

See if the GEHA Medicare Advantage Plan is **right for you**

If you are enrolled in the GEHA Standard medical plan, retired, and enrolled in Medicare Parts A & B, you may be eligible for the GEHA Standard Medicare Advantage Plan, a UnitedHealthcare® Group Medicare Advantage (PPO) plan. Review this side by side plan comparison to help you determine if the Medicare Advantage plan will meet your needs.

Plan comparison	GEHA Standard medical plan	GEHA Standard Medicare Advantage Plan
Extras		
National network	Yes	Yes ¹
Part B premium subsidy	No	Yes
Expanded foreign travel coverage	Yes	Yes
Dental coverage	Yes	Yes
Free gym membership	No	Yes ²
Over-the-counter item allowance	No	Yes ³
One-plan – no need to coordinate benefits	No	Yes
Remain in the FEHB program	Yes	Yes
Remain a GEHA medical plan member	Yes	Yes
Medical Benefits		
Annual medical deductible	None	None
Annual medical out-of-pocket maximum ⁴	\$6,500 / \$13,000	None
Preventive services	\$0	\$0
Physician office visits (primary, specialist and virtual)	\$0	\$0
Hospital visits (inpatient and outpatient)	\$0	\$0
Emergency room or urgent care	\$0	\$0
Ambulance service	\$0	\$0
Acupuncture	\$0 / 20 visits	\$0 / 50 visits
Chiropractic care	\$0 / 20 visits	\$0 / 20 visits
Physical, speech and occupational therapy	\$0 / 60 visits	\$0 / unlimited visits

Durable medical equipment	\$0	\$0
Diabetic supplies	\$0	\$0
Routine podiatry	\$20	\$0
Hearing aid allowance — \$2,500 Allowance every 3 years. Allowance is combined for both ears	Yes	Yes ⁵
Pharmacy – Retail 30 day supply		
Tier 1 — Generic	\$10	\$8
Tier 2 — Preferred brand	40% (\$250 max) ⁶	\$40
Tier 3 — Non-preferred brand	60% (\$350 max) ⁶	\$70
Tier 4 — Specialty tier	50% (\$250 max) generics & preferred ⁶ 50% (\$400 max) non-preferred ⁶	33% (\$150 max)
Pharmacy – Mail order 90 day supply⁷		
Tier 1 — Generic	\$20	\$16
Tier 2 — Preferred brand	40% (\$550 max) ⁶	\$80
Tier 3 — Non-preferred brand	60% (\$650 max) ⁶	\$140
Tier 4 — Specialty tier (limited to 30-day supply)	N/A	33% (\$150 max)

Call our dedicated GEHA UnitedHealthcare Customer Service Advocates to learn more about the GEHA Standard Medicare Advantage plan designed exclusively for federal retirees in the FEHB program at **1.844.491.9898, TTY 711**, 8 a.m.–8 p.m. local time, 7 days a week, or visit geha.com/MedicareAdvantage



¹Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our Customer Service number or see your Evidence of Coverage for more information.

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

³OTC benefits have expiration timeframes. Call your plan or review your Evidence of Coverage (EOC) for more information.

⁴Out-of-pocket maximum excludes premiums, prescription costs, and non-Medicare covered benefits

⁵The plan only covers hearing aids from a UnitedHealthcare Hearing network provider.

⁶If 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.

⁷Optum 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.

You must continue to pay your GEHA Standard premium if you elect to enroll in the Medicare Advantage Plan, but there is no additional premium for the GEHA Medicare Advantage plan.

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/Plan Brochure](https://geha.com/Plan%20Brochure). All benefits are subject to the definitions, limitations and exclusions set forth in the Federal brochures.

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.