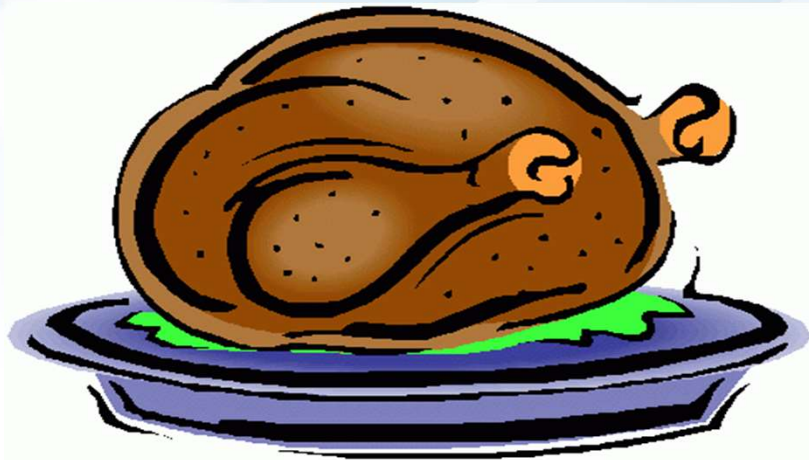


Don't Sleep Thru Open Season

Eat Your



Don't Be One





2025 Open Season Updates

Ann Ozuna, Federal Retirement Lady

Monthly Costs for 2026 Up Again

- FEHB up Average of 12.3% after increase of 13.5% last year
- PSHB up Average of another 11.1% this year
- FEHB Examples
 - BCBS Standard Up 7.77%
 - BCBS Basic Up 17.54%
 - BCBS Focus Up 12.9%
- Postal and FEHB plans are not priced the same
- Dental up Avg 3.3% and Vision up .5%



Today's Open Season Agenda

Starts Today Thru December 08, 2025

Everyone

Know Benefits Important to You – Rx, Docs, Care

Review Your Policy Changes in Chapter 2 of Brochure

If on Medicare B Check Out Federal Medicare Advantage

Know Your Tax MAGI for 2024 and 2025 - IRMAA

Shop for comparable policy at lower cost

Today's Open Season Agenda



Working Feds and Retirees under 65 Choices

High Deductible Plans

FSA and HSA for Employees

Medicare A and B Enrollment Timing

Possible IRMAA Costs at 65 or post-65 Retirement

Today's Agenda



Retiring at 65+ or Annuitant Turning 65

FEHB Medicare B not Required at 65 Now

PSHP Medicare B and D required Now

Small exemption window

Medicare Part D RX Coverage Differences

Federal Medicare Advantage Plans

Medicare B and D IRMAA Costs

Fed Medicare Advantage w/Part D IRMAA



Everyone

Getting Informed FEHB

- NARFE Open Season portal at <https://www.narfe.org/openseason>
- NARFE Members can view archived webinars <https://www.narfe.org/federal-benefits-institute/narfe-webinars/webinar-archive/>
- Use Consumer's Checkbook Guide to Health Plans <https://www.checkbook.org/newhig2/hig.cfm>



NARFE Webinars



- To B or not to B (archived)
- October 30, 2025 - "Medicare Advantage Plans"
 - November 4, 2025 - "Open Season Prep (FEHB/PSHB, FEDVIP, FSAs)"
 - November 6, 2025 - "FEHB/PSHB Without Medicare (Active Feds)"
 - November 13, 2025 - "FEHB/PSHB With Medicare"
 - November 20, 2025 - "FEHB and Medicare Prescription Drug Plans"



Tools for Comparing FEHB Plans



- **To Compare FEHB Medical Plans**
- Tool at <https://www.opm.gov/healthcare-insurance/healthcare/plan-information/compare-plans/>
- Insert zip code and your status/pay frequency
- **To Compare Dental/Vision Plans**
 - Tool at www.benefeds.gov
 - Select the Shop Icon for Dental or Vision
 - Input zip code and your status/pay frequency



Decisions to Make - Everyone

- Elect Employee Plus One or Family
- Review Your Plan Changes in Ch 2
- Look at New Plans
- Check Drug Coverage – there are Changes in Formulary and Medicare RX
- Coming up on 65? Review Medicare B Costs – Look for B Reimbursements and New Federal Advantage Plans
- Accept or Decline Drug Changes if you have Med A or A & B **and FEHB**

Everyone - Things to Do NOW

- Review Plan Changes in Chapter 2
 - Copays, Deductible, OOP Max, Rx, Providers
- Review Your Medical Conditions, Rx, OOP
 - Use Plan Procedure Calculators
 - Know difference between “accept” and “contracted” and “preferred providers”
- Think Outside the Box
 - Consider Consumer Driven or
 - High Deductible Plans (Employees)



Making Changes in FEHB



- Open Season, Gain or Lose a Dependent
- Last Kid Turning 26 or Other QLE– Life Event 60 days
- One time election on Medicare Eligibility @65+
- Consider a High Deductible or Consumer Plan
- Check Your Plan Pricing - Many EE+1 Prices are higher than family coverage this year

Family of 2 Cheaper than Plus One

- Aetna Plans, beginning with
 - H4, G5, 22
- Kaiser Plans, beginning with
 - 54,57
- NALC High, beginning with
 - 32
- Rural Carriers High, beginning with
 - 38



Research Plans - Everyone



- Review How Your Plan Changes – Chapter 2
 - Copays, Deductible, Coinsurance, OOP Max, RX Needs, Doctor in Plan, New Network?
- Have Your Medical Conditions Changed?
 - Check plan EOBs for Usage
 - Use plan's procedure calculators for cost
 - Check your drugs cost in plan formularies/tiers and Medicare RX if will be 65
- You can be a family of 2 if family is cheaper than EE+1. Check pricing!

It's The Network and Rx Tiers!



- Be Sure that your physician, dentist, or other medical practitioner is “contracted” with your plan to avoid “balance billing.”
- Ask your provider’s biller which companies they contract with.
- Are out of Network Provider(s) even covered?
- Check your drug tier in comparable plans. Drugs are in different tiers in different plans, then check tier pricing. Check Medicare D and Plan Formularies!
- Check mail order pricing if available

Points That May Have Changed



- Premium Costs (How Much do You use it)
- Deductible, Copay, Co-Insurance % (Patient Responsibility)
- Hospitalization Costs and Outpatient Surgery
- Lab Work, PT, Chiropractic, Naturopathic Care
- Yearly Out of Pocket limits – new drug limits
- Rx Tiers – Generic vs Name Brands as well as Medicare Part D Tiers. Can you waive out?

Postal Plans

- Open Season 2024 Postal Plans will move into a postal only FEHB pool – Unknown at this time if non-postal versions of today's postal plans will be offered
- All Postal employees must elect a Postal Service Health Plan during NEXT open season. Rates take effect January 2025

April 1, 2024 thru Sep 30, 2024

- Special Medicare Part B enrollment period offered for age 65+ retirees and family members not enrolled as of 1/1/2024 in Medicare B



Changes for 2026



PLAN BY PLAN REVIEW ACTIVE EE AND >65 RETIREES



Employees & <65 Retirees

Employee and Pre-65 Retiree Choices

- **Consumer Directed (CDHP)**
 - May have HRA included
- **High Deductible (HDHP)**
 - May have HSA included
- **Flexible Spending Accounts for Employees**



Aetna 5 plans Plus MH Plan



- Aetna Value Plan – PPO network \$700/\$1400 Deductible
- Aetna Health Fund HDHP with HSA – PPO network
- Aetna Consumer Direct – pre 65 or no Med B 65+
- Aetna Direct – value plan for retirees pre & Post 65
- Aetna Medicare Advantage – works with Medicare B
- Mail Handlers HP – 3 choices backed by Aetna

Blue Cross Has 3 Plans

Basic OOP Max is \$7,500/\$15,000;
Focus is \$8,500/\$17,000 in network;
Standard still same at \$6K/\$12K in network; 8K/16K out of network

Standard now has GLP1 and IBF coverage, has \$350/\$700 deductible, copays, 15% coinsurance and out of network coverage

Basic has no deductible, higher copays this year, 20% coinsurance, must stay in network, has Medicare Reimbursement if eligible, drug tier copays increased

Blue Focus has lesser specialty visits, limited RX, has \$500/\$1000 deductible, must stay in network. 30% coinsurance. Lower premium.



Plans from GEHA

- HDHP High Deductible Health Plan with HSA
 - Low premium, 5% coinsurance, lower than expected deductible, no referrals needed
- Standard Option- deductible, copays, coinsurance
- High Option – best for brand name Rx, hearing aid benefit, Medicare coordination, United Healthcare network
- Most plans have some limited GEHA vision/dental
- **Elevate and Elevate Plus – NOT available in PSHP**



Kaiser Core and Options

- Options Plans
 - Standard and High Deductible
 - HDHP and Consumer Plans
 - The former KPS plans
- Core Plans (54X)
 - Standard and High Options
 - Full Coverage Dental not included
 - Lower Price Prosper Plan with higher copays
- 2 Federal Medicare Advantage Plans for FEDs with Kaiser Core
- Medicare B Subsidy Available with MA Advantage Plan



Mailhandlers by Aetna in FEHP

- Must join postal union \$42 a year
- Has 3 levels of plans
 - Standard, value, HDHP consumer option
 - Std – copay based - \$20 in network, 350/700 ded
 - Value – copay based \$30, 600/1200 ded
 - HDHP – pass thru HSA, \$15 copay, 2K/4K deductible
- Uses Aetna network of providers
- Sells dental/vision policies not in Benefeds
- Has Federal Medicare Advantage Plan – must sign up on Aetna forms.



NALC (Letter Carriers) PSHB only

- Open to Union Members and associate members
 - Wellness and Fitness Plans
 - Now computes Plan payment in coordination with Medicare
 - Aetna Healthcare Network
- Value Option – High Deductible
- Consumer Option – High Deductible
- High Option
 - Wellness Incentives in Network
 - OOP Expenses waived if Medicare B Bought and Primary



Rural Carriers (Postal and FEHB)

- Open to Union Members \$36 yr to join
 - Wellness and Fitness Plans
 - CIGNA/Optum/CVS Network
- High Option
 - Wellness Incentives in Network
 - 65+ can join Aetna Medicare Advantage Plan – Must fill out Aetna forms.



United Healthcare

- 5 HMO Plans
 - Choice, Choice Plus, Choice Primary, Choice Open Access, Federal Medicare Advantage 65+
 - Dental included up to \$500 per year in all
 - No referrals and No Primary Care Provider Needed in network
 - In and Out of Network benefits
 - HDHP
- Also has separate Benefeds Vision and Dental Plans



Dental and Vision Insurance

Available to civilian employees and retirees and Military Retirees as well as active duty family members

Change or drop each year during Open Season or Qualifying Life Event otherwise coverage continues

www.benefeds.gov

Vision and Dental Have Self, Self Plus 1, and Family

www.Benefeds.gov



- Rates are the same for military and civilians
- Cannot be double covered as mil and civ
- Shop and Compare up to 3 Plans at a Time
- EE Plus 1 can be any eligible dependent
- Kids Fall Off at Age 22 GEHA sells dental plan for “aged out” kids outside of Benefeds.gov
- Can have different company for dental and/or vision from FEHB

Dental/Vision Considerations



- Check to see if your FEHB has added or dropped dental or vision coverage for 2026
- Look for Annual Max if you need a Crown or 2
- Check for Waiting Periods for Major Services
- Orthodontic Benefit Changes
- Crown/Major Dental Coinsurance Changes
- 2d Pair of Glasses costs
- Frame Waiting Periods, Breakage Warranty

www.Benefeds.gov



12 Dental Plans

Costs Depend on:

Part of Country
HMO or PPO
% Coverage
Orthodontics

5 Vision Plans

Premiums as Low as
\$7 monthly

Glasses or Contacts

**Check Participating
Providers**



Medicare Eligible Retirees FEHB

FEHB 65+ Changes for 2026

- **Enrolled in Medicare A or Medicare A and B and Retired?**
 - Changes in drug coverage**
 - Automatic Coverage Medicare D or Opt Out?**
 - PSHP opt out = NO drug coverage**
 - Check your Usage and Costs to See if Medicare Part D Worth It**
 - Can Opt in Next Open Season if Opt Out**
- **FEHB Medicare Advantage or Commercial MA Plan Differences for GLP1 drugs**



FEHB Plans with FEHB Medicare Advantage

- GEHA High and Standard
- Aetna Advantage
- MHBP Standard
- NALC High (no longer available)
- APWU High
- SAMBA High and Standard
- Kaiser Core (E WA) and Kaiser NW (SW WA and OR)
- United Healthcare

All Require a separate Signup Form with Carrier



Should I Enroll for Medicare Part B?

Negatives

Medicare B Basic Costs

Still have to Pay FEHB Premiums

No Catastrophic Cap if No Medicare B

May have IRMAA Surcharges

Positives

Out of Pocket Expenses lessen

Some Plans Waive Deductibles/Copays/Co-Insurance

Some Plans offer Subsidy or Reimbursement if you have

Part B

Have Medicare Catastrophic Cap

Prescription Coverage with FEHB or Medicare D with RX Cap

Medical Devices and Therapy Needs Increase with Age



Should I Enroll for Medicare Part B?

Late Enrollment Penalties

10% additional cost for each year “late” after first 12 months

Longevity Estimate

You may live another 40 years

Family Disease History

Chronic Disease – Joint Replacement Possibilities

Location and Provider Availability

Overseas

Provider Choices



65+ Retirees to B or Not to B

- **Incentives**
 - **Waived Deductibles, Co-Pays and Co-Insurance**
 - **Full or Partial Med B Premium Reimbursement Plans**
 - **All but 2 Have Full Federal Medicare Advantage Plans at no Extra Cost (Must enroll with Federal Plan)**
- **Plan Costs plus Medicare B Premiums**
 - **Only one person Eligible for Med B**
 - **Income-Based Medicare B and D Costs based on prior 2 year's income (IRMAA)**
 - **Could Delay and Take 10% Yearly Penalty to Avoid IRMAA costs until Income Goes Down**



Automatic “B”



- If you or a spouse are receiving Social Security at age 65, Automatic Deduction for Medicare B Premiums will occur.
 - If still working or covered under working spouse, **should consider declining** until no longer working
 - No requirement for mandatory Medicare B in **FEHB** at this time unless you have TRICARE. Eligible for a one-time FEHB change due to initial eligibility for Medicare B - QLE Code 2L

Enrolling for Medicare B Timing

Working at 65? Can skip B until retire. Special 8 month enrollment period (SEP) starts first month of retirement

No late penalty if get form L564 from employer.

Coverage Start Date Varies Depending on Month You Enroll

Retired Before 65? Initial Enrollment Period of 7 months

Starts 3 months before your 65th birth month

Coverage Start Date Varies Depending on Month You Enroll

General Enrollment Jan – Mar Each Year

Monthly premium increases 10% for Each Year you were eligible, but not enrolled - unless SEP



2026 Per Person Monthly IRMAA Costs for Medicare B

2024 Single Return	2024 Joint Return	With IRMAA Adjustment o
< \$109,000	<\$218,000	\$0 (\$205 est)
> \$109,000 up to \$137,000	> \$218,000 up to \$274,000	\$289.10
> \$137,000 up to \$171,000	> \$274,000 up to \$342,000	\$413.00
>\$171,000 up to \$205,000	> \$342,000 up to \$410,000	\$536.80
> \$205,000 <\$500,000	> \$410,000 < \$750.000	\$660.90
> =\$500,000	>=\$750,000	\$702.10

FEHB or Private Medicare Advantage?



FEHB Medicare Advantage

- Buy Medicare A/B & FEHB
- DO NOT SUSPEND FEHB
- Waiver or reduced OOP Costs
- Must enroll with FEHB plan MA and choose options
- \$2100 Drug Cap
- IRMAA Medicare B and D premiums can apply

Private Medicare Advantage

- Buy Medicare A/B and Private Plan – Can SUSPEND FEHB
- Can have no or low premiums
- Deductibles, Copays and Coinsurance generally NOT waived
- Will have OOP costs
- May have to stay in network
- IRMAA Med B and D costs can apply

FEHB MA Advantage Plan Perks

Part B Reimbursement or Subsidy each

- Aetna Advantage (Z26) \$100 mo
- United Healthcare Choice \$150 mo
- GEHA High (312) \$100 mo
- GEHA Standard (315) \$75 mo
- Kaiser Core (54X) Senior Advantage 2 up to \$250 mo
- MHBP (456) \$75 mo
- APWU High (473) up to \$150 mo

Perks (vary by carrier)

- Silver Sneakers
- Hearing Aids, Dental coverage
- Lower OOP or visit costs



GEHA and Medicare A + B Incentives

All Plans work with Medicare,
Some more than others

- Elevate Plus and Standard
 - Copays and deductibles waived
 - Hearing aid benefit
 - Coverage in and out of network
- High adds 1K annual reimbursement to above
- Elevate coverage in and out of network only
- HDHP with HRA
 - Copays and deductibles waived
 - Coverage in and out of network



FEHB Plans with Incentives When You Buy Medicare B



AETNA Direct

- Waived Copays. Deductibles and coinsurance if Medicare is primary
- Dr participates in Medicare and accepts Aetna
- \$900 reimbursement fund for your choice -OOP costs or Medicare Reimbursement or Rx
- Hearing Aid benefit

FEHB Plans which are Full Medicare Advantage Plans



AETNA Medicare Advantage

- Waived Copays. Deductibles and coinsurance if Dr enrolled in Medicare. \$100 mo Reimbursement
- National Aetna Cigna Network
- \$2000 Hearing Aid Reimbursement
- Silver Sneakers, Meal and Transit Benefits
- RX Savings and Care Coordinator
- Choose plan with Code Z2 and then contact Aetna to complete enrollment

FEHB Plans which are Full Medicare Advantage Plans

Kaiser Core

- Medicare HMO Advantage Plans
- Limited to residents of Seattle area counties and Spokane county
- Medicare Advantage 2 options for Standard and High Plans have \$150 month reimbursement accounts but higher copays for some services
- Medicare Advantage 1 options for Standard and High Plans have zero OOP for most all services and hearing and eyewear allowances and no reimbursement



FEHB Plans with Medicare Advantage



- **Mail Handlers (MHBP)**
 - When have Medicare A and B primary, will waive copays, deductibles and coinsurance for Medical on Standard Plan only. \$75 mo Reimbursement
 - Must enroll for **Aetna** Medicare Advantage with Extended Service Area (ESA)
- **APWU (letter carriers)**
 - When have Medicare A and B primary, will waive copays, deductibles and coinsurance for Medical on High Option plan. \$80 mo Medicare Reimbursement.
 - Has an APWU version of **United Healthcare** Medicare Advantage Plan. Employees complete United Healthcare enrollment form.

FEHB Plans which are Full Medicare Advantage Plans

- **United Healthcare**
 - Waived Copays, Deductibles and Co-insurance
 - Monthly Subsidiary of \$150
 - Must be enrolled in UHB plan and complete separate online application
 - Hearing aid network, \$500 dental allowance
 - Gym memberships, online fitness
 - See any provider if doc accepts Medicare
 - RX Savings



Hearing Aid and OTC Benefits FEHB MA



Hearing Aids

- Aetna Advantage Medicare Advantage: \$2,500 allowance once every 36 months
- United Healthcare Retiree Advantage: \$1,500 allowance once every 36 months
- GEHA Medicare Advantage: \$2,500 allowance once every 36 months
- Kaiser Medicare Advantage and BCBS, \$2,500 every 36 months

Over-the-Counter Benefit:

- Aetna Advantage Medicare Advantage: \$30/quarter
- United Healthcare Retiree Advantage: \$40/quarter
- GEHA Medicare Advantage: \$40/quarter
- Kaiser Medicare Advantage

Sign Up for FEHB MA Plan

Easy as 1-2-3

1. Have Medicare A and B at 65 or 65+
2. Enroll or be in FEHB/PSHB plan sponsoring desired MA Plan during Open Season or use QLE code “2L” 30 days prior to becoming Medicare eligible.
3. Contact Plan Online or thru Special MA enrollment Phone # to get and Complete Plan’s MA form after enrollment date.



Only Retirees Can Suspend FEHB

- **Can Suspend FEHB at any time**
- **Use BACK of RI 79-9 Form and Send to OPM**
- **Reasons – Tricare or Tricare for Life, Champ VA or Commercial Medicare Advantage Coverage**
- **Must Provide Proof of Reason**
- **If Suspend Your Coverage, All Family Coverage Also Suspended**
- **Can Reenroll at next Open Season or Stay Suspended**
- **Once in a Lifetime Suspend and Reenroll**



Commercial Medicare Advantage Plans



- Another option with Medicare Advantage is to suspend FEHB coverage and enroll in a commercial MA plan
 - You save paying the FEHB premium
 - Commercial MA plans may not have the same \$0 out-of-pocket cost benefits, may charge an extra MA premium, may not have Part B premium reimbursement
 - Commercial MA plans only cover GLP-1 weight loss drugs when prescribed for an underlying medical condition like diabetes or heart disease, not for weight loss

Private MediGap (letter) Plans



- Many Private Sector Medicare Supplement (MediGap) to choose from
 - Different costs
 - Different coverage with or without drug coverage
 - Plan features are grouped by Letters
- Feds cannot suspend for a MediGap plan, must drop to not double pay and then can't reenroll
- Their Open Season ends Dec 7th.
- Must have Medicare A & B and possibly D for Medigap

Medicare Drug Program (MPDP)



- Separate Drug Formulary from FEHB Plan
- Offered for plan members with Medicare Part A and/or Parts A and B
 - Insulin per month \$35 price cap
 - Coverage of substantially all CMS-defined Protected Class Drugs
 - \$2100 Drug Out of Pocket Cap
- Same FEHB premiums whether you take it or not
- May have to pay IRMAA Medicare Part D charges

2026 Per Person Monthly IRMAA Costs for Medicare D

2024 Single Return	2024 Joint Return	You pay in 2026 per month per person
< \$109,000	<\$212,000	\$0
> \$109,000 up to \$137,000	> \$212,000 up to \$274,000	\$14.50
> \$137,000 up to \$171,000	> \$274,000 up to \$342,000	\$37.50
>\$171,000 up to \$205,000	> \$342,000 up to \$410,000	\$60.40
> \$205,000 <\$500,000	> \$410,000 < \$750.000	\$83.30
> =\$500,000	>=\$750,000	\$91.00

FEHB Plans with PDP Drug Benefits

BCBS – Standard, Basic and Focus
NALC High (no longer available outside Postal)
MHBP – Standard, Value, Consumer
APWU High
Aetna Direct Consumer Option
no postal equivalent
SAMBA – High, Standard
Foreign Service – Compass Rose

All have \$2,100 annual Rx out of pocket drug limit



FEHB PDP Rx Opt Out (BCBS)



- Examine your Rx Usage and Costs in PDP and non-PDP drug formularies in plan website
 - 1. Are you subject to IRMAA for Medicare B? If yes, then you pay an IRMAA Medicare D penalty too.
 - 2. Total up your new drug costs and IRMAA costs
 - 3. Make sure your pharmacy is in PDP network
 - 4. Do you save enough with PDP to pay any IRMAA charges?
 - 5. Contact your carrier ASAP to Opt Out - can enroll in PDP next year open season if things/costs change



Postal Medicare Advantage Plans

Postal Info



More PSHB information is available at:

OPM: opm.gov/healthcare-insurance/pshb

Keeping Posted: keepingposted.org

Postal MA Plans



- MA Plans available in PSHB Aetna Advantage
- APWU High
- GEHA High GEHA Standard
- Kaiser plans
- MHBP Standard
- NALC High
- Rural Carrier High
- UnitedHealthcare Choice Plus

PSHB Plans which are Full Medicare Advantage Plans

GEHA Standard, High Option

Waive Copays. Deductibles and coinsurance

Full Medicare Advantage in United Healthcare Network

Earn Wellness Rewards

Medicare B reimbursement(\$75 ea for Std, \$100 ea elig for High)

Part D Rx Coverage included

\$2,500 Hearing Aid Coverage

Fitness, acupuncture, physical and speech therapy

Can Add MA to existing GEHA std/high plan anytime during year upon eligibility



Making a Change FEHB?

- Have plan codes, people names, SSAN, and addresses ready
 - All Retirees must have a login.gov account.
 - Login and then connect to Open Season Online
 - <https://retireefehb.opm.gov/Annuitant/Home/Default>
 - Or call Open Season Express 1-800-332-9798 (M-F, 7-7 CST)
 - Or complete OPM Form 2809 and Mail 4 days prior to Dec 8 (postmark postal issues)
 - Office of Personnel Management
 - Open Season Processing Center
 - PO Box 5000
 - Lawrence, KS 66046-0500
- -Employees
 - SF 2809 or agency specific online procedures



Making a Change Postal?



Changing PSHB plans, codes or plan members?

- All Retirees and Employees must have a login.gov account established first
- Also need plan codes, people names and addresses and SSANs.
- Use Open Season Express -call 1-800-332-9798.(M-F, 7-7 CST)
- Online:after have login.gov account, go to <https://healthbenefits.opm.gov/HBEWeb/ehbs/Annon/Landing>

Dental/Vision sign up, change or drop:

- www.benefeds.gov or call 1-877-888-3337



Thanks for Your Support

Feel Free to Call with Questions

(509) 993-2283