

Medicare for Federal Employees and Retirees

Whether to enroll in Part B or use FEHB as primary coverage is a personal decision, based on your individual circumstances. You should look at the costs and benefits of each insurance plan and make the choice that's best for you.

Background: Federal Employee Health Benefits (FEHB)

- Cover current and retired government employees
- Administered by the U.S. Office of Personnel Management (OPM)
- Can be:
 - Health Maintenance Organizations (HMOs): Have networks of providers that you usually must see. Out of network costs may be higher.
 - Fee-for-service (FFS) plans: Allow you to see any medical provider, but you may have higher costs.



When you become Medicare-eligible, you have a few options:



Keep FEHB and turn down Medicare.

- Even if you have FEHB retiree coverage, it will continue to provide you with primary coverage if you don't enroll in Medicare. In this way, FEHB retiree coverage is different from most other retiree coverage.
- If you choose this option, consider turning down Medicare Part B but still enrolling in Part A. Part A is usually premium-free, meaning that you can have this additional coverage at no cost to you.



Keep FEHB and enroll in Medicare.

- The two will work together to cover your health care costs, but you will owe premiums for both.






Disenroll from FEHB and enroll in Medicare.

- You might not be able to enroll in FEHB again in the future if you change your mind.

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When choosing which coverage option is best for you, ask yourself questions like:

-  Which forms of insurance do my providers take?
-  How much would I owe for the health care services I use the most?
-  Which coverage offers the flexibility I need?

Your options are different if you're a U.S. Postal Service employee or retiree. Starting in 2025, you will have coverage from Postal Service Health Benefits and must have Medicare to keep these health benefits. Contact the U.S. Postal Service to learn more.



FEHB prescription drug coverage is creditable, meaning that it's as good as or better than Medicare's prescription drug benefit. If you're enrolled in FEHB, you can delay Part D enrollment without having a late enrollment penalty.

Be sure to compare the costs and benefits of your FEHB plan and Part D to decide which best suits your needs. Note that you cannot disenroll from FEHB drug coverage separately from FEHB health coverage. If you want to keep your FEHB health coverage, you must keep drug coverage, even if you enroll in Part D.

Contact the U.S. Office of Personnel Management (OPM) if you're a federal employee or retiree and want to learn more about your health benefits.

- Call 317-212-0454
- Visit www.opm.gov/healthcare-insurance



Identify Billing Errors

Health care providers and their billing departments sometimes make billing errors or honest mistakes. They should correct these errors if you tell them. If you think your doctor or their billing department made an error or mistake, contact them directly to resolve the issue.



You can spot these errors by keeping an appointment calendar or using a My Health Care Tracker to keep track of your medical appointments and services. You can call your local Senior Medicare Patrol (SMP) for a My Health Care Tracker if you don't already use one. The tracker can help you compare your appointments, services, and notes to your Medicare statements.

If something does not seem right on your Medicare statement, remember to first call your provider. Here are just a couple examples of potential errors:



Your provider billed Medicare for an office visit on a day when you did not see them.



Your provider billed you for a service that was different than what you actually received.

If your provider does not resolve the issue, or if you notice a pattern or errors, contact your local Senior Medicare Patrol (SMP). They can assist to try to resolve the error. Your SMP can also help you identify Medicare fraud, errors, or abuse, and can help you report potential fraud to CMS and the correct authorities.

Medicare statements:

- If you have Original Medicare, you should receive a Medicare Summary Notices (MSN).
- If you have a Medicare Advantage Plan or Part D plan, you should receive an Explanation of Benefits (EOB).



These statements are not bills. MSNs and EOBs summarize the health care services and items you have recently received. They include the charges billed to Medicare and the amount you owe. Read these carefully to spot any potential billing errors.

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Who to contact for more information:

- Contact your **State Health Insurance Assistance Program (SHIP)** if you want to discuss your Medicare enrollment options with a Medicare counselor.
- Contact your **Senior Medicare Patrol (SMP)** if you may have experienced Medicare fraud, errors, or abuse.
- Contact the **U.S. Office of Personnel Management (OPM)** if you're a federal employee or retiree and want to learn more about FEHB. You can call 317-212-0454 or visit www.opm.gov/healthcare-insurance.
- Contact **United States Postal Service (USPS)** if you are a USPS employee, retiree, or eligible family member and need more information on PSHB. Current employees can visit www.liteblue.usps.gov and retirees can visit www.keepingposted.org.