

POSTAL SERVICE HEALTH BENEFITS

BLUE CROSS AND BLUE SHIELD FEDERAL EMPLOYEE PROGRAM

2026 MEDICARE & BLUE FOR USPS RETIREES & FAMILY MEMBERS



**Helping you get more
out of Medicare.
HERE FOR YOU.**

 **BlueCross.
BlueShield.**
Federal Employee Program.
fepblue.org

THE FEP ADVANTAGE



While Original Medicare (Medicare Parts A and B, which cover hospital and medical services) provides benefits, it doesn't cover everything. Things like prescription drugs, preventive dental care and hearing aids are not covered by Medicare. But they are covered by most FEP plans.

If you want to compare what you pay when Medicare is not primary, please download the Medicare at a Glance chart at fepblue.org/plan-summaries.

Using your Medicare + FEP ID cards together

When you receive services, you should take your Medicare ID card and your FEP member ID card. This will help ensure your claims process correctly. When Medicare is primary, your doctors will send claims to Medicare first, then Medicare will send the claim to us. There is no paperwork for you.

Boost your benefits with Medicare + FEP together

Medical benefits

When you combine your FEP coverage with Medicare Part A and Part B primary, we **eliminate** your out-of-pocket costs for covered medical services. With **FEP Blue Basic**, there is no deductible. With **FEP Blue Standard**, we waive your deductible when you have Medicare as your primary coverage.

You only pay:

- FEP premium
- Medicare premium
- Pharmacy cost shares

Pharmacy benefits

We have a prescription drug benefit exclusively for members who have Medicare. It's called the **FEP Medicare Prescription Drug Program (MPDP)**. With this benefit, members receive lower cost shares and more covered prescriptions than our traditional pharmacy benefit. Learn more on **pages 9-10**.

Over 99% of members choose to stay Blue each year because we have:

- **3 benefit plans** designed for every need and budget
- **Over 2 million doctors and hospitals**, plus over 65,000 retail pharmacies nationwide
- **No referrals** to receive care
- **100% commitment** to your overall health and wellness
- **Medical coverage** when you live or travel overseas
(Note: MPDP is not applicable overseas)

Choose the right FEP plan for your Medicare needs

When you combine Medicare with FEP, you get more benefits while lowering your costs. Since all our plans provide excellent coverage, you may be wondering which is right for you now that you're eligible for Medicare. We'll break down the benefits of each:

FEP Blue Standard®

This plan is best for people with Medicare Parts A and B who want high-value benefits.

-  It offers the **largest approved drug list** (formulary), making it a great choice for members with complex prescription needs.
-  When you combine it with Original Medicare, **we pay your deductible**, making it a deductible-free plan.
-  You'll get **extra coverage for services Medicare doesn't cover**, like hearing aids and preventive dental care.

FEP Blue Basic®

This option is great for people with Medicare Parts A and B who want a flexible plan with broad coverage across many types of care.

-  You'll **get up to \$800 back for paying your Medicare Part B premiums** when you combine your coverage.
-  You'll get **extra coverage for services Medicare doesn't cover**, like hearing aids and preventive dental care.
-  Members with Medicare get **enhanced prescription drug coverage**, including access to Mail Service.

FEP Blue Focus®

This plan has more limited benefits when paired with Medicare Parts A and B. If you expect to need more care beyond preventive checkups and generic drugs, it may not be the best fit. That's why this guide focuses on **FEP Blue Basic** and **FEP Blue Standard**.

-  It offers the most limited approved drug list (formulary) and doesn't include access to Mail Service.
-  It doesn't cover services such as hearing aids and preventive dental care.

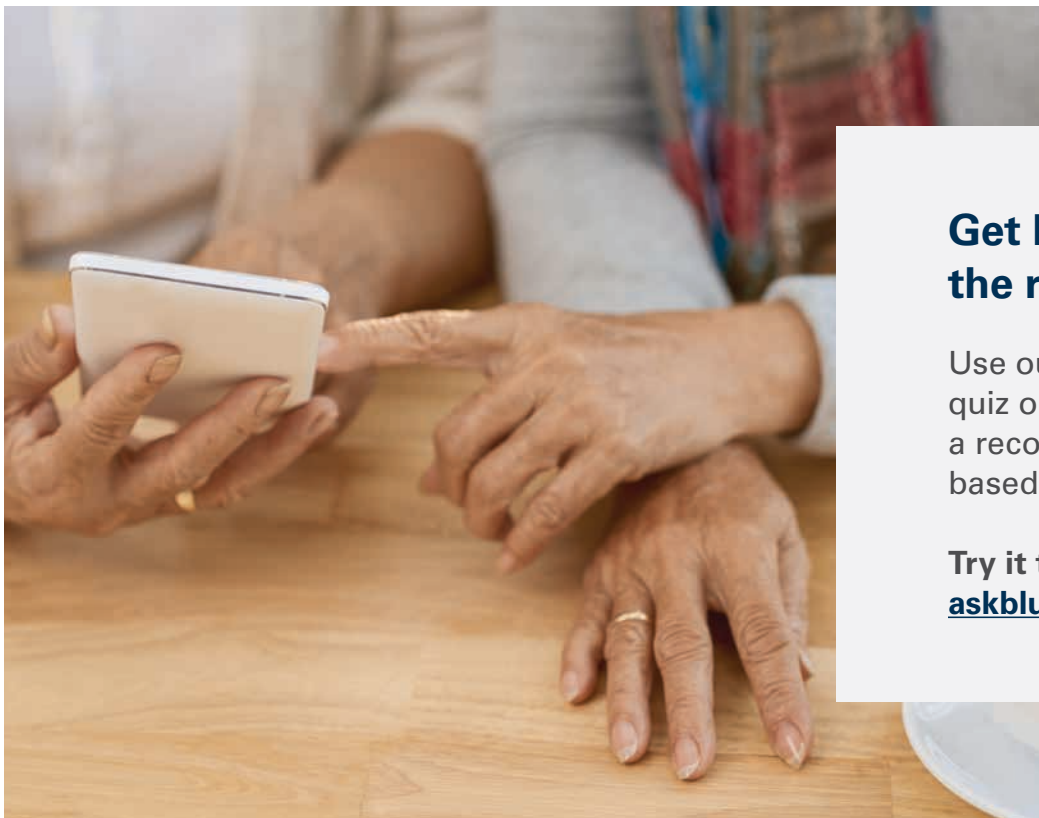
For more information about Medicare, refer to Medicare At A Glance at fepblue.org/plan-summaries.

With both **FEP Blue Basic** and **FEP Blue Standard**, you have access to a large network of providers. With **FEP Blue Standard**, you have the added benefit of providers outside of the network.

Enrolling in a new plan option

Keep in mind that if your needs change, you'll be able to switch plans annually during **Open Season, which kicks off November 10 and ends December 8, 2025.**

You'll also have the opportunity to make changes if you have a qualifying life event (QLE), such as marriage or divorce.



Get help finding the right plan

Use our interactive quiz online to receive a recommendation based on your needs.

Try it today at askblue.fepblue.org.

OPM is your retirement office. Visit opm.gov/retire to learn more.
If you're still working, you can reach out to your HR department for assistance.

FEP medical benefits with Medicare Part A and Part B primary

When you combine your FEP coverage with Medicare Parts A and B primary, we **eliminate your out-of-pocket costs for covered medical services**. That means your expenses are more predictable since you'll only pay your FEP premium, your Medicare premium and your pharmacy cost shares.

With **FEP Blue Basic** and **FEP Blue Standard**, you pay nothing for in-network medical services.

Benefit	FEP Blue Basic	FEP Blue Standard
Virtual doctor visits through Teladoc Health®	\$0 copay	\$0 copay
Primary care doctor	\$0 copay	\$0 copay
Specialists	\$0 copay	\$0 copay
Mental health visits	\$0 copay	\$0 copay
Urgent care centers	\$0 copay	\$0 copay
Chiropractic care	\$0 copay for up to 20 visits	\$0 copay for up to 12 visits
Physical therapy ¹	\$0 copay for up to 50 visits	\$0 copay for up to 75 visits
Inpatient hospital	\$0 copay	\$0 copay
Outpatient hospital	\$0 copay	\$0 copay
Surgery	\$0 copay	\$0 copay
ER (Accidental injury)	\$0 copay	\$0 copay
ER (Medical emergency)	\$0 copay	\$0 copay
Lab work (Such as blood tests)	\$0 copay	\$0 copay
Diagnostic services (Such as sleep studies, X-rays, CT scans)	\$0 copay	\$0 copay

FEP medical out-of-pocket maximums

Benefit	FEP Blue Basic	FEP Blue Standard
Out-of-Pocket maximum (Preferred providers)	\$7,500 for Self Only \$15,000 for Self + One and Self & Family	\$6,000 for Self Only \$12,000 for Self + One and Self & Family

Monthly FEP premiums

When you're retired, you pay your premium monthly instead of bi-weekly. The premium is usually deducted from your monthly annuity.

	FEP Blue Basic	FEP Blue Standard
SELF ONLY	\$276.45	\$411.89
Enrollment Code	33A	33D

SELF + ONE	\$679.99	\$919.58
Enrollment Code	33C	33F

SELF & FAMILY	\$774.62	\$1,038.29
Enrollment Code	33B	33E

Important terms you'll want to know

COINSURANCE: *The percentage you pay for a covered service after we've paid our portion, sometimes called an allowance.*

COPAY: *The set amount you pay for a service.*

DEDUCTIBLE: *The set amount you pay before we start paying our portion of your service.*
(NOTE: Your Medicare and FEP Blue Standard deductibles are waived when you combine your coverage.)

OUT-OF-POCKET MAXIMUM: *A cap (or maximum) on how much you'll pay for health care during the year, sometimes called a catastrophic maximum.*

PREMIUM: *The amount you pay to have health insurance coverage.*

Updates for 2026



Changes to all of our plans



Simpler access to hospice care

- You do not need to request prior approval for outpatient hospice care.



Expanded preventive care coverage

- We cover an osteoporosis screening starting at age 40.
- We cover PrEP (pre-exposure prophylaxis) drugs for HIV prevention.



Pharmacy benefit updates

- We updated the out-of-pocket maximum to \$2,100 for members in our Medicare Prescription Drug Program.



New support for weight management resources

- We will offer a Weight Management Program to eligible members 13 and over.

Changes to FEP Blue Basic only

- We set a new cost share for generic (Tier 1) drugs and retired reduced drug benefits.
- We updated the cost share for Preferred brand name (Tier 2) drugs, Non-preferred brand name (Tier 3) drugs and Specialty (Tier 4 and 5) drugs.

Changes to FEP Blue Standard only

- We updated the cost share for Preferred brand name (Tier 2) drugs, Non-preferred brand name (Tier 3) drugs and Specialty (Tier 4 and 5) drugs.
- We updated the cost share for accidental dental care; specialist and emergency (ER) visits; specific contraceptives and reproductive services; medical devices and supplies; and inpatient and outpatient care and supplies.



This is not a full list of changes. For the full list and details, including the sex trait modification change, see the Blue Cross and Blue Shield Service Benefit Plan brochures for the PSHB Program at fepblue.org/brochure.

Understanding the FEP Medicare Prescription Drug Program

The Medicare Prescription Drug Program (MPDP) is your prescription drug coverage when you have FEP and Medicare. **You must be enrolled in MPDP in order to have FEP prescription drug coverage**—this is a PSHB requirement. **If you opt out or disenroll, you will no longer have any prescription drug benefits with FEP.** This Medicare Part D plan is included as part of your FEP premium.



How MPDP works for you

-  You'll enjoy the **same FEP health plan benefits** you know and trust.
-  You'll have a **larger approved drug list** than the traditional FEP pharmacy program.
-  You'll **pay less out-of-pocket** for higher-cost drugs than the traditional FEP pharmacy program.
-  You'll have peace of mind with a **\$2,100 annual cap** on your prescription costs.

Understanding MPDP drug tiers

With MPDP, you have four drug tiers. Download the full MPDP drug list for our plans at fepblue.org/medicarerx.

Tier 1 Generics	Tier 2 Preferred Brand Name	Tier 3 Non-preferred Brand Name	Tier 4 Specialty Drugs
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For more information about MPDP, refer to our Medicare Prescription Drug Program brochure or visit fepblue.org/medicarerx.

A closer look at your pharmacy benefits for each tier with MPDP

FEP Blue Standard MPDP Benefits	
In-network Retail Pharmacy <i>(For a 30-day supply)</i>	Tier 1: \$5 copay Tier 2: \$35 copay Tier 3: 50% coinsurance Tier 4: \$60 copay
FEP Mail Service Pharmacy <i>(For a 90-day supply)</i>	Tier 1: \$5 copay Tier 2: \$85 copay Tier 3: \$125 copay Tier 4: \$150 copay
FEP Specialty Pharmacy <i>(For a 30-day supply)</i>	Your specialty drug benefits are in Tier 4 (see above)
Annual pharmacy out-of-pocket maximum	\$2,100 per member

FEP Blue Basic MPDP Benefits	
In-network Retail Pharmacy <i>(For a 30-day supply)</i>	Tier 1: \$10 copay Tier 2: \$45 copay Tier 3: 50% coinsurance Tier 4: \$75 copay
FEP Mail Service Pharmacy <i>(For a 90-day supply)</i>	Tier 1: \$15 copay Tier 2: \$95 copay Tier 3: \$125 copay Tier 4: \$150 copay
FEP Specialty Pharmacy <i>(For a 30-day supply)</i>	Your specialty drug benefits are in Tier 4 (see above)
Annual pharmacy out-of-pocket maximum	\$2,100 per member

How the pharmacy out-of-pocket maximum helps you

When you combine your FEP coverage with Medicare, typically your only out-of-pocket cost is for prescription drugs. With MPDP, we cap the amount you pay for prescriptions at **\$2,100**. **This is the most you'll pay for your prescriptions annually.**

Helping you stay healthy with rewards and savings

As your health insurer, our #1 goal is to support your health and wellness during all phases of your life. FEP for USPS retirees offers a variety of wellness programs, incentives and discounts that support your overall health.



Get up to \$800 back with the Medicare Reimbursement Account (MRA)

When you combine your Original Medicare coverage with **FEP Blue Basic**, we reimburse you up to \$800 per year for paying Medicare Part B premiums. If your spouse also has Medicare, you can receive up to \$1,600 together. **You can use this benefit even if Medicare isn't your primary coverage.**



To learn more about submitting your MRA claim, scan the QR code or visit fepblue.org/mra.



Earn \$50 for taking the Blue Health Assessment

With the Blue Health Assessment (BHA), you can get a snapshot of your health. Just take a simple online quiz and, once it's complete, you'll get instant feedback on ways you can improve or maintain your health. Take the assessment to your next doctor's appointment so you can discuss your results with your primary doctor. **FEP Blue Basic** and **FEP Blue Standard** members can earn \$50 the first time they take the BHA in 2026.



Earn \$120 for completing Daily Habits

Daily Habits helps you set and reach your health goals. Whether you want to eat better, stress less or get help managing a chronic condition, Daily Habits can help. **FEP Blue Basic** and **FEP Blue Standard** members can earn \$120 for completing three eligible goals in 2026.

Spend your rewards with the MyBlue® Wellness Card

Any incentive dollars you earn completing wellness activities are loaded onto a prepaid debit card.

How to use your incentive dollars

You can use up to **\$150** of your funds annually for specific products through Blue365 or pay for qualified medical expenses with your card.

Explore wellness programs to help feel your best

Get support for managing your weight and diabetes, plus talk to a doctor 24/7 through your telehealth benefit. Take control of your health and save money with all these tools in one place.



Telehealth Services

Get general medical care, mental health support, dermatology services and nutritional counseling all from the comfort of home and at no out-of-pocket cost.



Weight Management Program

Members who meet Body Mass Index (BMI) criteria can get a digital scale and ongoing weight management support.



Diabetes Management Program

FEP Blue Basic and **FEP Blue Standard** members can get an advanced digital glucose meter, free unlimited test strips and lancets, plus 1-on-1 support at no extra cost.

Learn more about our health and wellness programs at fepblue.org/healthwellness.



Treat yourself and your health with Blue365

FEP members enjoy access to Blue365, an exclusive discount program that offers hundreds of ways to save on everything, from gym memberships and fresh meal kits to travel.

Get 31%-72% off the cost of hearing aids and hearing aid supplies.

You can even combine the discount with your \$2,500 hearing aid benefit.*

Get discounts at local gyms and online fitness classes through Fitness Your Way, which gives you access to many gyms under one membership, or build a home gym with discounts on exercise equipment.

Get healthy meals, fruits, snacks and groceries delivered home

straight to your door through partners like Sunbasket, Mom's Meals and more.

Get discounts on popular travel destinations and travel insurance to protect your vacations.

Sign up at blue365deals.com/fep to start saving.

*You must receive prior approval before buying hearing aids to receive the \$2,500 benefit.

See how FEP Blue Standard can work for you

Both **FEP Blue Standard** and **FEP Blue Basic** offer great advantages. But if you take many brand name and/or specialty drugs, **FEP Blue Standard** may be the better fit—just like it is for Rita.



Why **FEP Blue Standard** works well for Rita



Rita (68) has Medicare Parts A & B primary. She sees a cardiologist and a rheumatologist several times a year, travels to visit family and takes Preferred brand name drugs, plus one specialty drug.

"I take multiple brand name and specialty medications."

- **The deductible for FEP Blue Standard is waived** with Medicare primary for Rita. That means covered doctor's visits, labs and hospital care cost \$0 out-of-pocket.
- With the largest formulary + MPDP, Rita gets comprehensive drug coverage and lower cost shares on higher-cost medications. **Annual prescription costs are capped at \$2,100.**
- The **Hypertension Management Program** helps Rita manage her blood pressure at home and she can share her readings with her cardiologist during visits.
- The **24/7 Nurse Line** and **no-cost telehealth services** help Rita get care when she travels and isn't feeling well.

Rita knows what she'll spend each year, even with frequent doctor visits and complex prescription needs.

See how FEP Blue Basic can work for you

With an \$800 reimbursement for your Medicare Part B premium and broad drug coverage, **FEP Blue Basic** may be the better fit—just like it is for Marco.



Why FEP Blue Basic works well for Marco



Marco (66) has Medicare Parts A & B primary. He gets annual checkups and labs, plus two generic drugs delivered to his home. He also completes all of his annual FEP incentive programs to get the most out of his plan.

"I see my doctor mostly for checkups and get two generic medications by mail."

- **There is no deductible for FEP Blue Basic members.** That means covered medical services cost \$0 for Marco.
- MPDP gives Marco the convenience of the Mail Service Pharmacy program. **He pays \$15 every 90 days to have each of his generic prescriptions mailed to him.**
- **FEP reimburses Marco up to \$800 per year** for paying his Medicare Part B premiums through the MRA, lowering his overall cost of coverage.
- **Completing the BHA and Daily Habits goals earns Marco \$170**, helping him pay for his prescriptions and giving him extra to spend on over-the-counter medicines or other wellness needs throughout the year.

Marco often pays the lowest overall cost by using all the incentives available to him as an FEP Blue Basic member.

Important things to keep in mind when selecting a plan

- ✓ **Health needs tend to change as we age.** Remember if you're "healthy" now, you may have greater health needs later. Investing in your coverage today ensures you'll have the coverage you need later.
- ✓ **Medicare provides you with individual coverage.** If you have dependents, such as a child under 26 or a spouse, you want to keep their needs in mind too. FEP provides coverage for your eligible family members. If you pass away, your dependents will be able to keep their coverage (including children until age 26) as long as you're enrolled in a Self + One or Self & Family plan at the time of death.
- ✓ **Once you retire, we keep you in the same insurance group as actively working employees.** If you combine your coverage with Medicare, you'll get added benefits that active employees do not receive.
- ✓ **OPM continues to pay a portion of your FEP premium (about 70%) once you retire.** You will pay your premium monthly instead of bi-weekly.
- ✓ **Consider the cost savings of having a prescription out-of-pocket maximum.** With your MPDP benefit, you get an annual out-of-pocket maximum for prescription drugs. This cap limits what you'll pay each year for your essential medications.

Keep in mind that if your needs change, you'll be able to switch plans annually during **Open Season, which kicks off November 10 and ends December 8, 2025.**

You'll also have the opportunity to make changes if you have a qualifying life event (QLE), such as marriage or divorce.

What to know about suspending your FEP coverage

Remember, you must have at least five years of continuous enrollment in the PSHB Program before you retire. **Once you do retire, if you cancel your coverage, you can never re-enroll in the program.** If you want to try a different plan such as Medicare Advantage or Tricare, you should suspend your coverage. You can only suspend your coverage as a retired employee.

Learn more at opm.gov/retire.

How to find a provider and make an appointment:

- 1) Check Medicare participation.** Search Medicare's Care Compare to confirm your doctor accepts Medicare.
- 2) Confirm they're in FEP's network.** Use our National Doctor & Hospital Finder to verify the provider is Preferred (in-network).
- 3) Call to book.** Once you've found a match, contact the provider's office directly to set up your appointment. You don't need a referral to see a doctor with FEP.



Understanding private contracts and your coverage

Some providers may ask you to sign a contract to bill you directly for services covered by Medicare. We don't recommend signing this. If you sign the contract, Medicare will not cover your service. We'll only cover what we would have if Medicare paid their portion. You'll be responsible for all additional charges.

Medicare facts and reminders

You're eligible for Medicare starting three months before you turn 65. Individuals with certain disabilities, kidney failure (end-stage renal disease) or ALS (Lou Gehrig's disease) may be eligible earlier.

Medicare has four parts: Part A, Part B, Part C and Part D.

Part A (Original Medicare): Hospital insurance

Part A covers inpatient hospital, skilled nursing facility, hospice and home health care. Most federal employees take Part A as soon as they can because it's free as long as you've paid enough in Medicare taxes (this typically means you've worked for at least 10 years).

Part B (Original Medicare): Doctor's insurance

Part B covers care you receive from doctors, preventive services, outpatient care, home health care and durable medical equipment, such as walkers and wheelchairs.

You pay a premium for Part B based on your income.

Medicare Part A and Part B are considered Original Medicare.

Part C: Medicare Advantage

Part C covers care from a specific network of providers. With Medicare Advantage, you may need a referral to see a specialist, plans generally don't cover overseas care and out-of-network costs vary by plan.

That's why **we recommend Original Medicare combined with FEP**. It covers your Medicare Part B cost share in full, gives you access to over 2 million doctors and hospitals across the U.S., includes overseas care and you never need a referral for a specialist. (With **FEP Blue Standard**, you can also see out-of-network providers.)

Part D: Rx Drug Coverage

Part D helps you pay for prescription drugs. FEP offers the Medicare Prescription Drug Program (MPDP) exclusively for members at no extra premium cost. If you're a PSHB member eligible for Medicare, enrollment in MPDP is required to have FEP prescription drug coverage.

If you choose to enroll in a different Part D plan instead of MPDP, you will have to pay a separate premium and you miss out on prescription drug coverage through FEP.

What to know about Medicare enrollment at 65

As long as you've received social security benefits for at least four months prior to turning 65, the federal government will **automatically enroll** you in Original Medicare. You'll receive a welcome packet with your Medicare card three months before your 65th birthday.

Members in Puerto Rico or U.S. citizens living outside the U.S. will get Part A automatically, but will need to sign up for Part B.



Once you have **five years of continuous coverage** in PSHB/FEHB before retirement, you can keep your PSHB coverage in retirement.

Visit [medicare.gov](https://www.medicare.gov) for more detailed information on Medicare benefits.

Can I delay my Part B enrollment?

As part of PSHB, most members will be required to enroll in Medicare Part B unless you have a qualifying exception.



Choosing not to enroll in Part B if you do not have an exception means you would lose your PSHB coverage. Once you leave PSHB coverage, you can never come back into the program.

In addition, you would be subject to the Medicare Part B late enrollment penalty if you decide to enroll in Part B later.

The penalty is a 10% premium increase for each year you delay your enrollment.

Exceptions to Part B and Part D enrollment

There are a few exceptions to the Part B and Part D requirements:

- Overseas members
- Retirees enrolled in VA benefits
- Members eligible for Indian Health Services Benefits

Understanding IRMAA and why it's still important to enroll in MPDP

Enrolling in Medicare Part D is a PSHB requirement. All PSHB carriers will have this requirement. If you choose to disenroll, you would need to enroll in a different plan that provides creditable coverage. This would require a separate premium and you would still be subject to the IRMAA (Income-Related Monthly Adjustment Amount). With FEP, you do not have a separate FEP premium for your Part D coverage.



HERE FOR YOU

Looking for dental and vision coverage?

We also offer quality dental and vision plans to USPS retirees and their families through the Federal Employees Dental and Vision Insurance Program (FEDVIP).



FEP Dental[®]
bcbsfeddental.com



FEP Vision[®]
bcbsfevision.com

@fepblue



fepblue.org



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This is a summary of the features of the Blue Cross and Blue Shield Service Benefit Plan. Before making a final decision, please read the Postal Service Health Benefits Program brochures (FEP Blue Standard and FEP Blue Basic: RI 71-020; FEP Blue Focus: RI 71-025). All benefits are subject to the definitions, limitations and exclusions set forth in the brochures. The Blue Cross Blue Shield Association is an association of independent, locally operated Blue Cross and Blue Shield companies.

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