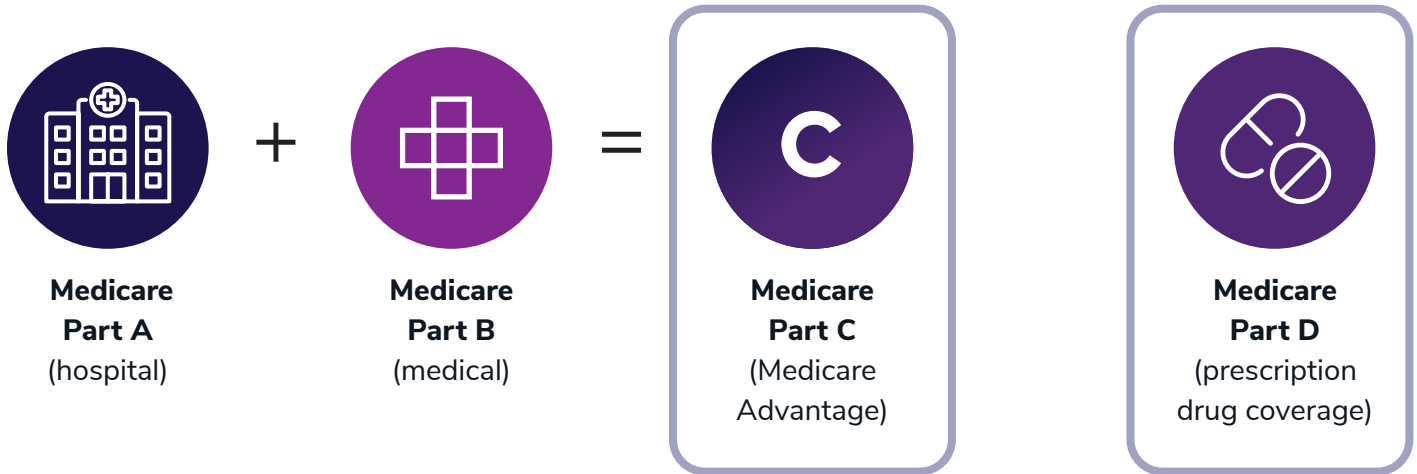
- View the full plan brochure for specific plan details at geha.com/PlanBrochure
- Visit geha.com to walk through our plans online
- Make the switch to GEHA by visiting with your employer or see opm.gov for info on enrollment



Now that you're 65, let's get to work

Medicare is federal health insurance available for eligible individuals ages 65 and over or individuals under 65 with certain disabilities and medical conditions. Medicare has different parts (referred to as Parts A, B, C and D) designed to address your health care needs.

GEHA offers our medical plans as supplemental (extra) coverage for what traditional Medicare may not cover.



Enrollment types:

Self Only

Covers the enrollee and no one else



Self Plus One

Covers the enrollee and one eligible family member



Self and Family

Covers the enrollee and eligible family including eligible dependents up to age 26



Get to know GEHA

I already have Medicare. What can GEHA do for me?

Quite a bit. GEHA has three plans that provide **100%** coverage for those with Medicare Parts A and B including waiving deductibles, copays and coinsurance. Our High medical plan even provides an annual **\$1,000** Medicare Part B premium reimbursement. To determine what coverage works best for you, visit geha.com/Medicare

If I become a GEHA member, can I keep my current provider?

With three plans that provide **100%** coverage for those with Medicare Parts A and B, if your provider accepts Medicare, you can keep that provider.

Is my spouse also covered through GEHA?

Yes. GEHA provides options for **Self Only**, **Self Plus One** and **Self and Family** plans.

When is Open Season for enrolling in 2024 benefits?

Open Season begins on Monday, November 13, and concludes on Monday, December 11, 2023. Coverage is effective January 1, 2024.

What does Medicare Advantage cover?

Medicare Advantage (Part C) covers all components of Medicare Parts A and B, with additional benefits from GEHA for Medicare Part D (prescription drug coverage). With GEHA plans, the member pays the Medicare Part B premium and the FEHB plan premium for the Standard or High plan. There is no additional Medicare Advantage premium!

**When is Open Season for 2024 benefits?
Monday, November 13–Monday, December 11**

COVERAGE IS EFFECTIVE IN JANUARY 2024










GEHA works with Medicare Parts A and B

With a GEHA medical plan to supplement your Medicare coverage, a sudden hospital stay, a prolonged illness or a major surgical procedure won't overwhelm your budget.

Learn more at geha.com/Medicare

GEHA Standard and High medical plans work best with Medicare Parts A and B. They can pair with a GEHA Medicare Advantage Plan for additional benefits for no additional premium.

Plan service	 Elevate and Medicare	 HDHP and Medicare	 Standard and Medicare	 Elevate Plus and Medicare	 High and Medicare
\$1,000 Medicare Part B premium reimbursement					✓
100% medical coverage (copays and deductibles waived) with Medicare Parts A & B primary			✓	✓	✓
Hearing aid benefit ¹			✓	✓	✓
Coverage for in-network and out-of-network care ²	✓	✓	✓	✓	✓
Coverage for care outside of the United States	✓	✓	✓	✓	✓
Non-preferred drug coverage ³		✓	✓	✓	✓
Mail service pharmacy		✓	✓	✓	✓
Choice of plan perk ⁴	✓				

¹ Learn more about hearing aid benefits at geha.com/Hearing

² Though the Elevate Plus plan on its own does not provide out-of-network medical coverage, when it's combined with Medicare and the provider accepts Medicare assignment, out-of-network cost shares are waived. There are no out-of-network pharmacy benefits for Elevate and Elevate Plus.

³ With High plan, when Medicare A & B is primary, you pay a lower coinsurance for preferred and non-preferred brand medications.

⁴ These products and services are neither offered nor guaranteed under contract with the FEHB Program but are made available to eligible Subscribers who become members of the GEHA Elevate medical plan. Only Subscribers in the 50 United States and the District of Columbia are eligible at this time.

GEHA and Medicare EyeMed® vision discounts

Vision services in-network	  Elevate and Elevate Plus you pay	  Standard and High you pay	 HDHP you pay
Annual eye exam	\$0	\$5	\$5
Frames	60% of price	60% of price	\$0 under \$100 plus 80% over \$100
Eyeglass lenses, standard plastic, single vision	Up to \$50	Up to \$50	\$10
Contact lens, conventional	85% of price	85% of price	\$10 under \$110 plus 85% over \$100

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 GEHA medical plan and their eligible family members.

To learn more, visit geha.com/Vision

The HDHP plan includes additional vision benefits. Learn more: geha.com/HDHPVision



Standard and Medicare

geha.com/Standard



Traditional coverage with affordable premiums

NEW for 2024: Pair with a GEHA Medicare Advantage Plan for additional benefits for no additional premium



You pay **\$0** for inpatient and outpatient hospital services, surgeries and office visits



\$2,500 hearing aid benefit and additional discount

Premium and enrollment code	Retired – monthly
314 Self Only	\$151.99
316 Self Plus One	\$326.79
315 Self and Family	\$403.76

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.

A good choice for Medicare A and B primary members who take generic prescriptions

- You pay **\$0** for deductibles, copays and coinsurance, whether your provider is in-network or out-of-network, even outside the United States
- Adults ages 18 and over can earn up to **\$250** (maximum **\$500** per household) per year in Health Rewards. geha.com/HealthRewards

Yearly deductible with Medicare A & B primary ¹	You pay
Self Only	\$0
Self Plus One or Self and Family	\$0

¹ In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

Out-of-pocket maximum in-network ^{1,2}	You pay
Self Only	\$6,500
Self Plus One or Self and Family	\$13,000

¹ In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

² The out-of-pocket maximum is the maximum amount of coinsurance, copays and deductibles you pay for all family members before GEHA begins paying for 100% of covered services. This is a combined maximum for both medical care and prescriptions.

Medical benefits with Medicare A & B primary in-network ^{1,2}	You pay
Unlimited telehealth visits, including mental health, with MDLIVE	\$0
Preventive care; adult routine screenings	
Labs, X-rays and other diagnostic services	
MinuteClinic® visit where available	
Primary care physician office visit	
Mental health office visit	
Specialist care office visit	
Urgent care facility visit	
ER visit	
Hospital care; inpatient and outpatient	
Professional surgical services; inpatient and outpatient	
Chiropractic care (manipulative therapy), including X-rays; up to 20 visits per year	
Vision coverage; eye exam ³	\$5
Preventive dental care, twice yearly	50%

1 In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

2 With Medicare A & B primary, go to any provider that accepts Medicare assignment.

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 GEHA medical plan and their eligible family members.

Prescription benefits in-network ^{1,2}	You pay
30-day retail generic	\$10
30-day retail preferred brand-name	40% (\$250 max ³)
30-day retail non-preferred brand-name	60% (\$350 max ³)
90-day mail service generic	\$20
90-day mail service preferred brand-name	40% (\$550 max ³)
90-day mail service non-preferred brand-name	60% (\$650 max ³)
30-day specialty CVS exclusive generic and preferred brand-name	50% (\$250 max ³)
30-day specialty CVS exclusive non-preferred brand-name	50% (\$400 max ³)

1 In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

2 Refer to geha.com/Prescriptions for formulary and specialty coverage for specific medications.

3 If you choose a brand-name medication when a generic is available, you will be charged the generic copay plus the difference in cost between the brand-name and the generic.

High and Medicare

geha.com/High



The dependable plan for people who need maximum coverage

NEW for 2024: Pair with a GEHA Medicare Advantage Plan for additional benefits for no additional premium



You pay **\$0** for inpatient and outpatient hospital services, surgeries and office visits



\$2,500 hearing aid benefit and additional discount

Premium and enrollment code	Retired – monthly
311 Self Only	\$235.41
313 Self Plus One	\$540.95
312 Self and Family	\$663.56

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.

Comprehensive brand-name and specialty prescription coverage

- **\$1,000** Medicare Part B premium reimbursement for Self Only.
- You pay **\$0** for deductibles, copays and coinsurance, whether your provider is in-network or out-of-network, even outside the United States
- Adults ages 18 and over can earn up to **\$250** (maximum **\$500** per household) per year in Health Rewards. geha.com/HealthRewards

Yearly deductible with Medicare A & B primary ¹	You pay
Self Only	\$0
Self Plus One or Self and Family	\$0

¹ In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

Out-of-pocket maximum in-network ^{1,2}	You pay
Self Only	\$5,000
Self Plus One or Self and Family	\$10,000

¹ In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

² The out-of-pocket maximum is the maximum amount of coinsurance, copays and deductibles you pay for all family members before GEHA begins paying for 100% of covered services. This is a combined maximum for both medical care and prescriptions.

Medical benefits with Medicare A & B primary in-network ^{1,2}	You pay
Unlimited telehealth visits, including mental health, with MDLIVE Preventive care; adult routine screenings Labs, X-rays and other diagnostic services MinuteClinic® visit where available Primary care physician office visit Mental health office visit Specialist care office visit Urgent care facility visit ER visit Hospital care; inpatient and outpatient Professional surgical services; inpatient and outpatient Chiropractic care (manipulative therapy), including X-rays; up to 20 visits per year	\$0
Vision coverage; eye exam ³	\$5
Preventive dental; twice yearly	Balance after GEHA pays \$22 per visit

1 In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

2 With Medicare A & B primary, go to any provider that accepts Medicare assignment.

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 GEHA medical plan and their eligible family members.

Prescription benefits in-network ^{1,2}	You pay
30-day retail generic	\$10 ³
30-day retail preferred brand-name	20% (\$150 max ^{3,4})
30-day retail non-preferred brand-name	35% (\$200 max ^{3,4})
90-day mail service generic	\$15
90-day mail service preferred brand-name	15% (\$350 max ⁴)
90-day mail service non-preferred brand-name	30% (\$500 max ⁴)
30-day specialty CVS exclusive generic and preferred brand-name	15% (\$150 max ⁴)
30-day specialty CVS exclusive non-preferred brand-name	30% (\$200 max ⁴)

1 In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or a percentage of the provider's negotiated amount.

2 Refer to geha.com/Prescriptions for formulary and specialty coverage for specific medications.

3 Costs for initial prescription and first refill. You pay 50% for third and additional refills at retail for 30-day supply. For long-term prescriptions, use mail order or your local retail CVS Pharmacy store (90-day supply) for greater cost savings.

4 If you choose a brand-name medication when a generic is available, you will be charged the generic copay plus the difference in cost between the brand-name and the generic.

GEHA Medicare Advantage Plans¹

Starting in 2024, GEHA is offering Medicare Advantage Plans through UnitedHealthcare, a UnitedHealthcare® GEHA Group Medicare Advantage (PPO) Plan.

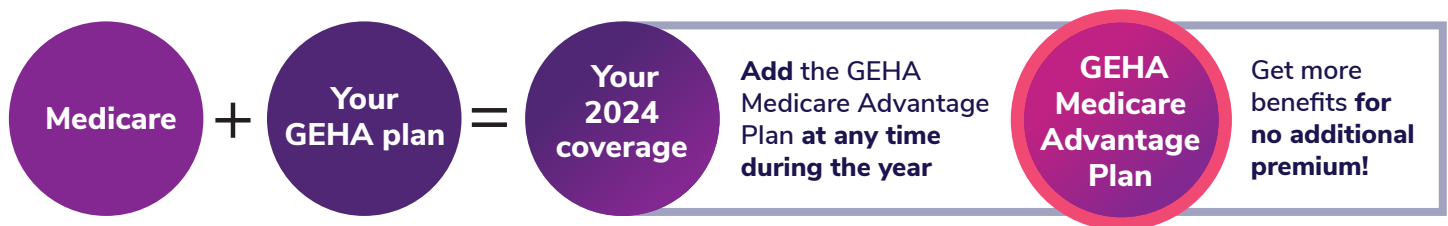
We are committed to bringing choice and value to our members through our health plan offerings. It is an honor to serve our retirees, that's why these exclusive plans are designed to help give you more including a Medicare Part B premium reimbursement, **\$0** copays on covered medical services, national provider network, prescription drug coverage and Renew Active.[®]

¹ You must remain a GEHA High/Standard FEHB Health Plan member in the FEHB program if you elect to enroll in the GEHA Medicare Advantage Plan. Plans are offered by GEHA and 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. Benefits, features and/or devices vary by plan/area. Limitations and exclusions apply.

Have questions? Talk to a FedViser benefits expert Monday–Friday, 7 a.m.–7 p.m. Central time at [833.364.GEHA \(4342\)](tel:833.364.GEHA) for more information on the GEHA Standard or High medical plan.

Once you are enrolled in a GEHA Standard or High medical plan with Medicare Parts A & B primary, you qualify for the GEHA Medicare Advantage Plans. For additional information, visit geha.com/MAPD

If you are not yet a member of the GEHA High or Standard plan, you'll need to enroll during Open Season with the Office of Personnel Management (OPM). Once your enrollment in the plan has been processed by OPM, you can call UnitedHealthcare to elect the GEHA Medicare Advantage Plan.



Why choose a GEHA Medicare Advantage Plan?

Benefit	Notes
Part B premium subsidy	Receive up to \$100 monthly for a Part B subsidy
\$0 copays on covered medical services	\$0 copays for all covered medical services, including preventive care, emergency room, durable medical equipment, routine podiatry, physical therapy and more.
Prescription drug coverage (Part D)	No need for a separate Part D plan. Get prescription drug coverage with full coverage in the gap and low copays.
Renew Active²	UnitedHealthcare fitness program Renew Active [®] is the gold standard in Medicare fitness programs for body and mind, available at no additional cost.



² Participation in the Renew Active[®] program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. The information provided through Renew Active is for informational purposes only and is not medical advice. Gym network may vary in local market.

Premiums

The GEHA Medicare Advantage Plans come at **no additional premium**. Members must continue paying their GEHA High plan or GEHA Standard plan premiums.



GEHA Medicare Advantage Plan medical benefits



Medical benefits	 GEHA Standard Medicare Advantage Plan	 GEHA High Medicare Advantage Plan
Part B premium subsidy	Receive a \$75 monthly Part B subsidy	Receive a \$100 monthly Part B subsidy
Annual medical deductible	None	None
Annual out-of-pocket maximum	None	None
Telehealth visit ¹ Primary care physician office visit Specialist care office visit	\$0 copay	\$0 copay
Hospital services; inpatient and outpatient Ambulance services Emergency room visit Urgent care facility visit Durable medical equipment Prosthetics Diabetic supplies (test strips, lancets, glucose monitors) Preventive services	\$0 copay	\$0 copay
Routine podiatry, up to 6 visits per year	\$0 copay	\$0 copay
Acupuncture, up to 50 visits per year	\$0 copay	\$0 copay
Chiropractic care, up to 20 visits per year	\$0 copay	\$0 copay
Rehabilitation therapies (physical therapy, speech therapy, occupational therapy)	\$0 copay	\$0 copay
Hearing aid allowance, \$2,500 ²	\$0 copay ³	\$0 copay ³

¹ Virtual visits may require video-enabled smartphone or other device. Not for use in emergencies. Not all providers offer virtual care.



² Allowance for unlimited hearing aids every 3 years. Allowance is combined for both ears.

³ You must use a UnitedHealthcare hearing provider to utilize the hearing aid allowance



GEHA Medicare Advantage Plan Dental benefits

	 GEHA Standard Medicare Advantage Plan	 GEHA High Medicare Advantage Plan
Dental benefits		
Class A Preventive & Diagnostic (P&D)	100%	100%
Class B Minor	80%	80%
Class C Major	50%	50%
Deductible (P&D not included)	\$50 copay	\$50 copay
Annual calendar maximum	\$1,000	\$1,000

GEHA Medicare Advantage Plan Vision benefits

	 GEHA Standard Medicare Advantage Plan	 GEHA High Medicare Advantage Plan
Vision benefits		
Routine eye exam (one per year)	\$0	\$0
Eyeglasses allowance	\$130 every 24 months	\$130 every 24 months
Contact lens allowance (in lieu of glasses)	\$175 every 24 months	\$175 every 24 months

GEHA Medicare Advantage Plan Prescription Benefits

	 GEHA Standard Medicare Advantage Plan	 GEHA High Medicare Advantage Plan
Prescription benefits		
30-day retail generic	\$8 copay	\$3 copay
30-day retail preferred brand-name	\$40 copay	\$35 copay
30-day retail non-preferred brand-name	\$70 copay	\$65 copay
30-day specialty	33% / \$150 max	15% / \$150 max
90-day mail service generic ¹	\$16 copay	\$6 copay
90-day mail service preferred brand-name ¹	\$80 copay	\$70 copay
90-day mail service non-preferred brand-name ¹	\$140 copay	\$130 copay

¹ Optum Home Delivery is a service of Optum Rx, a home delivery pharmacy, pharmacy benefit manager and affiliate of UnitedHealthcare Insurance Company. You are not required to use Optum Rx for your maintenance medications. Other pharmacies are available in your network.

Compare premiums

If you are a retired federal employee, you can sign up for a GEHA medical plan by completing OPM form 2809, available through the Office of Personnel Management at [opm.gov](https://www.opm.gov)

Self Only premium and enrollment code	Retired – monthly
254 Elevate and Medicare	\$113.13
341 HDHP and Medicare	\$154.81
314 Standard and Medicare	\$151.99
251 Elevate Plus and Medicare	\$222.19
311 High and Medicare	\$235.41

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.

Self Plus One premium and enrollment code	Retired – monthly
256 Elevate and Medicare	\$272.93
343 HDHP and Medicare	\$332.84
316 Standard and Medicare	\$326.79
253 Elevate Plus and Medicare	\$504.25
313 High and Medicare	\$540.95

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.

Self and Family premium and enrollment code	Retired – monthly
255 Elevate and Medicare	\$332.26
342 HDHP and Medicare	\$409.02
315 Standard and Medicare	\$403.76
252 Elevate Plus and Medicare	\$548.34
312 High and Medicare	\$663.56

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.

Learn more with free e-books and videos

Learn more about your options with Medicare and GEHA at [geha.com/Medicare](https://www.geha.com/Medicare)

Included benefits and discounts



Unlimited \$0 MDLIVE¹ telehealth visits

Get access to certified doctors, mental health therapists and dermatologists.

geha.com/MDLIVE



24/7 Nurse Advice Line

Talk to a nurse 24/7.

[888.257.4342](tel:888.257.4342)



Electric toothbrush discount^{2,3}

Enjoy up to **70%** off a cariPRO[®] premium electric toothbrush.

geha.com/Toothbrush



Medical alert system discount²

Get **free** activation on Life Alert[®] services, plus a **10%** monthly discount, for you and your extended family.

geha.com/LifeAlert



Teeth whitening discounts²

Get a **20%** discount on the lowest published price on all Smile Brilliant[®] home teeth whitening and oral care products.

geha.com/Whitening



Nutritional counseling

Covered at **100%** in-network for all plans. (Subject to deductible for HDHP.)

GEHA helps you manage chronic conditions such as Type 1 and Type 2 diabetes, weight management and high blood pressure with our internal Care Management teams serving as a resource for you and your lifestyle management.



Gym membership discount²

Access 12,200+ Active&Fit Direct[™] locations nationwide with GEHA's Connection Fitness[®] program.

geha.com/Fitness

¹ HDHP members who have met their deductible will be charged by MDLIVE, but GEHA will reimburse the member 100% of the Plan Allowance.

² 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 GEHA medical plan and their eligible family members.

³ The cariPRO[®] premium toothbrush removes seven times more plaque than a regular brush, is completely waterproof and comes with a two-year manufacturer's warranty. Replacement brush heads with high-quality DuPont[®] bristles are also available at this exclusive, member-only price.



Hearing aid benefits & discounts for GEHA plans

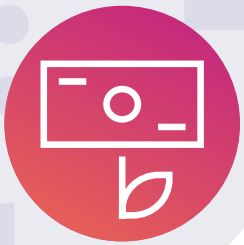
- All five GEHA plans offer access to TruHearing's discounted pricing.¹ Most people see savings of **30%** to **60%**, averaging more than **\$2,600** per pair.
- Three GEHA plans — Standard, Elevate Plus and High — offer a hearing aid benefit. This benefit is per person, every 36 months for adults. TruHearing® discount pricing can be combined with the hearing aid benefit for even greater savings.

To learn more, visit geha.com/Hearing

 Standard GEHA pays	 Elevate Plus GEHA pays	 High GEHA pays
\$2,500	\$1,500	\$2,500

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 GEHA medical plan and their eligible family members.





Earn Health Rewards



Standard



High



HDHP

Empowering incentives that make it easier to live healthier



How it works

- Complete your first rewardable activity and receive your Health Rewards reloadable debit card in the mail automatically
- Redeem the rewards for qualified medical expenses such as copays¹
- Complete rewardable activities to add funds to your Health Rewards reloadable debit card

¹ HDHP members who are also enrolled in an HSA may only use their rewards for qualified dental and vision expenses until the yearly plan deductible is satisfied, then all eligible medical and pharmacy expenses qualify, too.

Fast facts

WHO IS ELIGIBLE TO EARN REWARDS?

Two adult members per household (18+) can earn dollars on a Health Rewards card as you complete activities. You may qualify to earn up to **\$250** each (maximum **\$500** per household) per year. GEHA Medicare Advantage Plan enrollees are not eligible for Health Rewards.

WHAT IS A HEALTH REWARDS CARD?

Your Health Rewards card lets you pay for qualified expenses using funds from your Health Rewards account. HealthEquity will mail your rewards card about two weeks after GEHA receives notification that you've completed your first rewardable activity. As you continue completing rewardable activities, funds will be loaded onto your rewards card.

Activities that earn you Health Rewards	Reward
Health assessment	\$75
Cervical cancer screening ^{1,2,3} (females 21-65 years old)	\$50
Colorectal cancer screening ^{1,2,3} (45-75 years old)	\$50
Breast cancer screening ^{1,2,3} (females 50-74 years old)	\$50
MDLIVE telehealth visit ²	\$50

¹ Restrictions may apply.

² Rewards distributed approximately 3 weeks after claim is received from provider.

³ \$0 out-of-pocket for care coded as preventive with in-network providers.

Contact a FedViser benefits expert

Your benefits. Your adviser. Your advocate.



Call us

Talk to a FedViser benefits expert
Monday–Friday, 7 a.m.–7 p.m. Central time.

[833.362.GEHA \(4342\)](tel:833.362.GEHA)



Chat online

Chat or text with a FedViser benefits expert in real time Monday–Friday, 7 a.m.–7 p.m. Central time.

geha.com



Meet one-on-one

A FedViser benefits expert will help answer your questions.

geha.com/Connect

Ready to enroll?

If you are a retired federal employee, you can sign up for a GEHA medical plan by completing OPM form 2809, available through the Office of Personnel Management.

geha.com/Enroll

SCAN ME



Helpful resources

OPM Open Season online system

retireefehb.opm.gov/Annuitant

OPM Open Season express

[800.332.9798](tel:800.332.9798)

Explore how GEHA medical plans work with Medicare

geha.com/Medicare

Search our extensive nationwide network

Find a provider or an urgent care clinic near you.

geha.com/Find-Care

Plan recommender tool

Answer a few questions to see a plan that matches your individual or family needs.

geha.com/Select-A-Plan

Verify drug costs

Evaluate based on your benefit plan and prescription dosage.

geha.com/Prescriptions

Coverage outside the U.S.

You're covered when you're outside of the United States.

geha.com/OutsideUSA

GEHA. Your friend in federal.

Experience the difference of GEHA

Only available to eligible federal employees, retirees and their families.

Get help choosing the right plan for your needs

Happy with your current GEHA medical plan? You don't need to do anything during Open Season — your GEHA medical plan will automatically renew for 2024 with your current plan.

Meet with a FedViser benefits expert to explore your choices. Schedule today at geha.com/Connect



Live chat at geha.com



Call [833.362.GEHA \(4342\)](tel:833.362.GEHA)



Visit geha.com/Select-A-Plan

Elect a GEHA Medicare Advantage Plan today

Once you enroll in a GEHA Standard or High medical plan with Medicare Parts A & B primary, you qualify for the GEHA Medicare Advantage Plans.

Call a FedViser benefits expert at [833.362.GEHA \(4342\)](tel:833.362.GEHA), 7:00 a.m.–7:00 p.m. Central time Monday through Friday.

Visit geha.com/MAPD to learn more about the GEHA Medicare Advantage Plans.



This is a brief description of the features of Government Employees Health Association, Inc.'s medical plans. Before making a final decision, please read the GEHA 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.

Download the plan brochure

For information and changes to GEHA's medical 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 Benefit (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. GEHA's SBCs are available on the internet at geha.com/SBC. Paper copies are also available, free of charge, by calling [800.821.6136](tel: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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