



BlueCross BlueShield
of Texas

UT CARE™

UT CARE™ Medicare PPO



UT CARE Medical and Supplemental Benefit Highlights

2024 UTS Retiree Medical Benefits Overview

	UT CARE™ Medicare PPO*
	In-Network and Out-of-Network
Annual Medical Deductible	\$0
Annual Out-of-Pocket Maximum	\$0
Inpatient Hospital Services	
Inpatient Hospital – Acute	\$0 copay
Inpatient Mental Health Care	\$0 copay
Skilled Nursing Facility	
Benefit Period 1–20 days	\$0 copay
Benefit Period 21–180 days	\$0 copay Members allowed 180 days
Emergent and Urgent Care	
Emergency Care (Worldwide) Urgently Needed Services (Worldwide)	\$0 copay
Ambulance Services (Ground & Air)	\$0 copay

UT CARE Medicare PPO	
In-Network and Out-of-Network	
Health Care Professional Services	
Primary Care Physician Services	\$0 copay
Physician Specialist Services	\$0 copay
Outpatient Rehabilitation Services	
Cardiac Rehabilitation Services	\$0 copay Medicare allows a maximum of 2 one-hour sessions per day up to 36 sessions in 36 weeks.
Pulmonary Rehabilitation Services	\$0 copay Medicare allows a maximum of 36 sessions.
Occupational & Physical Therapy and Speech Pathology Services	\$0 copay Medicare allows unlimited visits when medically necessary.
Outpatient Mental Health	
Psychiatric & Mental Health Specialty Services	\$0 copay

UT CARE Medicare PPO	
In-Network and Out-of-Network	
Outpatient Substance Abuse Services	
Outpatient Substance Abuse & Opioid Services	\$0 copay
Outpatient Diagnostic/Therapeutic Radiation Services	
Lab Services, Diagnostic Procedures, Therapeutic Radiology, Diagnostic Radiology Services/X-Ray, Advanced Imaging (MRI, MRA, CT Scan, PET)	\$0 copay
Other Outpatient Services	
Outpatient Hospital Services, Ambulatory Surgical Center (ASC) Services, End-Stage Renal Disease/ Dialysis Services	\$0 copay
DME, Prosthetics, Diabetic Supplies	
Durable Medical Equipment (DME)/Medical Supplies Diabetes Supplies and Services	\$0 copay
Medicare Preventive Services	
Medicare-covered Preventive Services	\$0 copay
Medicare Part B Rx Drugs	
Medicare Part B Rx Drugs	0% coinsurance

UT CARE Medicare PPO

In-Network and Out-of-Network

Supplemental Benefits (These are non-Medicare covered benefits)

Routine Hearing Exam

Routine Hearing Exam

1 routine hearing exam each year

\$0 copay

Hearing Aid Allowance

\$1,000 per ear, once every 3 years

Other Supplemental Benefits

Routine Chiropractic Services

\$0 copay
(35 visits per year)

Private Duty Nursing

\$0 copay
(90 visits per year)

Hearing Services

Your plan includes benefits through TruHearing or another hearing provider.

Exams

- A hearing exam/year plus necessary follow-up visits for fitting and adjustments. \$0 copay.

Hearing aids

- \$1,000 per ear hearing aid allowance, once every 3 years.
- TruHearing offers discounts on prescription hearing aids.

Over-the-Counter (OTC) Hearing Aids

- TruHearing provides discounts on OTC hearing aids, but the plan hearing aid allowance does not apply.





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TruHearing®

Example Savings (per aid)



Product	Retail Price	TruHearing Price	Savings
+ TruHearing Advanced	\$2,370	\$1,300	\$1,070
+ Signia® Active	\$2,339	\$995	\$1,344
+ Widex Moment® 110	\$1,458	\$895	\$563
+ Oticon More® 3	\$3,375	\$1,525	\$1,850
+ ReSound ONE® 7	\$2,276	\$1,770	\$506
Starkey Evolv AI® 2000	\$2,682	\$1,625	\$1,057
+ Phonak® Audéo® P-R50	\$2,450	\$1,395	\$1,055

+ Rechargeable | Listed products are smartphone-compatible²



Schedule an appointment

1-888-990-5523 | TTY: 711

Hours: 8am–8pm, Monday–Friday



Check your hearing

TruHearing.com/TXMA-HS

Your benefit also includes:



- + Risk-free 60-day trial period
- + 1 year of follow-up visits
- + 80 free batteries per non-rechargeable hearing aid
- + Full 3-year manufacturer warranty

Health and Wellness Benefits

Included in your plan, you will have access to extra health and wellness benefits:

- MDLIVE® Virtual Visits
- 24/7 Nurseline
- Blue365®
- TruHearing®-
- SilverSneakers® Fitness Program
- Private Duty Nursing
- Hinge Health
- Livongo®
- Omada®
- Learn to Live
- Airrosti®
- Wondr Health™
- Catapult Health

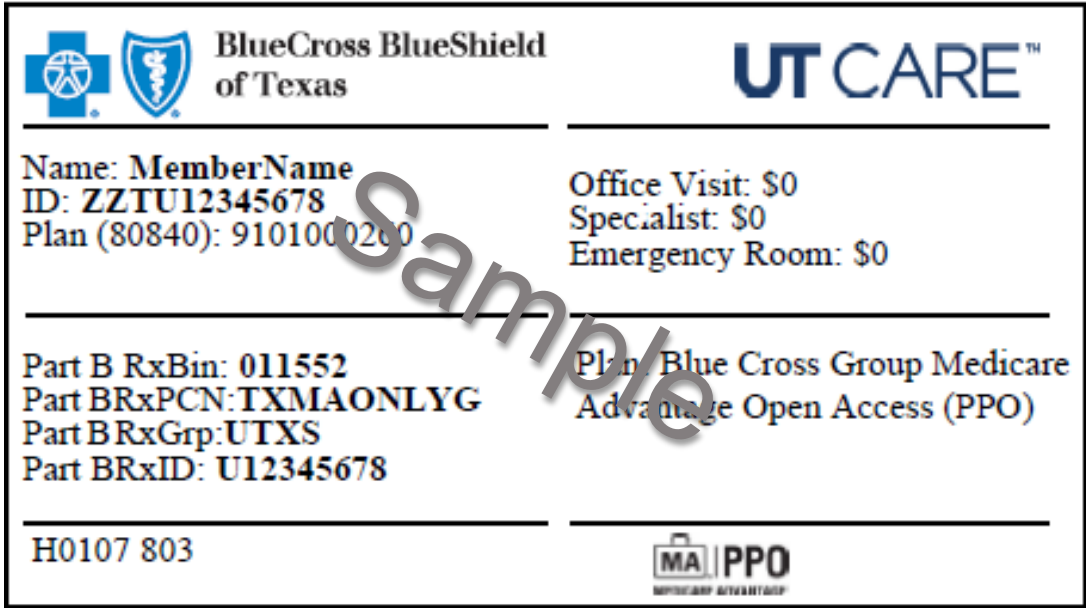
Visit the UT CARE website at www.bcbstx.com/retiree-medicare-ut for additional information. (Healthy Living tab)



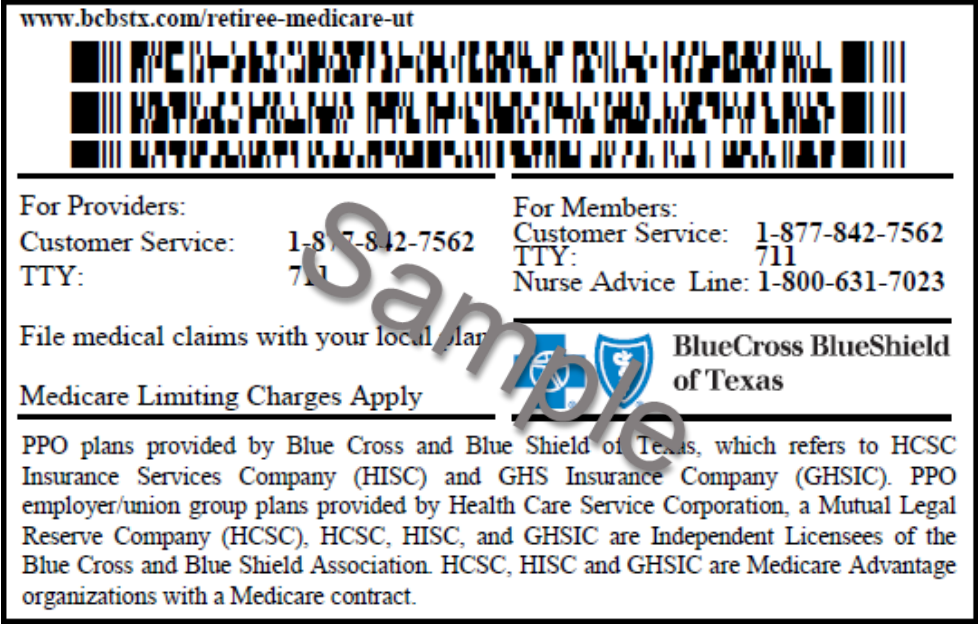
Visiting Your Provider

Member ID Card

- You will only need to present your UT CARE member ID card whenever you receive a medical service or benefit covered by your plan. You do not need to show your Original Medicare card.
- Providers will send your claims directly to BCBSTX or their local BCBS.
- A group number is not necessary.



Front of ID Card



Back of ID Card

Open Access – Your Own National Provider Network

- Blue Cross Group Medicare Advantage Open Access (PPO) offers members access to care from any provider nationwide who will
 - see you as a patient
 - accepts Medicare
 - is willing to bill Blue Cross and Blue Shield of Texas (BCBSTX) or their local Blue Cross and Blue Shield plan
- 98% of U.S. physicians accept Medicare assignment, according to the U.S. Centers for Medicare & Medicaid Services (CMS)¹.
- Members' coverage levels are the same inside and outside their plan service area nationwide for covered benefits.
- Referrals are not required for specialist visits.

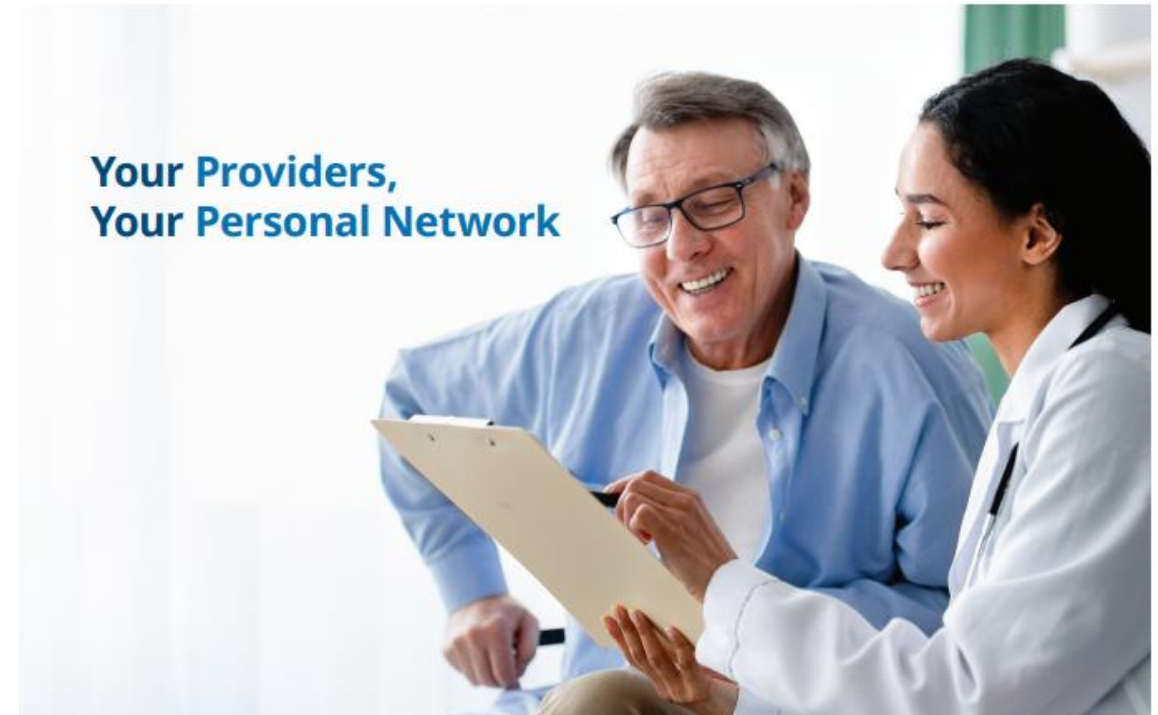


Open Access – Your Own National Provider Network

The “**Your Providers, Your Personal Network**” flyer, which comes in your enrollment and welcome kits, is a helpful document to bring to your provider’s office should they have any questions about how to work with your plan.

This letter can also be found on the website at <https://www.bcbstx.com/retiree-medicare-ut> on the Coverage tab where other plan documents are located.

Side two of the flyer has all the information your provider’s office needs, including a number to call with any questions.



Dear Valued Member,

You are part of **UT CARE™ Medicare PPO, an Open Access Medicare Advantage plan**. This means you are free to see any provider who will see you as a patient, accepts Medicare* and will bill the plan.

With this Open Access plan, in-network and out-of-network rules do not apply. Your benefit is the same for a visit to a provider who isn't in our network, because if they accept Medicare and will bill the plan, they're in **yours**.

Simply share this document with your provider's billing representative. We'll handle the rest.

If your provider has questions about your coverage or seeing you as a patient, ask them to call provider customer service at **1-877-842-7562**.

Open Access – Your Own National Provider Network



Dear Provider/Billing Representative,

This patient is enrolled in the **Texas A&M University System 65 Plus Medicare Advantage Plan (PPO)**. The plan provides the same coverage as Original Medicare and more, including preventive services and supplemental benefits.

You may treat Open Access plan members if you are a Medicare provider, regardless of your contract or network status. That means you don't need to participate in Blue Cross and Blue Shield of Texas (BCBSTX) Medicare Advantage networks or in any other Blue Cross and Blue Shield (BCBS) networks.

The only requirement is that you accept Medicare assignment and will submit the claims to BCBSTX or your local BCBS plan.

Out of State and Out of Country Coverage

Out of State Coverage

- Because this is an Open Access PPO plan, you can see any provider who agrees to see you as a patient, accepts Medicare assignment, and agrees to bill the local Blue Cross and Blue Shield plan. Providers are familiar with this claims process.
- You have the same coverage in your home state or while traveling the country.

Out of Country Coverage

- The Blue Cross and Blue Shield **Global Core program** gives retirees traveling outside of the United States and its territories access to **urgent and emergency** medical assistance services.
- Claim Forms for care received abroad can be obtained at www.bcbsglobalcore.com or by calling **1-800-810-BLUE**.
- **UT CARE retirees** have the same emergency and urgent care benefits out of the country as they do within the United States.

Blue Access for Members (BAM)

Logging Into Blue Access for Members (BAM)



UT CARE™

Search



Coverage and Benefits

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Tools and Resources

FAQS

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Welcome The University of Texas System Retirees

Maximize your Retiree Medicare Options from UTS

Coverage and Benefits

Your benefits are designed to provide the coverage for the care you need.

[Learn more about your benefits](#)

Doctors and Hospitals

Get access to a wide network of contracting doctors and hospitals across the country.

[Search now](#)

Tools and Resources

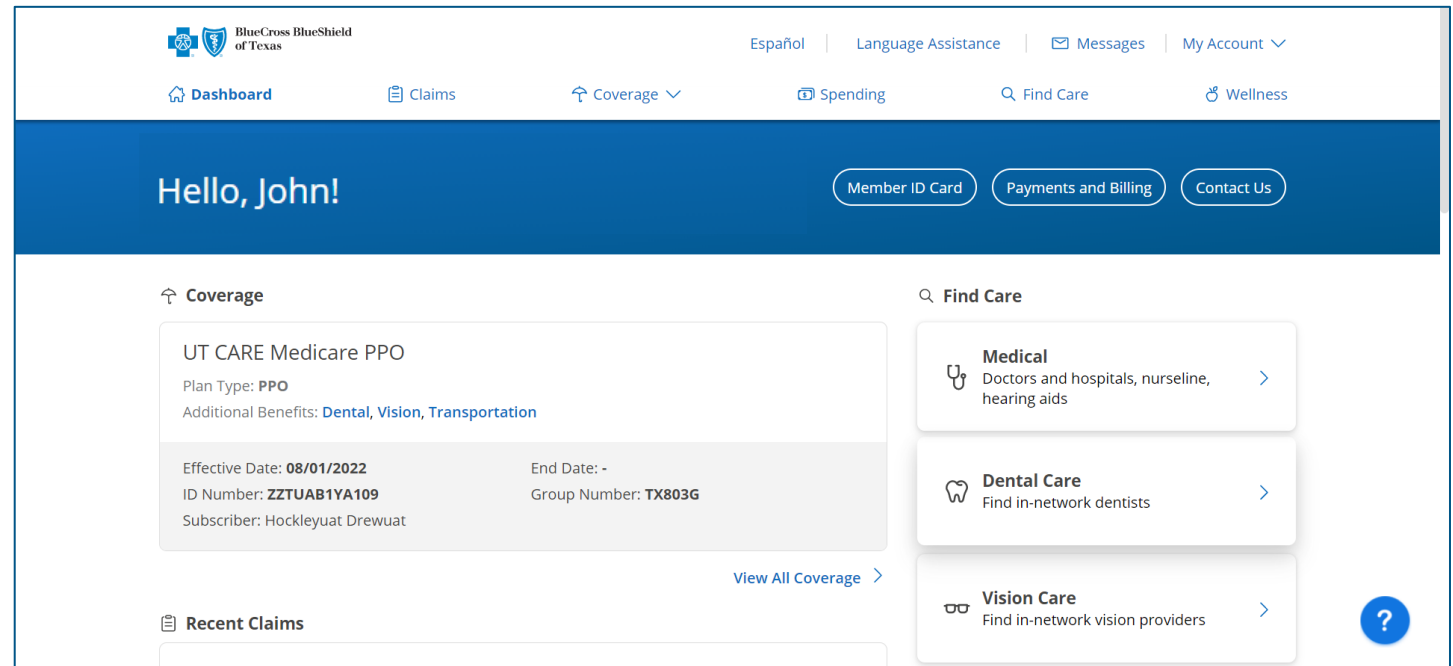
Access online tools and resources to help you manage your health care decisions and download our free apps.

[Get started today](#)

Dashboard/My Account

- On the BAM Dashboard page, we currently highlight the three most recent claims as well as options to find care.
- The dashboard also has navigation links to the other areas of BAM. Which includes:
 - Profile and Preferences
 - Coverage
 - ID Card*
 - Forms and Documents
 - Wellness

* You can view your current Identification card and download a copy to your computer or cell phone. Members also have the option to order a new ID card from here if you would like a physical replacement.



Care Coordination and In-Home Health Assessments

Care Coordination Overview

Your plan offers the ability to work with Care Coordinators* to help manage your health care needs. They can connect you with the right resources for overall care management.

Care Coordinators are clinicians who can help you:

- Adjust to being at home after a hospital stay
- Set up care with your doctor and other health care team members
- Better understand your health condition(s), medications and treatments
- Navigate the health care system to improve your quality of life and save money

***Care Coordinators are available to help you, but you do not have to use them to manage your care.**

In-Home Health Assessment

Your plan includes an **In-Home Health Assessment (IHA)** by a licensed and credentialed clinician—Certified Nurse Practitioner, Physician Assistant or MD—from our trusted partners, Signify or Matrix, at no cost to you.

How can you make the most of your 45-to 60-minute IHE or telehealth visit?

- Discuss health concerns and learn more about disease management programs
- Have your home checked for possible safety issues
- Take the extra time outside of a primary care provider visit to ask questions about your physical, emotional and mental health in the comfort of your home

You receive a one-page summary of the evaluation. With your permission, a full report of the IHE is shared with your primary care provider (PCP).



Planning for Retirement

Planning for Retirement

- If you are already retired, approximately 60 days before you (subscriber, spouse, active or retiree) turn 65, you will receive a letter from BCBSTX.
- This letter will instruct you about what you need to do to enroll in Medicare, and we will give you the Social Security Administration phone number and website.
- You must sign up for Medicare Parts A and Part B coverage and begin to pay your Part B premium.
- Once you receive your Medicare card, please call 1-877-842-7562 and provide the 11-character Medicare Beneficiary Identifier (MBI) and Medicare effective date located on your red, white, and blue Medicare card. Enrollment in UT CARE cannot proceed without the MBI number.
- You will receive your new UT CARE Member ID Card and a Welcome Kit 10-14 days after Medicare confirms your enrollment.

UT CARE Customer Service

For more information...

- Call UT CARE dedicated customer service for one-on-one help with your questions. **1-877-842-7562 / TTY 711**.
- This number is on the back of your ID card.
- Customer Service is available 24/7.
- Neither your institution HR office nor OEB has access to your claims or coverage information, so be sure to call customer service.
- Visit the UT CARE website at www.bcbstx.com/retiree-medicare-ut for additional information including FAQs, presentations and a digital copy of plan materials.

Important Plan Information

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.

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

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

SilverSneakers® is a wellness program owned and operated by Tivity Health, Inc., an independent company. Tivity Health and SilverSneakers® are registered trademarks or trademarks of Tivity Health, Inc., and/or its subsidiaries and/or affiliates in the USA and/or other countries.

Virtual Visits may not be available on all plans. Non-emergency medical service in Montana and New Mexico is limited to interactive online video. Non-emergency medical service in Arkansas and Idaho is limited to interactive online video for initial consultation. MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Illinois.

MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.

TruHearing® is a registered trademark of TruHearing, Inc., which is an independent company providing discounts on hearing aids.

Additional Information

Blue Cross and Blue Shield of Texas complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Blue Cross and Blue Shield of Texas does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Blue Cross and Blue Shield of Texas:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Civil Rights Coordinator.

If you believe that Blue Cross and Blue Shield of Texas has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Civil Rights Coordinator, Office of Civil Rights Coordinator, 300 E. Randolph St., 35th floor, Chicago, Illinois 60601, 1-855-664-7270, TTY/TDD: 1-855-661-6965, Fax: 1-855-661-6960. You can file a grievance in person or by phone, mail, fax, or email. If you need help filing a grievance, Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Additional Information

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at **1-877-842-7562 (TTY/TDD: 711)**. Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al **1-877-842-7562 (TTY/TDD: 711)**. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 **1-877-842-7562 (TTY/TDD: 711)**。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 **1-877-842-7562 (TTY/TDD: 711)**。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa **1-877-842-7562 (TTY/TDD: 711)**. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au **1-877-842-7562 (TTY/TDD: 711)**. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Additional Information

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi **1-877-842-7562** (TTY/TDD: **711**). sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter **1-877-842-7562** (TTY/TDD: **711**). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 **1-877-842-7562** (TTY/TDD: **711**). 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону **1-877-842-7562** (TTY/TDD: **711**). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: سيقوم شخص ما يتحدث العربية |لنا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول **1-877-842-7562** (TTY/TDD: **711**). بمساعدتك. هذه خدمة مجانية على مترجم فوري، ليس عليك سوى الاتصال بنا على

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें **1-877-842-7562** (TTY/TDD: **711**). पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Additional Information

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero **1-877-842-7562** (TTY/TDD: **711**). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Português: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número **1-877-842-7562** (TTY/TDD: **711**). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan **1-877-842-7562** (TTY/TDD: **711**). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer **1-877-842-7562** (TTY/TDD: **711**). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、**1-877-842-7562** (TTY/TDD: **711**). にお電話ください。日本語を話す人 者 が支援いたします。これは無料のサービスです。>