David B. Snell, the Director of the Federal Benefits Service Department at the National Active and Retired Federal Employees (NARFE) Association says that his usual response to the Medicare Part B (“to B or not to B”) question is with another question.

“If you wake up the morning of your 65th birthday, do you need twice as much health insurance than you did the night before? If not, if you are only using your federal coverage for routine exams and tests up until you turn age 65, why pay another $1,200 or more (depending on your income) for duplicate medical coverage under Part B.

Certainly if your medical condition requires more extensive and frequent medical treatment, or, if you will sleep better knowing you have complete coverage for any medical possibility, then it would be worth enrolling in Part B. If you decide to enroll in Part B, then help your out-of-pocket expenses by looking at other FEHBP plans that are less expensive. By law, Medicare coverage is primary when you retire, so your FEHBP plan basically acts as a Medigap plan — with the important exception of prescription drug coverage which Part B does not include.”