HIGH G.E.H.A MEDICARE ADVANTAGE PLAN

Plan comparison

Plan extras	Federal	Medicare Advantage
	What you get	
Part B premium subsidy	Up to $1,000 annually	Up to $1,200 annually
Free gym membership	None	Yes[1]
Over-the-counter items allowance	None	Yes[2]
Eyeglasses or contacts allowance	None	Yes

Medical benefits	Federal	Medicare Advantage
	What you pay	
Annual medical deductible	None	None
Annual out-of-pocket maximum[3] (Self Only)	$7,500	None
Annual out-of-pocket maximum[3] (Self Plus One or Self and Family)	$15,000	None
Physician office visit (primary, specialist, virtual)	$0	$0
Hospital services (inpatient and outpatient)	$0	$0
Preventive services	$0	$0
Emergency room or urgent care	$0	$0
Ambulance services	$0	$0
Lab services	$0	$0

Call our dedicated G.E.H.A UnitedHealthcare Customer Service Advocates to learn more about the G.E.H.A High Medicare Advantage plan designed exclusively for retirees in the FEHB and PSHB programs at **1-844-382-6322, (TTY 711)**, 8 a.m.–8 p.m., Central time, Monday–Friday, or visit **geha.com/MedicareAdvantage**

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G.E.H.A Government Employees Health Association | United Healthcare Group Medicare Advantage

THE G.E.H.A MEDICARE ADVANTAGE PLAN HAS BUILT-IN PRESCRIPTION DRUG COVERAGE

30-day retail	Federal[4]	PDP[4]	Medicare Advantage
		What you pay	
Generic	$10[5]	$9	$3
Preferred brand name	25% ($250 max)[5,7]	20% ($150 max)	$35
Non-preferred brand name	40% ($400 max)[5,7]	35% ($200 max)	$65
Specialty generic/preferred	25% ($350 max)[6,7]	15% ($150 max)	15% ($150 max)
Specialty non-preferred	40% ($400 max)[6,7]	15% ($150 max)	15% ($150 max)

90-day mail	Federal[4]	PDP[4]	Medicare Advantage
		What you pay	
Generic	$25[9]	$15	$6[8]
Preferred brand name	25% ($500 max)[7,9]	15% ($350 max)	$70[8]
Non-preferred brand name	40% ($800 max)[7,9]	30% ($500 max)	$130[8]
Specialty generic/preferred (limited to 30-day supply)	25% ($350 max)[6,7]	15% ($150 max)	15% ($150 max)[8]
Specialty non-preferred (limited to 30-day supply)	40% ($400 max)[6,7]	15% ($150 max)	15% ($150 max)[8]

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[1]The fitness benefit varies by plan/area and may not be available on all plans. The fitness benefit includes a standard fitness membership. The information provided 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 and plan.
[2]OTC benefits have expiration timeframes. Call your plan or review your Evidence of Coverage (EOC) for more information.
[3]Out-of-pocket maximum excludes premiums, prescription costs, and non-Medicare covered benefits.
[4]In-network providers agree to limit what they will charge you. You pay a fixed dollar amount or percentage of the provider's negotiated amount.
[5]Costs for initial prescription and first fill. You pay 50% for third and additional fills at retail for 30-day supply. For maintenance prescriptions, use mail order or your local retail CVS Pharmacy store (90-day supply) for greater cost savings.
[6]CVS Specialty is the exclusive pharmacy for specialty medications.
[7]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.
[8]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. If you have not used Optum Home Delivery Pharmacy, you must approve the first prescription order sent directly from your doctor to the pharmacy before it can be filled. Prescriptions from the pharmacy should arrive within 5 business days after we receive the complete order. There may be other pharmacies in our network.
[9]CVS Caremark Mail Service Pharmacy is the exclusive mail service pharmacy for non-specialty medications.
This is a brief description of the features of the G.E.H.A High health plan. Before making a final decision, please read the Plan's Federal brochure (RI 71-006), available at geha.com/PlanBrochure. All benefits are subject to the definitions, limitations, and exclusions set forth in the Federal brochure.
Benefits, features, and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply.
Refer to geha.com/Prescriptions for formulary and specialty coverage for specific medications.

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.

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