2027 G.E.H.A MEDICARE BENEFITS

FEDERAL EMPLOYEES HEALTH BENEFITS (FEHB)

MEMBER FOUNDED
EST. 1937
MEMBER DEDICATED

GEHA.COM | 1-833-722-3566

G.E.H.A Government Employees Health Association

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RETIREMENT BENEFITS YOU CAN RELY ON

Retirement comes with many exciting changes, and G.E.H.A will be here to support you in your healthcare journey.

Our FedViser benefit experts are available year-round to help answer questions and assist you in choosing the right plan to fit this new stage of life.

Contact us

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

Call 1-833-722-3566

Meet one-on-one with a FedViser at geha.com/MeetMedicare

Chat live by visiting geha.com

TRUSTED FOR GENERATIONS

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Dedicated to federal employees since 1937

+ Trusted by millions for nearly 90 years, G.E.H.A serves only federal employees, retirees and their families. This focus allows us to design health plans tailored to the federal community, supporting needs across every stage of life.

Focused on members, not shareholders

+ G.E.H.A is independently governed by current and retired federal employees. That means our decisions are guided by the people we serve, not investors or parent companies. Our dollars are reinvested in additional benefits[1] and services exclusively for our members.

A member-built association with purpose

+ G.E.H.A is more than health coverage. We're a nonprofit association founded by federal employees to help one another. That founding purpose still drives how we show up for the federal community today.

Open Season for 2027 benefits

November 9–December 14, 2026

COVERAGE EFFECTIVE DATE: JANUARY 2027

LAST DAY TO ENROLL
December 14, 2026, at midnight ET

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.

START RETIREMENT OFF STRONG

G.E.H.A's Medicare plans are built to help maximize your coverage and benefits.

YOUR RETIREMENT COVERAGE CHOICES:

ORIGINAL MEDICARE PARTS A & B

This coverage is provided by the government to give beneficiaries baseline coverage for hospital (Part A) and medical (Part B) services. Benefits are limited, with beneficiaries responsible for 20% of covered hospital and medical costs.

G.E.H.A + MEDICARE

Combine Medicare with G.E.H.A's Standard or High plans to get 100% coverage for all covered Medicare services, optional Employer Group Waiver Plan (EGWP) Part D drug coverage, and valuable extras like a vision discount for glasses and contacts[1], a **$2,500** hearing aid benefit[1] and more.

G.E.H.A + MEDICARE ADVANTAGE

Enhance your coverage with the UnitedHealthcare® G.E.H.A Group Medicare Advantage (PPO) Plan, at no additional premium cost, with a Part B premium subsidy up to **$1,200** annually, no deductible, **$0** copays on covered medical services and other benefits.

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.

ALREADY A G.E.H.A PLAN MEMBER?

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

Coverage options	Standard + Medicare	High + Medicare	HDHP + Medicare	Elevate + Medicare	Elevate Plus + Medicare
$1,000 Medicare Part B premium reimbursement		X			
Offers enrollment in Medicare Advantage	X	X			
100% coverage for all covered Medicare services with Medicare A & B primary	X	X			X
Hearing aid benefit[1]	X	X			X
Coverage for in-network and out-of-network medical services[2]	X	X	X	X	X
Coverage for emergency care outside of the United States	X	X	X	X	X

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

STANDARD

Medicare Parts A & B and Medicare Advantage

GEHA.COM/MEDICARE

Plan options	with Medicare	with G.E.H.A Medicare Advantage
Self Only **CODE 314**	**$187.95** per month	
Self Plus One **CODE 316**	**$404.11** per month	Zero additional premium for additional coverage and benefits.
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	Not included	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	**$0**	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.

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	$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

GEHA.COM/MEDICARE

Plan options	with Medicare	with G.E.H.A Medicare Advantage
Self Only **CODE 311**	**$364.03** per month	
Self Plus One **CODE 313**	**$815.95** per month	Zero additional premium for additional coverage and benefits.
Self and Family **CODE 312**	**$995.34** 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	**$0**	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.

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	$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.

A LITTLE MORE ON OUR PHARMACY BENEFITS

G.E.H.A's Standard and High Medicare Advantage plans benefit from these features:

+ A **$2,400** annual out-of-pocket cap for prescriptions. This eliminates what was previously known as the Medicare "donut hole," which left beneficiaries potentially exposed to higher cost share. G.E.H.A's Medicare Advantage plans are designed to cover 100% of your Part D prescription drugs once you've reached the out-of-pocket cap.
+ Enjoy a **$35** cap on insulin monthly
+ **$0** copay for vaccinations and preventive medications

YOUR PHARMACY BENEFIT CHOICES:

Most G.E.H.A retirees in the Federal Employees Health Benefits (FEHB) Program will have two options for Medicare prescription drug coverage.

G.E.H.A PRESCRIPTION DRUG PLAN

An optional Medicare PDP / EGWP that provides even greater drug benefits at no additional cost to your current G.E.H.A premiums. Visit **geha.com/PDP** to learn more.

G.E.H.A MEDICARE ADVANTAGE PLAN

United Healthcare Group Medicare Advantage

Looking for even more coverage? This plan includes G.E.H.A's most comprehensive pharmacy coverage and benefits, with lower copays and cost sharing, along with other valuable health plan extras for retirees. Visit **geha.com/MedicareAdvantage** to learn more.

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.

Questions on which option is right for you? Contact a FedViser to learn more at **geha.com**

COMPARE PREMIUMS

Plan options and enrollment codes	with Medicare (monthly)	with G.E.H.A Medicare Advantage (monthly)
Standard — Self Only (314)	$187.95	Zero additional premium for additional coverage and benefits.
Standard — Self Plus One (316)	$404.11	
Standard — Self and Family (315)	$501.47	
High — Self Only (311)	$364.03	
High — Self Plus One (313)	$815.95	
High — Self and Family (312)	$995.34	
HDHP — Self Only (341)	$176.84	Not compatible with upgraded G.E.H.A Medicare Advantage.
HDHP — Self Plus One (343)	$380.18	
HDHP — Self and Family (342)	$467.19	
Elevate — Self Only (254)	$168.83	
Elevate — Self Plus One (256)	$407.31	
Elevate — Self and Family (255)	$495.85	
Elevate Plus — Self Only (251)	$569.04	
Elevate Plus — Self Plus One (253)	$1,254.39	
Elevate Plus — Self and Family (252)	$1,374.08	

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 that maintains your health benefits enrollment.

COVERAGE FOR YOUR WHOLE HEALTH

New for 2027: Get more from your coverage with the G.E.H.A member discount program[1]

Our member discount program helps you save on everyday needs while supporting your overall well-being.

Enjoy discounts on travel, fitness, personal care, groceries, electronics, childcare, senior care and more.

Plus, enjoy additional benefits that support whole-person care and health:

Vision discount on annual eye exams, frames, lenses through EyeMed® and save on LASIK at participating U.S. Laser Network locations with every G.E.H.A plan. Vision is an included discount at no additional cost.[1]

Hearing aid allowance of $2,500 with Standard or High plans and **$1,500** with Elevate Plus, in addition to discounted pricing with TruHearing® with any of our five G.E.H.A plans.[1,2]

Dental coverage is embedded in Standard, High and HDHP plans, and there are even richer benefits with our G.E.H.A Medicare Advantage plan, including 100% coverage on Class A preventive & diagnostic, and low member costs on Class B (minor) and Class C (major).

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

Check out more benefits and discounts for you at geha.com/Savings

MEDICARE FAQS

I already have Original Medicare. What does a G.E.H.A plan do for me?	Quite a bit. G.E.H.A has two plans (Standard, High) that provide 100% coverage for those with Medicare Parts A & B including covered medical deductibles, copays and coinsurance. Our High health plan even provides an annual **$1,000** Medicare Part B premium reimbursement.
If I become a G.E.H.A member, can I keep my current provider?	G.E.H.A's Standard and High plans provide comprehensive coverage for those with Medicare Parts A & B, if your provider accepts Medicare.
Is my spouse also covered through G.E.H.A?	Yes. G.E.H.A provides options for Self Only, Self Plus One and Self and Family plans.
What does the G.E.H.A Medicare Advantage plan cover?	Medicare Advantage (Part C) covers all components of Medicare Parts A & B, with additional benefits from G.E.H.A for Medicare Part D (prescription drug coverage). After enrolling in the G.E.H.A Medicare Advantage plan, the member pays the Medicare Part B premium and their monthly G.E.H.A Standard or High plan premium.
How do I maximize my FEHB and Medicare benefits?	To receive extra coverage and peace of mind from both Original Medicare and G.E.H.A, enroll in G.E.H.A's Standard or High plan with Medicare Advantage to receive plan extras such as a Part B premium reimbursement, vision and dental benefits, as well as over-the-counter (OTC) and hearing aid allowances, in addition to all covered Medicare Parts A & B benefits.
Will I have prescription drug coverage with G.E.H.A?	Yes. If you are enrolled in G.E.H.A's Standard or High plans with Medicare, you receive prescription drug coverage. The Standard and High Medicare Advantage plans offer drug coverage, which includes some additional benefits and potential cost savings opportunities. Find full details on the drug coverage of each plan on **pages 7 and 9** of this guide.

WHAT'S NEXT?

When the time is right and you're ready for this new stage of life, 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

if you haven't already.

Learn more at **medicare.gov**

2. CHOOSE A G.E.H.A PLAN

(Standard or High) that's right for you. Get help from a FedViser in navigating your options if needed by calling **1-833-722-3566.**

3. ENROLL IN MEDICARE ADVANTAGE

to get even more from your G.E.H.A coverage.

Call **1-844-491-9898** (TTY 711)
Monday through Friday 8 a.m.–8 p.m. Central time

Enrollment is voluntary, and you may opt in or out of the G.E.H.A Medicare Advantage Plan enhanced level of benefits at any time. If you elect to opt out, you will be moved back to the G.E.H.A High or Standard health 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.

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 1-833-722-3566
- Meet one-on-one with a FedViser at geha.com/MeetMedicare
- 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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OUR STORY STARTS WITH YOU

Established by Postal workers in 1937, G.E.H.A began with a shared commitment to help each other through hard times.

What started as neighbors supporting neighbors became something more — a member-built nonprofit focused on the health and well-being of federal employees, retirees and their families.

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

As a nonprofit 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 EST 1937