

UT CARE™ Medicare PPO

09/28/2022

On Jan. 1, 2023, approximately 30,000 retirees from the University of Texas System (UTS) will become members of UT CARETM Medicare PPO (UT CARETM). UT CARE is a Blue Cross and Blue Shield of Texas (BCBSTX) open access Medicare Advantage PPO plan for UTS retirees.

What is an open access plan?

- Open access plans are national plans without network restrictions. That means plan members
 may see any provider in the U.S. who accepts Medicare assignment and providers will submit
 the claims to BCBSTX, regardless of the provider's contract or network status with BCBSTX. The
 provider doesn't need to participate in BCBSTX Medicare Advantage networks or in any other
 BCBSTX networks.
- Members' coverage levels are the same inside and outside their plan service area nationwide for covered benefits.

What does the plan cover?

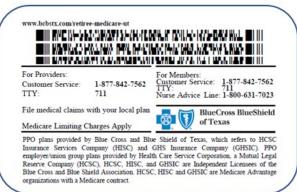
- The plan covers the same medical benefits as Medicare Parts A and B and provides additional benefits beyond what Medicare covers. The group's Part D prescription drug benefits will continue to be provided by a separate carrier.
- Plan members have little to no out-of-pocket cost for services covered by Medicare. Members
 may have deductibles, copays, and coinsurance, for some care and services, especially when not
 covered by Medicare.

Providers and members should call the number on the member ID card for details about coverage. Before providing care to our members, you should check eligibility and benefits via Availity® Essentials or your preferred web vendor.

How do you recognize UT CARE members?

The front of a UT CARE member ID card will include the UT CARE plan name as well as "Blue Cross Group Medicare Advantage Open Access (PPO)SM" to clearly identify the plan type.







How are referrals and prior authorizations handled for UT CARE?

- Referrals aren't required.
- Prior authorization may be required for certain services from BCBSTX Medicare Advantage PPO contracted providers. <u>Learn more</u>.
- Non-participating providers aren't required to follow utilization management guidelines. However, you may request a review prior to rendering services to confirm medical necessity.

How do you get reimbursed?

Follow the billing instructions on the member's ID card. When seeing these members, you'll submit the claims to BCBSTX and not Medicare. If you have questions about claims, call 1-877-842-7562.

- If you're a Medicare Advantage-contracted provider with any Blue Cross and Blue Shield (BCBS) plan, you are paid your contracted rate.
- If you're a Medicare provider who isn't contracted for Medicare Advantage with any BCBS plan, you are paid the Medicare-allowed amount for covered services, less any member cost-share.
 You may not balance bill the member for any difference in their charge and the allowed amount.

Non-participating providers are under no obligation to treat plan members except in emergency situations. Non-participating providers who agree to see a plan member but don't have a contract with any BCBS plan should send BCBSTX the bill to meet your obligations as a provider under Medicare assignment, per Centers for Medicare and Medicaid Services regulations.

More questions about UT CARE?

Call the number on the member's ID card (1-877-842-7562) or email TexasMedicareAdvantageNetwork@bcbstx.com.

UT CARE™ Medicare PPO is an open access Medicare Advantage PPO plan. On occasion, members may receive automated communications that reference plan name 'Blue Cross Group Medicare Advantage Open Access (PPO)™.' This plan name also refers to UT CARE™ Medicare PPO.

Verification of eligibility and/or benefit information is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility, any claims received during the interim period and the terms of the member's certificate of coverage applicable on the date services were rendered.

Availity is a trademark of Availity, L.L.C., a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSTX.

PPO plans provided by Blue Cross and Blue Shield of Texas, which refers to HCSC Insurance Services Company (HISC) and GHS Insurance Company (GHSIC). PPO employer/union group plans provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC). HCSC, HISC, and GHSIC are Independent Licensees of the Blue Cross and Blue Shield Association. HCSC, HISC, and GHSIC are Medicare Advantage organizations with a Medicare contract. Enrollment in these plans depends on contract renewal.