

2026 Blue Cross and Blue Shield Service Benefit Plan - Standard and Basic Option**Section 9. Coordinating Benefits With Medicare and Other Coverage****When you have Medicare****Medicare prescription drug coverage (Part D)**

• Medicare Prescription Drug Plan (PDP) Employer Group Waiver Plan (EGWP)

If you are enrolled in Medicare Part A and/or Part B, and are not enrolled in a Medicare Advantage Prescription Drug Plan (MAPD), you will be automatically enrolled into our Medicare PDP EGWP. Our PDP EGWP is a prescription drug benefit for Postal Service annuitants and their covered Medicare-eligible family members. This allows you to receive benefits that will never be less than the standard prescription drug coverage that is available to members with non-PDP EGWP prescription drug coverage. But more often you will receive benefits that are better than members with standard non-PDP EGWP prescription drug coverage. **Note: You have the choice to opt out of or disenroll from our PDP EGWP at any time and may obtain prescription drug coverage outside of the PSHB Program.**

When you are enrolled in our Medicare PDP EGWP for your prescription drug benefits, you continue to have our medical coverage.

Members with higher incomes may have a separate premium payment for their Medicare Part D Prescription Drug Plan (PDP) benefit. Please refer to the part D-IRMAA section of the Medicare website: <https://www.medicare.gov/drug-coverage-part-d/costs-for-medicare-drug-coverage/monthly-premium-for-drug-plans> to see if you would be subject to an additional premium.

For people with limited income and resources, Extra Help is a Medicare program to help with Medicare prescription drug plan costs. Information regarding this program is available through the Social Security Administration (SSA) online at www.socialsecurity.gov, or call the SSA at 800-772-1213, TTY 800-325-0778. You may also contact the number on the back of your ID card.

The PDP EGWP opt out process:

If you were automatically group enrolled into our PDP EGWP and choose to opt out, you may have to wait to re-enroll during Open Season or for a QLE. Contact us at 888.338.7737 for assistance.

The PDP EGWP disenrollment process:

When you are enrolled in our PDP EGWP, you may choose to disenroll at any time. For information about how to disenroll, visit us at www.fepblue.org/medicarerx and look for the disenrollment form under the auto enrollment process and follow the instructions provided.

Warning: If you opt out of or disenroll from our PDP EGWP, you will not have any PSHB Program prescription drug coverage.

Note: If you choose to opt out of or disenroll from our PDP EGWP, your premium will not be reduced, and you may have to wait to re-enroll when and if you are eligible. If you do not

maintain creditable coverage, re-enrollment in our PDP EGWP may be subject to a late enrollment penalty. Contact us for assistance at 888.338.7737.