



Dear UT System Employee,

Welcome to UT CARE Medicare PPO!

As an active employee, you and your dependents have been enrolled in a medical plan offered by the UT System. As you move into retirement, medical coverage for you and your Medicare-eligible dependents will shift to UT CARE[™] Medicare PPO, a retiree group Medicare Advantage plan. Prescription coverage will remain the same and will also be called UT CARE.

The UT CARE Medicare PPO (UT CARE) plan is provided by Blue Cross and Blue Shield of Texas (BCBSTX).

It combines the coverage of Original Medicare with added health and wellness benefits that can be important tools in maintaining ongoing good health.

This national PPO plan allows you to see any provider that accepts Medicare and agrees to submit claims to the plan. You are not required to get a referral to see a specialist.

Please note: you must be enrolled in Medicare Part A and Part B to be a member of this retiree plan. You must also

Questions?



Visit bcbstx.com/retiree-medicare-ut for more enrollment information.



Call for personalized help.

1-877-842-7562 TTY 711

Help is available 24 hours per day, 7 days per week except Thanksgiving and Christmas Day.

continue to pay your Part B premium. If you are eligible for Medicare Part A and/or Part B but are not enrolled, please contact Social Security right away.

As long as you are enrolled in Medicare Parts A and B you will be automatically enrolled in UT CARE once your retirement date is confirmed.

There is no form to complete or action needed on your part. However, if you prefer to opt out of the UT CARE medical and prescription plan you must do so by declining the coverage through *My UT Benefits* online system as soon as possible. To access *My UT Benefits*, please visit the "Manage Your UT Benefits" page at **http://utbenefits.link/manage**.

Important: If you take action to opt out, you will not have any UT medical, prescription or basic retiree life insurance.

If CMS does not accept your enrollment because a federal requirement was not met for enrollment, then you will still have UT SELECT medical coverage. However, the benefit will be limited to what the plan would pay after Medicare pays. Typically, that means the plan will pay about 20%.

You'll find details about your new UT CARE Medicare PPO inside this packet.

It includes an informational brochure, plan benefit chart and summary of benefits. We are confident you will be pleased with the new, enhanced plan and encourage you to take advantage of all the benefits available to you.

You can find additional information and answers to common questions about Medicare and UT CARE at **www.bcbstx.com/retiree-medicare-ut**.

Feel free to call the dedicated customer service advocates with questions about your UT CARE benefits at **1-877-842-7562 TTY 711**.

Sincerely,

Blue Cross and Blue Shield of Texas

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)[™].' This plan name also refers to UT CARE Medicare PPO.

Medicare-assigned providers can decide what patients they want to see. We recommend that you confirm with providers that they will accept your Open Access PPO plan and bill us directly. Out-of-network/non-contracted providers are under no obligation to treat BCBSTX members, except in emergency situations. At your appointment, give the provider a copy of the 'Your Providers, Your Personal Network' flyer included here and included in your welcome guide. Call Customer Service or see your Summary of Benefits for more information, including cost sharing that applies to out-of-network services.

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.