FEHB & Medicare Enrollment Checklist

A step-by-step reference for coordinating your FEHB or PSHB coverage with Medicare

Find the section below that matches your situation, then work through the general checklist at the end. This is educational information, not personalized advice — when in doubt, confirm details with your FEHB or PSHB plan brochure, your retirement system, or Medicare directly.

If You're an Active Federal Employee Approaching 65

- [ ] **Confirm your Initial Enrollment Period (IEP) dates.** It runs 3 months before your birthday month, includes your birthday month, and extends 3 months after.
- [ ] **Decide on Part A.** It's premium-free for most people and can help cover some costs FEHB doesn't cover. If you contribute to an HSA, however, review the timing rules below before enrolling.
- [ ] **Decide whether to defer Part B.** Since your FEHB coverage generally remains primary while you're actively employed, many active employees delay Part B and its premium until retirement.
- [ ] **If you have a Health Savings Account (HSA), plan your Part A timing carefully.** Part A can become retroactively effective up to 6 months, which can create excess HSA contributions if you don't stop contributing in time.
- [ ] **Know your Part B Special Enrollment Period.** If you defer Part B while covered by FEHB based on current employment, you generally can use a Special Enrollment Period when you retire or lose that coverage, allowing you to enroll in Part B without the usual late-enrollment penalty.
- [ ] **When you retire after delaying Part B, ask your employing office to complete Form CMS-L564 (Request for Employment Information).** This documents your employer coverage and helps you enroll in Part B during your Special Enrollment Period.

If You're Newly Eligible for Medicare as an Annuitant

- [ ] **Confirm whether you'll be automatically enrolled** if you already receive Social Security or Railroad Retirement Board benefits, or need to sign up yourself through Social Security.
- [ ] **Decide on Part B.** Check whether your FEHB plan reimburses part of the Part B premium or waives cost-sharing once Medicare is primary — this can change the math.
- [ ] **Check whether your FEHB plan offers Medicare drug benefits or a Medicare Advantage option**, and compare them with a standalone Part D or Medicare Advantage plan.
- [ ] **Notify your FEHB plan as soon as you enroll in Medicare** so your claims coordinate correctly.
- [ ] **Use your one-time Qualifying Life Event window**, starting 30 days before Medicare eligibility, to switch FEHB plans if a different one now fits better.
- [ ] **If you're considering a standalone Medicare Advantage plan instead of one through FEHB, contact your retirement system about formally suspending — not canceling — your FEHB coverage** to preserve your right to re-enroll later.

If You're a PSHB Annuitant

- ☐ **Confirm whether you're required to enroll in Medicare Part B to keep PSHB coverage in retirement**, and check whether an exception applies to you.
- ☐ **If the Part B requirement applies to you, enroll before or during your retirement transition.** Failing to enroll can mean losing eligibility for PSHB coverage, with no option to enroll later even if you subsequently sign up for Part B.
- ☐ **Understand the consequences before opting out of your PSHB plan's Medicare drug benefits.** If you're eligible for Part D and opt out or disenroll, you will lose prescription drug coverage through PSHB. If you don't enroll in a separate Part D plan, you will have no prescription drug coverage.
- ☐ **Update your enrollment profile as soon as you or a covered family member has Medicare**, to avoid billing and coordination problems.

For Everyone

- ☐ **Check the current standard Part B premium and IRMAA income brackets for the year.** They change annually.
- ☐ **Review the Medicare coordination section of your FEHB or PSHB plan brochure.**
- ☐ **Before enrolling in a separate Part D plan, check how your FEHB or PSHB prescription drug coverage coordinates with Medicare.**
- ☐ **Save Medicare's Benefits Coordination & Recovery Center number — 1-855-798-2627** — for reporting changes in your other health coverage.
- ☐ **Report changes in your coverage promptly**, rather than waiting for a billing problem to surface.

Who Pays First: FEHB and Medicare

Which coverage pays your medical claims first, by employment and coverage situation

Your Situation	Primary Payer	Secondary Payer
Active federal employee (or covered spouse is active)	**FEHB**	Medicare
Annuitant (or covered spouse is an annuitant)	**Medicare**	FEHB
Enrolled in Medicare Part B only	**Medicare (Part B services)**	FEHB (other services)
End-Stage Renal Disease (ESRD) first 30-month coordination period*	**FEHB**	Medicare
End-Stage Renal Disease (ESRD) after 30-month coordination period	**Medicare**	FEHB
Medicare due to disability, covered through active employment	**FEHB**	Medicare
Medicare due to disability, covered as an annuitant	**Medicare**	FEHB
Workers' compensation, determined unable to return to duty**	**FEHB**	Medicare

**Generally, FEHB pays first during the 30-month ESRD coordination period. If Medicare was already primary before ESRD eligibility, Medicare generally remains primary.*

***For claims related to the workers' compensation injury or illness, workers' compensation pays first.*

Source: OPM, “Understand Which Insurance Pays First.” Medicare rules determine whether Medicare or FEHB is primary in any given situation.
opm.gov/healthcare-insurance/medicare/understand-which-insurance-pays-first/