

PRESENTATION AGENDA

TRS-ActiveCare Program Highlights

Activate Your Health

NEW: TRS-ActiveCare Primary Plan

Benefit Enhancements

TRS-ActiveCare Medical Benefits through BCBSTX

Rates and Benefits

Understanding Your Deductible

Member Health and Wellness Resources

• TRS-ActiveCare Pharmacy Benefits through CVS Caremark

Regional HMO Offering

Central Texas – Scott and White Care Plans HMO

West Texas - Blue Essentials HMO

South Texas - Blue Essentials HMO

bswift Enrollment Update

Who is Eligible to Enroll?

Enrollment Support



WHAT IS TRS-ACTIVECARE?



- Established and signed into law in 2001 (Chapter 1579, Texas Insurance Code)
- A statewide health care benefits program for employees of school districts, charter schools, regional educational service centers and other educational districts
- Law authorizes funding levels to help employees pay for coverage

YOUR HEALTH PLAN ADMINISTRATORS





















MUST ACTIVELY ENROLL IN PLAN

Doctor Visits	
Primary Care	\$30 copay
Specialist	\$70 copay
TRS Virtual Health	\$0 per consultation

Total Monthly Premiums *				
Employee Only	\$386			
Employee and Spouse	\$1,089			
Employee and Children	\$695			
Employee and Family	\$1,301			

*Rates before district/state contribution

TRS-ACTIVECARE: BENEFIT ENHANCEMENTS

New

Formerly Select

Formerly 1-HD



TRS-ActiveCare Primary

- Copays for PCP and specialists (no deductible)
- Lower ind. & family deductible
- Individuals only need to meet individual deductible on tiers with families

TRS-ActiveCare Primary+

- Lowered copay for therapies to \$30
- Lowered individual and family MOOP
- Broad, statewide network

TRS-ActiveCare HD

 Individuals only need to meet individual deductible on tiers with families

Primary compared to current version of TRS-ActiveCare 1-HD. No changes to AC-2 benefits. Additional details available in plan highlights document.

LOWER PREMIUMS IN FAMILY TIERS

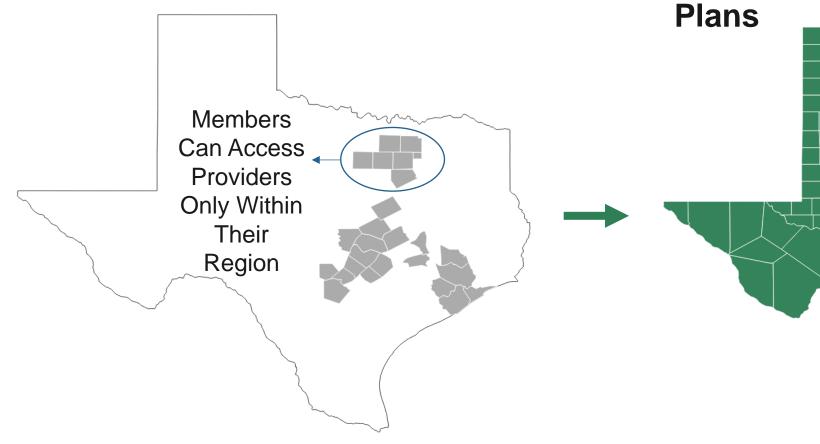


		Total Premium Before Y		
		Current 2019-20 Total Premium	New 2020-21 Total Premium	Change in Dollar Amount
	Employee Only		\$386.00	
TRS-ActiveCare	Employee and Spouse		\$1,089.00	
Primary (New!)	Employee and Children		\$695.00	
	Employee and Family		\$1,301.00	
	Employee Only	\$378.00	\$397.00	\$19.00
TRS-ActiveCare HD	Employee and Spouse	\$1,066.00	\$1,120.00	\$54.00
(formerly 1-HD)	Employee and Children	\$722.00	\$715.00	- \$7.00
	Employee and Family	\$1,415.00	\$1,338.00	- \$77.00
	Employee Only	\$556.00	\$514.00	- \$42.00
TRS-ActiveCare	Employee and Spouse	\$1,367.00	\$1,264.00	- \$103.00
Primary+ (formerly Select)	Employee and Children	\$902.00	\$834.00	- \$68.00
(comony colocity	Employee and Family	\$1,718.00	\$1,588.00	-\$130.00

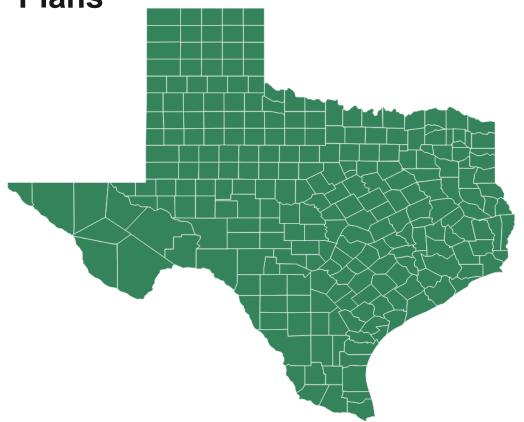
TRS-ACTIVECARE PRIMARY+: THE NEW SELECT



Current Select ACO Regions



Statewide Network in New Primary Plans



PCP REQUIREMENT FOR PRIMARY PLANS



PCP's are required for TRS-ActiveCare Primary and Primary+, but they're also important factors in our participants health.

PCP's can help...

Achieve Health Goals

Coordinate Specialist Care Advocate for Care



ANNUAL ENROLLMENT July 15 – Aug. 21

Current TRS-ActiveCare Plan	Plan your employee will be enrolled in on Sept. 1, 2020 if no action is taken
TRS-ActiveCare 1-HD	TRS-ActiveCare HD
TRS-ActiveCare Select	TRS-ActiveCare Primary+ (PCP requirement)
TRS-ActiveCare 2	TRS-ActiveCare 2
First Care Health Plan or Scott and White Health Plan (West Texas)	Blue Essentials (West Texas)
Scott and White (Central and North Texas)	Scott and White (Central and North Texas)
Blue Essentials (South Texas)	Blue Essentials (South Texas)

You will have to actively enroll in the <u>NEW: TRS-ActiveCare Primary plan.</u>

Both ActiveCare Primary and Primary+ require a PCP.

COVID-19 TRS-ACTIVECARE RESOURCES

- Waived cost for diagnostic testing
- Waived inpatient coverage for treatment
- Free delivery of prescriptions
- Early refills for maintenance medications
- Crisis Response Lines
- Expanded 24/7 Aetna Nurse Line
- Resources for Living toolkit

Find more information:

trs.texas.gov/Pages/news_coronavirus.aspx









of Texas

EMPLOYEE MONTHLY COSTS



STATEWIDE PLANS	TRS-ActiveCare Primary (New)			TRS-ActiveCare Primary+ (New)		
	Full Premium	State & District Contributions	Your Premium	Full Premium	State & District Contributions	Your Premium
Employee Only	\$386	-\$XX	\$XX	\$514	-\$XX	\$XX
Employee and Spouse	\$1,089	-\$XX	\$XX	\$1,264	-\$XX	\$XX
Employee and Children	\$695	-\$XX	\$XX	\$834	-\$XX	\$XX
Employee and Family	\$1,301	-\$XX	\$XX	\$1,588	-\$XX	\$XX

PLANS ON THE STATEWIDE NETWORK



		Care Primary v Plan	TRS-ActiveCare Primary+ New (formerly Select)		
Benefit	In-Network	Out-of-Network	In-Network	Out-of-Network	
Individual Deductible	\$2,500	N/A	\$1,200	N/A	
Family Deductible	\$5,000	N/A	\$3,600	N/A	
Individual Out-of-Pocket Max	\$8,150	N/A	\$6,900 (-\$1,000)	N/A	
Family Out-of-Pocket Max	\$16,300	N/A	\$13,800 (-\$2,000)	N/A	
Office Visit	\$30 PCP Copay \$70 SPC Copay	N/A	\$30 PCP Copay \$70 SPC Copay	N/A	
Urgent Care	\$50 Copay	N/A	\$50 Copay	N/A	
TRS Virtual Health (Medical)	Covered at 100%	N/A	Covered at 100%	N/A	
Preventive Care	Covered at 100%	N/A	Covered at 100%	N/A	
Inpatient Admission	30% after ded.	N/A	20% after ded.	N/A	
Emergency Room	30% after ded.	*Only for true emergencies	20% after ded.	*Only for true emergencies	
Free-Standing Emergency Room	\$500 Copay + 30% after ded.	*Only for true emergencies	\$500 Copay + 20% after ded.	*Only for true emergencies	



96%

EMPLOYEE MONTHLY COSTS



NATIONWIDE PLANS	TRS-ActiveCare HD			TRS-ActiveCare 2		
	Full Premium	State & District Contributions	Your Premium	Full Premium	State & District Contributions	Your Premium
Employee Only	\$397	-\$XX	\$XX	\$937	-\$XX	\$XX
Employee and Spouse	\$1,120	-\$XX	\$XX	\$2,222	-\$XX	\$XX
Employee and Children	\$715	-\$XX	\$XX	\$1,393	-\$XX	\$XX
Employee and Family	\$1,338	-\$XX	\$XX	\$2,627	-\$XX	\$XX

PLANS ON THE NATIONWIDE NETWORK



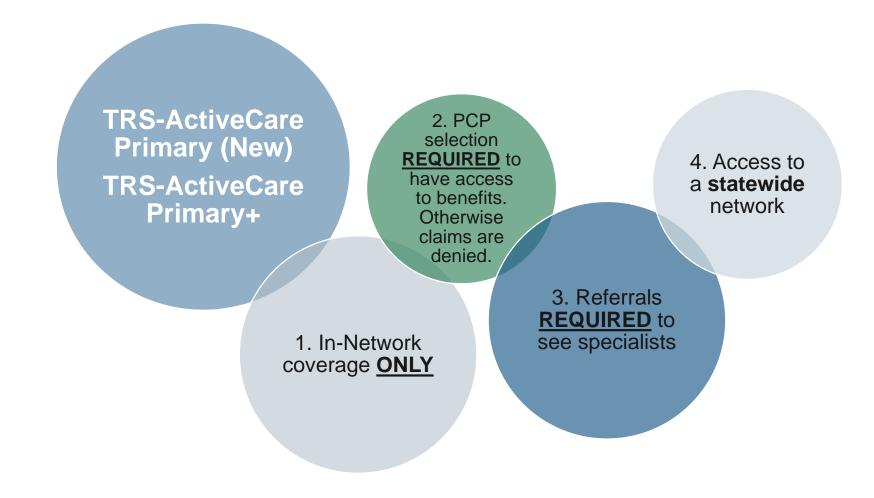
	TRS-ActiveCare HD (formerly 1-HD)		TRS-ActiveCare 2		
Benefit	In-Network	Out-of-Network	In-Network	Out-of-Network	
Individual Deductible	\$2,800	\$5,500	\$1,000	\$2,000	
Family Deductible	\$5,600	\$11,100	\$3,000	\$6,000	
Individual Out-of-Pocket Max	\$6,900	\$20,250	\$7,900	\$23,700	
Family Out-of-Pocket Max	\$13,800	\$40,500	\$15,800	\$47,400	
Office Visit	20% after ded.	40% after ded.	\$30 PCP Copay \$70 SPC Copay	40% after ded.	
Urgent Care	20% after ded.	40% after ded.	\$50 Copay	40% after ded.	
TRS Virtual Health (Medical)	\$30 Cost	N/A	Covered at 100%	N/A	
Preventive Care	Covered at 100%	Covered at 100%	Covered at 100%	Covered at 100%	
Inpatient Admission	20% after ded.	40% after ded.	\$150/day Copay + 20% after ded.	40% after ded. (\$500/day max.)	
Emergency Room	20% after ded.	40% after ded.	\$250 Copay + 20% after ded	\$250 Copay + 20% after ded.	
Free-Standing Emergency Room	\$500 Copay + 20% after ded.	\$500 Copay + 40% after ded.	\$500 Copay + 20% after ded.	\$500 Copay + 40% after ded.	



95%

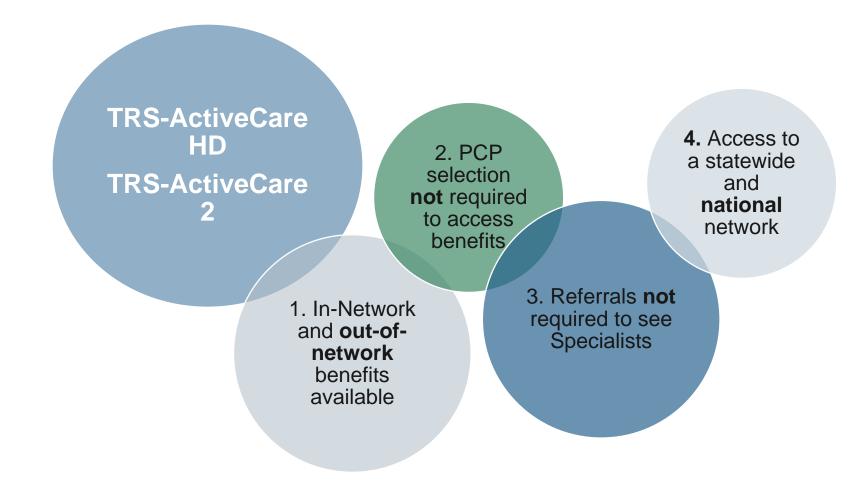
STATEWIDE NETWORK PLAN HIGHLIGHTS





NATIONWIDE NETWORK PLAN HIGHLIGHTS





NETWORKS OF CONFIDENCE



1. Emergency coverage **anywhere** in the world

2. Receive the highest level of benefits and frequently pay less for care with in-network providers.

3. Get protection from billing over the allowed amount (balance billing) with innetwork providers.

•4. Out-ofstate coverage for dependents*

UNDERSTANDING YOUR FAMILY DEDUCTIBLE



Applicable to all TRS-ActiveCare plans

- All plans include an individual deductible as well as a family deductible.
- This means an individual can meet their own deductible and get plan benefits even if the combined family deductible has not been met.
- The individual deductible also applies towards the family deductible.
- Each family member continues to meet their own deductible until the family deductible is met.

UNDERSTANDING YOUR FAMILY DEDUCTIBLE



Amy covers a spouse and two dependents

TRS-ActiveCare Primary has a \$2,500 in-network individual deductible and a \$5,000 in-network family deductible.

- Plan pays for certain benefits for an individual as his/her deductible is met
- Everyone helps to meet the family deductible, but no one person pays more than the individual amount
- Since Amy has met her deductible, she will only pay a 30% coinsurance for certain medical services



IN-NETWORK VALUE



In-Network Providers

- Receive the highest level of benefits and frequently pay less for care
- No claim forms (providers submit claims)
- Protection from billing over the allowed amount (balance billing)

Out-of-Network Providers

- Receive fewer out-of-network benefits and pay more for care.
- You may need to file your own claims.
- Risk being billed over the allowed amount (balance billing).

*Out-of-network benefits only apply to TRS-ActiveCare HD and TRS-ActiveCare 2.

WHY SHOULD I SELECT A PCP?



Your Primary Care Provider:

- Your PCP will get to know your overall health history and can guide you toward preventive care to help you be healthy and active.
- You can build a trusting, long-term relationship, which may make it easier to talk about personal health matters.
- Your PCP will help take care of you when you're sick and help you stay healthy with preventive care.
- Will manage your referrals to specialists if you're on the physician-directed plans (TRS-ActiveCare Primary+,TRS-ActiveCare Primary).



PREVENTIVE CARE COVERAGE

TRS ACTIVE CARE ITADIA RETIREMENT SYSTEM OF TEXAS

What's Covered?

- Recommended routine gender and age-specific preventive care and screenings – including yearly general wellness exams, recommended vaccines and screenings for conditions like diabetes, cancer and depression – both facility and professional services
- In-network care covered at 100% with no copay, no deductible. Out-of-network benefits may vary.
- Note: TRS-ActiveCare Primary and TRS-ActiveCare Primary+ plans require preventive services to be rendered by your selected in-network PCP to receive 100% coverage with no copay.
- IMPORTANT to remember:

 Lab tests related to a condition such as diabetes or asthma –
 are not considered preventive and are covered under applicable deductible and coinsurance levels.

Stay Healthy by Getting Regular Check-Ups

24/7 NURSELINE



Staffed by registered nurses, the 24/7 Nurseline provides answers to general health questions and guides you to your primary care provider, urgent care center, the ER, Virtual Health provider or other care, as necessary.

These nurses can help you choose the right level of care and address health concerns about:

- Asthma
- Back Pain
- Cuts or Burns
- Diabetes
- Fever
- And much more

Over 300 Audio Health Library topics ranging from allergies to surgeries available in English and Spanish!



To reach the Nurseline, call the dedicated team of Personal Health Guides available at:

1-866-355-5999



CARRIER TRANSITION





BlueCross BlueShield of Texas

Highlighting Tools/Resources

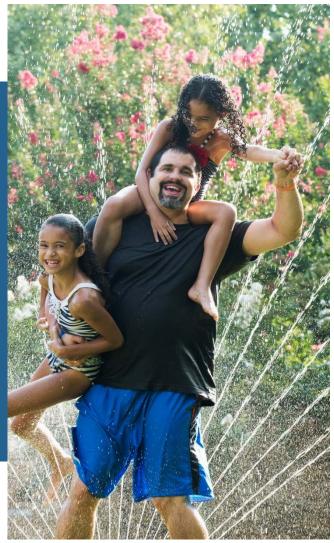
TRANSITION OF CARE



- Applies to you or your covered dependents who are receiving care on or after Sept. 1, 2020, from a provider who is not part of BCBSTX's networks
- If approved, benefits will be paid at the innetwork level for a specified period of time. Examples of who may be eligible for transitional care include those:
 - Receiving cancer treatment/therapies
 - Being treated for a terminal illness
 - In your second/third trimester of pregnancy
 - In cardiac rehabilitation

Submit the Transition of Care form prior to September 1. You will receive a decision by mail.

Completion of this form is not a guarantee of coverage.



PRIOR AUTHORIZATIONS



If issued through Aug. 31, 2020, Aetna will transfer to BCBSTX

BCBSTX __ Provider

Valid through end date

If not a BCBSTX ■ Provider

Valid for 90 days or the end date (whichever is sooner)

Sept. 1, 2020

Note: Please work with your selected PCP to re-establish any existing referrals as referrals will not be transferred from your current carrier. Once re-established they can be valid for up to a year!

If issued on or after Sept. 1, 2020

BCBSTX Provider

Valid through end date

If not a **BCBSTX** Provider



Not valid

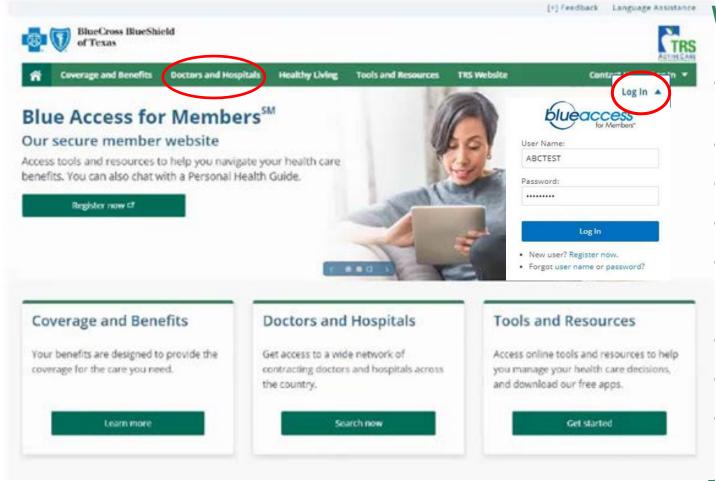
IMPORTANCE OF PCP SELECTION



- During Annual Enrollment it is very important that you select the PCP you want to direct your care if you enroll in a plan that requires PCP selection (TRS-ActiveCare Primary and TRS-ActiveCare Primary+).
- EVERY family member covered on one of these plans must select their own PCP.
- If you don't use <u>your PCP</u> for routine medical care, obtain referrals from <u>your PCP</u> to see specialists, or use <u>in-network</u> providers, you won't have coverage. Claims <u>will be denied</u> and you will be responsible for payment to the provider.

PARTICIPANT WEBSITE





Website for TRS-ActiveCare Participants Available June 1, 2020

- Find an in-network doctor, hospital, or other provider
- Get plan information
- Get the latest news and updates
- Download forms and documents
- Learn about health and wellness resources

Available Sept. 1, 2020

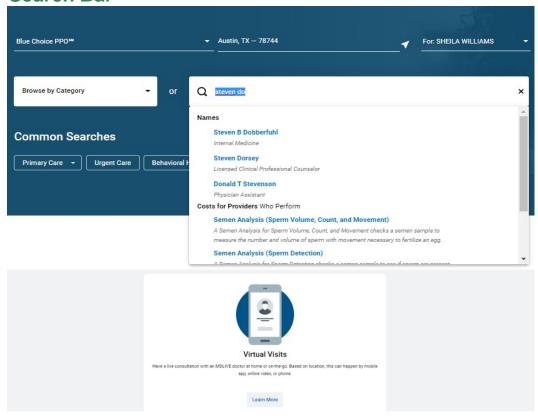
- Register for Blue Access for Members
- Select or change your PCP
- Check the costs of doctors and services covered under your plan
- Download a temporary ID Card

www.bcbstx.com/trsactivecare

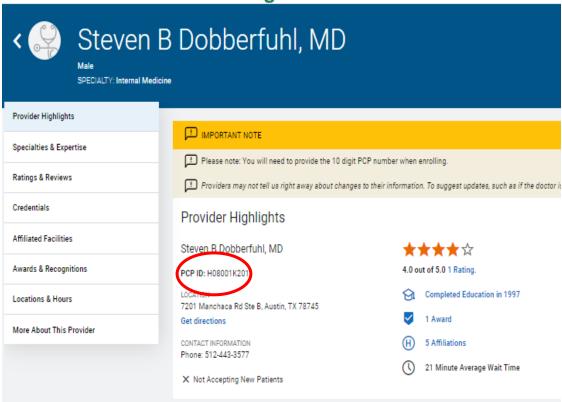
PROVIDER FINDER®



Search Bar



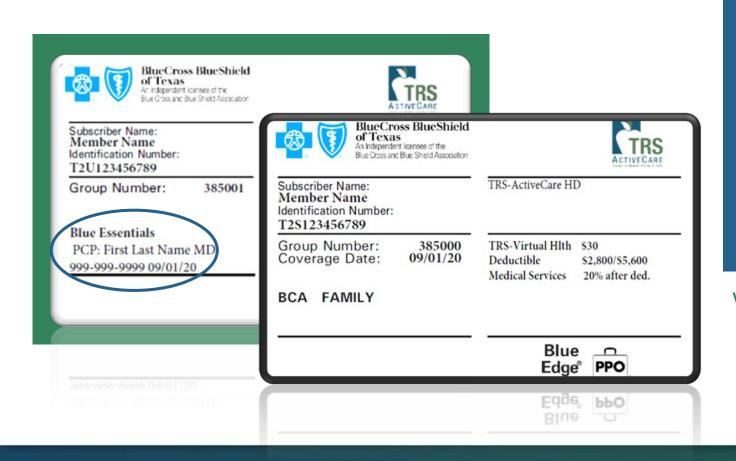
Detailed Provider Profile Page



YOUR BCBSTX ID CARDS



You will receive new ID cards.



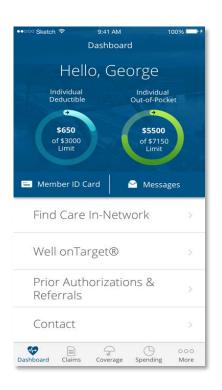
- For physician-directed plans, each family member will get their own ID card with their PCP's name printed on it.
- You can call a Personal
 Health Guide or log on to Blue
 Access for Members[™] to order
 additional or replacement ID
 cards.

www.bcbstx.com/trsactivecare

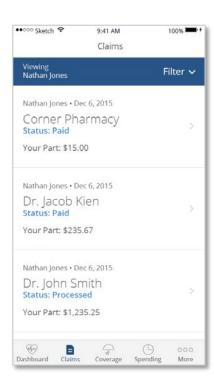
MOBILE ACCESS



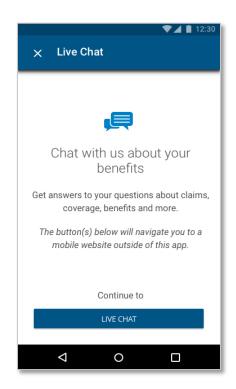
BCBSTX App – Available Sept. 1, 2020



Dashboard

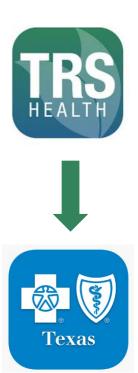


See claims and EOBs



Live chat

Monday-Friday 7:00AM-6:00PM



TRS VIRTUAL HEALTH



Your BCBSTX coverage includes TRS Virtual Health choices powered by Teladoc® and RediMD.



Medical

- Cold and flu symptoms
 Depressive and anxiety
- Allergies
- Bronchitis
- Respiratory infections
- Stomach upset
- Sinus problems
- Skin problems

Mental Health

- Depressive and anxiety disorders
- Bipolar, schizophrenia and psychotic disorders
- Attention disorders
- Alcoholism and addiction and substance-related disorders



Medical

- Back Strains
- Ankle Injuries
- Shoulder Strains
- Pulled Muscles
- Contusions/Bruises
- Asthma

- Shortness of Breath
- Infections
- Allergies
- Chemical Exposure

Available Sept. 1, 2020



ADDITIONAL PROGRAMS





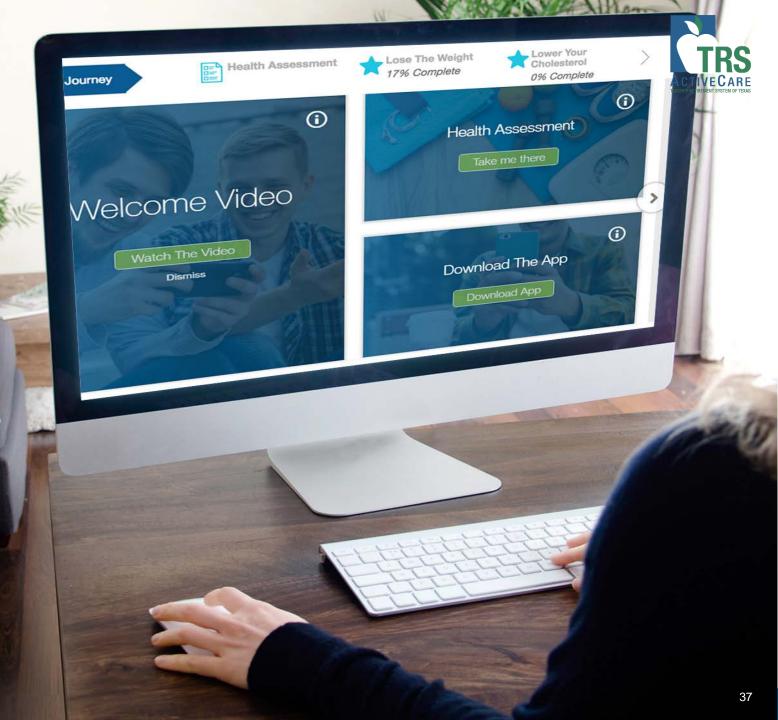
BlueCross BlueShield of Texas

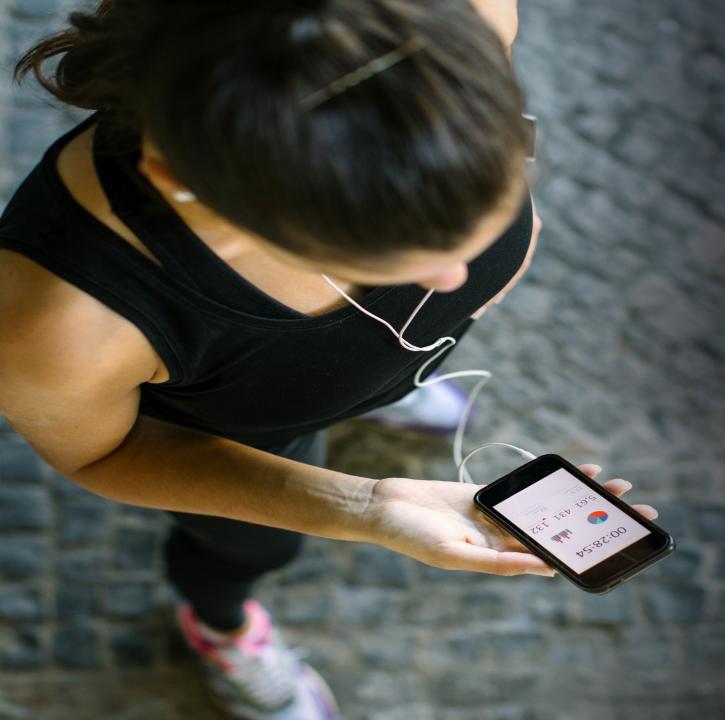
Highlighting Wellness and Family Planning

WELL on TARGET PARTICIPANT PORTAL

RELEVANT.
TIMELY.
IMPACTFUL.
PERSONALIZED.

- Health Assessment
- Digital self-management programs
- Trackers and tools
- Blue Points[™] Rewards
- Fitness Program
- Tracking for fitness and nutrition and also device integration
- Personal wellness challenges





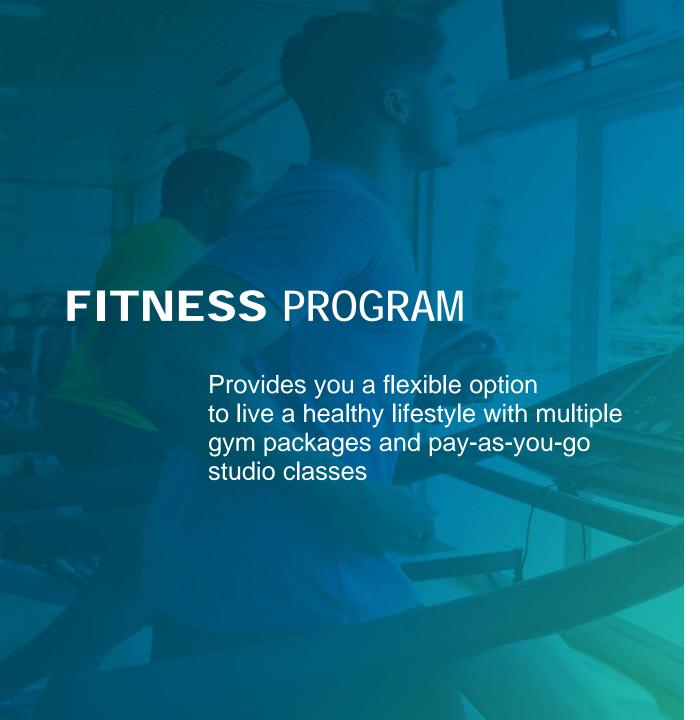
BLUE POINTS BUILT-IN REWARDS



Offerings that earn points:

- Use of online trackers
- Connecting and syncing a fitness device or app
- Health assessment completion
- Digital self-management program completion
- Fitness program visits

Redeem points in the online Shopping Mall with over a million products!



Tiered Gym Network

A choice of gym networks to fit your budget and preferences



Base	Core	Power	Elite
\$19 per month	\$29 per month	\$39 per month	\$99 per month
\$19 Initiation Fee			

Studio Class Network

Includes boutique-style classes and specialty gyms with pay-as-you-go option and 30% off every 10th class

Family Friendly

Gym network provides access to dependents at bundled price discount

Mobile App

Allows members to access location search, studio class registration, location check-in and activity history

Additional Perks

- No long-term contract
- Additional access to other discounts, such as complementary and alternative medicine
- Blue Points for joining and using regularly
- Real-time data provided to the mobile app and Well onTarget® portals, feeding Blue Points™

WOMEN'S AND FAMILY HEALTH

An Innovative Approach for the Journey into Parenthood

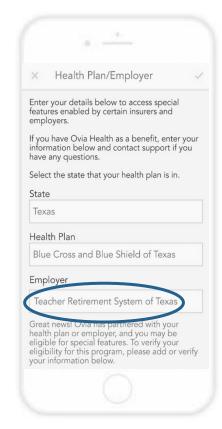
Our programs feature education, coaching, maternity management solutions, and can result in improved clinical outcomes and cost savings.

Ovia Health Apps: Videos, tips, coaching and more

- Ovia Fertility: Helps you track your cycle and predict when you are more likely to get pregnant
- Ovia Pregnancy: Helps monitor pregnancy and baby's growth week by week leading up to the baby's due date
- Ovia Parenting: Allows you to keep up with your child's growth and milestones from birth through three years old
- High-risk Maternity Management: Maternity specialists conduct phone outreach and provide ongoing support to expectant mothers identified with high-risk pregnancies
- Well onTarget Programming: Interactive online courses designed to optimize the health of women and their babies







New Users are prompted to enter their employer as: Teacher Retirement System of Texas

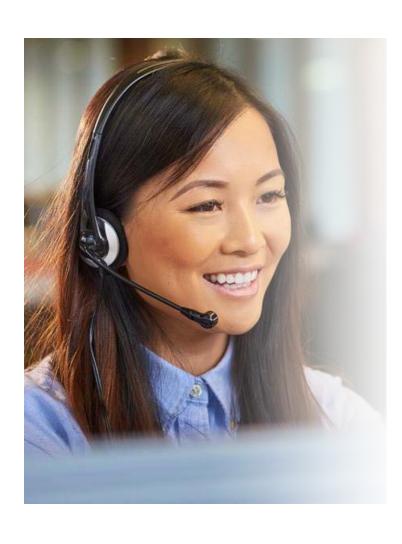


YOUR DEDICATED SUPPORT

Who to Contact

SUPPORT FOR YOU





Personal Health Guides (PHGs)

- Answer questions about benefits
 - Assist with prior authorizations and referrals
 - Find and assign an in-network PCP
 - Address claim and billing inquiries
- Explain health care costs and options for care
 - Locate in-network provider options
 - Scheduling appointments
- Help you use self-service tools
- Connect you to other resources
 - Clinicians
 - Community resources
 - TRS benefits vendors

Call toll-free: 1-866-355-5999

June 1, 2020 Monday-Friday 7:00AM-6:00PM

> Sept. 1, 2020 Access 24/7





TRS PRESCRIPTION DRUG PLAN DEDUCTIBLES/MAXIMUM OUT-OF-POCKETS



Benefit	TRS-ActiveCare Primary	TRS- ActiveCare HD	TRS-ActiveCare Primary+	TRS-ActiveCare 2
Drug Deductible (per person, per plan year)	\$2,500 individual, \$5,000 family	\$2,800 individual, \$5,600 family	\$0 generic; \$200 brand only Rx	\$0 generic; \$200 brand only Rx
Maximum Out-of-Pocket	\$8,150 individual, \$16,300 family	\$6,900 individual, \$13,800 family	\$6,900 individual, \$13,800 family	\$7,900 individual, \$15,800 family



TRS-ACTIVECARE PRIMARY & HD PLANS: NO COST GENERIC PREVENTIVE MEDICATIONS

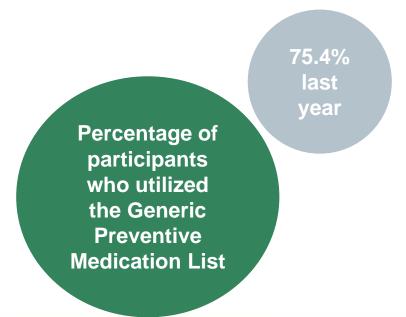


Certain generic medications classified as "preventive," such as a prescription medication used for hypertension or depression, may be available at no cost to TRS-ActiveCare Primary & TRS-ActiveCare HD participants.

TRS waives the Primary & HD plan deductible for generic preventive medications on the Generic Preventative Drug list.

Find the Generic Preventive Drug list by visiting: www.info.caremark.com/trsactivecare

Call CVS Caremark at 1-866-355-5999





OVERVIEW OF TRS-ACTIVECARE PRESCRIPTION DRUG BENEFITS



Benefit	TRS-ActiveCare Primary	TRS-ActiveCare HD	TRS-ActiveCare Primary+	TRS-ActiveCare 2
Drug Deductible (per person, per plan year)	\$2,500 individual, \$5,000 family	\$2,800 individual, \$5,600 family	\$0 generic; \$200 brand only Rx	\$0 generic; \$200 brand only Rx
Maximum Out of Pocket	Medical + Pharmacy Combined \$8,150 individual, \$16,300 family	Medical + Pharmacy Combined \$6,900 individual, \$13,800	Medical + Pharmacy Combined \$6,900 individual, \$13,800 family	Medical + Pharmacy Combined \$7,900 individual, \$15,800 family
Short-Term Supply at a	Short-Term Supply at a Retail Location (up to a 31-day supply limit)			
Tier 1 - Generic	\$15 copay	20% coinsurance	\$15 copay	\$20 copay
Tier 2 – Preferred Brand	30% coinsurance	25% coinsurance	25% coinsurance	25% coinsurance (Min \$40/ Max \$80)
Tier 3 - Non-Preferred Brand	50% coinsurance	50% coinsurance	50% coinsurance	50% coinsurance (Min \$100/ Max \$200)
Extended-Day Supply at Mail Order or Retail-Plus Pharmacy Location (60- to 90-day supply)				
Tier 1 – Generic	\$45 copay	20% coinsurance	\$45 copay	\$45 copay
Tier 2 - Preferred Brand	30% coinsurance	25% coinsurance	25% coinsurance	25% coinsurance (Min \$105/ Max \$210)
Tier 3 - Non-Preferred Brand	50% coinsurance	50% coinsurance	50% coinsurance	50% coinsurance (Min \$215/ Max \$430)
Specialty Medications 31-Day Supply Limit	30% coinsurance	20% coinsurance	20% coinsurance	20% coinsurance (Min \$200/ Max \$900)

SHORT-TERM SUPPLIES OF MAINTENANCE MEDICATIONS



What are Maintenance Medications?

Maintenance medications are medications commonly used to treat conditions that are considered chronic or long-term. These conditions usually require regular, daily use of medicines.

Short-Term Supply of a Maintenance Medication at Retail Location (up to a 31-day supply)

The second time you fill a short-term supply of a maintenance medication at a retail pharmacy, you will be charged the coinsurance and copays below.

Benefit	TRS-ActiveCare Primary	TRS-ActiveCare HD	TRS-ActiveCare Primary+	TRS-ActiveCare 2
Tier 1 – Generic	\$30 copay	20% coinsurance	\$30 copay	\$35 copay
Tier 2 - Preferred Brand	30% coinsurance	25% coinsurance	25% coinsurance	25% coinsurance (Min \$60/ Max \$120)
Tier 3 - Non-Preferred Brand	50% coinsurance	50% coinsurance	50% coinsurance	50% coinsurance (Min \$105, Max \$210)

WHERE TO FILL EXTENDED-DAY SUPPLY PRESCRIPTIONS?



You can fill a 90-day supply of prescription medication at the Caremark Mail Order pharmacy or a Retail-*Plus* pharmacy location.

 You can find a Retail-Plus pharmacy near you at www.info.caremark.com/trsactivecare or by calling Customer Care at 1-866-355-5999.

NOTE: If you utilize Caremark's Mail Order pharmacy, you can split payments for a 90-day supply into three payments, over three months.

 You can set up a mail order prescriptions at www.caremark.com or by calling CVS Caremark Customer Care at 1-866-355-5999.

CHECK DRUG COST TOOL



You can check the cost of your medication online at: www.info.caremark.com/trsactivecare

Brand (i)

Wellbutrin Sr 100mg Tablet Sr 12h

 \bowtie

90-day supply Mail service 90 tablets \$560.87

for 3 months

You pay **100**% of the cost.
Your Plan pays **\$0.00** per 3 months

See cost details

Talk to your doctor about requesting this prescription

FlexPay available

Pay in three installments of \$186.96 ①

Online ordering unavailable

Generic (i)

Bupropion Hcl Sr 100mg Tablet Sr 12h o

 \bowtie

90-day supply Mail service 90 tablets

Locate this tool by logging into your account on **www.caremark.com**. Then select the 'Check Drug Cost Tool.'

Your Best Value

\$0.00

for 3 months

You pay 0% of the cost. Your Plan pays \$7.10 per 3 months

See cost details

Talk to your doctor about requesting this prescription

DIABETIC METER AND SUPPLIES



- Preferred Diabetic Meters are available at no cost to eligible to you.
- For more details, please contact CVS Caremark Diabetic Meter Program at 1-800-588-4456



Up to a 31-Day Supply at Retail Pharmacy

 You pay \$0 for needles and syringes if purchased the same day as insulin.

90-Day Supply at Retail-*Plus* Network Pharmacy or Caremark Mail Order Pharmacy

- You pay \$0 for all needles, lancets and syringes, regardless of manufacturer
- To obtain test strips at no cost, you must use the preferred brand

NO-COST DIABETES ACCU-CHECK BLOOD GLUCOSE METER



How do you qualify for this offer?**

- Be enrolled in the prescription benefit plan
- Have diabetes
- Have a valid prescription for Accu-Chek blood glucose test strips. If you don't already have a prescription for blood glucose test strips, we may be able to help get one from your doctor.

Your next steps:

- Call the CVS Caremark® Member Services Diabetic Meter Team at 1-800-588-4456.
- Have your prescription ID number and your doctor's name and phone number ready when you call.



"Blood glucose meters are funded by Roche Diabetes Care Inc.® (Accu-Chek). Choice of meters is subject to change.
""Additional requirements or limitations may apply.

This document contains references to brand-name prescription medical products that are trademarks or registered trademarks of pharmaceutical companies not affiliated with CVS Caremark. Image Source: Getty Images 2018.

@2018 CVS Caremark. All rights reserved. 106-12469A 091418

ACCESS TO ID CARDS





CVS Caremark App

Log into your account and have your ID card at the palm of your hand.



www.caremark.com

Log into www.caremark.com and print your ID card.



Caremark Customer Care

Employees can contact a Customer Care Representative at 1-866-355-5999.

MANAGE YOUR PRESCRIPTION BENEFIT ANYWHERE, ANYTIME





Easy Refills—Scan the barcode on your Rx label to refill available prescriptions.



View ID Card—No need to carry your benefit ID card. With the app, you always have it on hand.



Fill New Prescriptions—Take a photo of the front and back of your new paper prescription and CVS Caremark Mail Service Pharmacy will take it from there.



Pharmacy Locator—Find in-network retail pharmacies near you.



Manage Your Profile—Set your notifications, update shipping and billing information, and more.

Download the CVS
Caremark app for
on-the-go access to
helpful tool and
resources



Register today at Caremark.com/mobile or download the mobile app.



SCOTT & WHITE CARE PLAN

Central and North Texas

WELCOME TO SCOTT & WHITE CARE PLANS



- Now including FirstCare Health Plans
- What that means for you:
 - -Access to thousands of providers throughout Central Texas
 - –In-network coverage from doctors, specialists and facilities of the Baylor Scott & White Health system
 - -No referral needed to see in-network specialists

A TEXAS COMPANY



- Specializing in Texas health insurance plans since 1982
- Serving 140 Texas counties
- Offices in Abilene, Amarillo, Austin, Dallas, Lubbock and Waco; Corporate headquarters in Temple
- Joined TRS-ActiveCare program in 2007
- Currently cover 47,000+ school employees and their dependents



Our Mission: Promote the well-being of all individuals, families and communities

Our Ambition: To be the trusted leader, educator and innovator in value-based care delivery, customer experience and affordability.

Our Goal: To engage you in your own care and give you tools and resources you need

TRS.SWHP.ORG

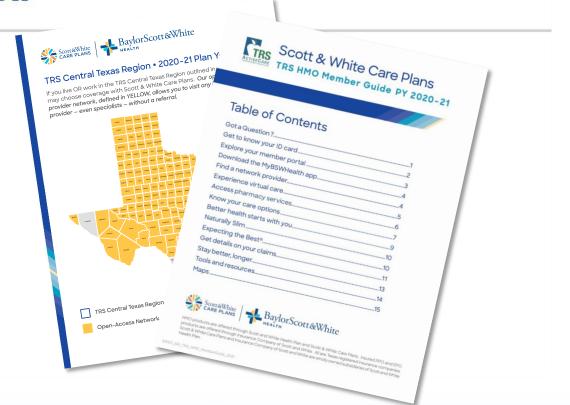
TRS
ACTIVECARE
TEACHER RETIREMENT SYSTEM OF TEAS.

Your one-stop shop for benefits information

2020-21 Plan Year Benefits Information

General Plan Information

- 2020-21 TRS Member Guide
- 2020-21 TRS Member Guide (Spanish)
- 2020-21 TRS Maps
- 2020-21 TRS Evidence of Coverage (EOC)
- 2020-21 TRS SBC
- 2020-21 TRS SBC (Spanish)



BENEFIT HIGHLIGHTS FOR 2020-21



- 100% preventive care coverage
- Low deductible option
- Access to virtual care options—like eVisits and video visits—for a \$0 copay
- First in-person sick visit \$0 copay
- No copay for PCP visits for dependents under age 19
- Maximum out-of-pocket includes medical and prescription drug deductibles, copays and coinsurance

For additional plan information, see the Members' page at trs.swhp.org

BENEFIT HIGHLIGHTS FOR 2020-21 (CONT.)



- No referrals needed for in-network physicians
- Comprehensive network of quality physicians
- Local offices; Texas-based customer service
- Worldwide emergency care
- Digital wellness coaching available to all members
- Naturally Slim® available to all members
- Expecting the Best[™] maternity program

For additional plan information, see the Members' page at trs.swhp.org

VIRTUAL CARE AT \$0 COPAY



MyBSWHealth

- eVisits Online diagnosis and treatment plan for common medical conditions
- Video Visits Online with a doctor, face-to-face in real time
- Both available at MyBSWHealth.com or the MyBSWHealth app

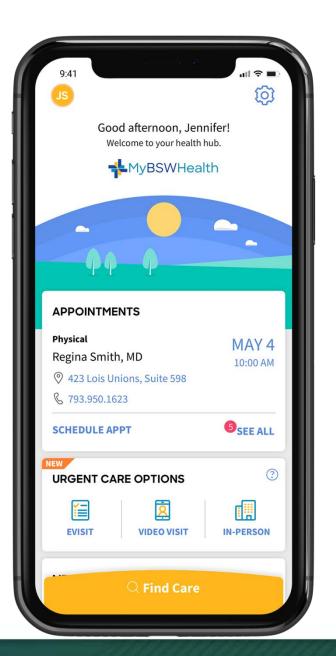
MDLIVE

- Talk to doctors, licensed therapists and more, for general health and behavioral health concerns.
- Visit by phone, secure video, or the MDLIVE app



Be sure to link your account in the app:

- 1. Tap the gear icon in the top right corner
- 2. Tap "Manage Linked Accounts"
- Tap "Link Account"
- 4. Enter member information











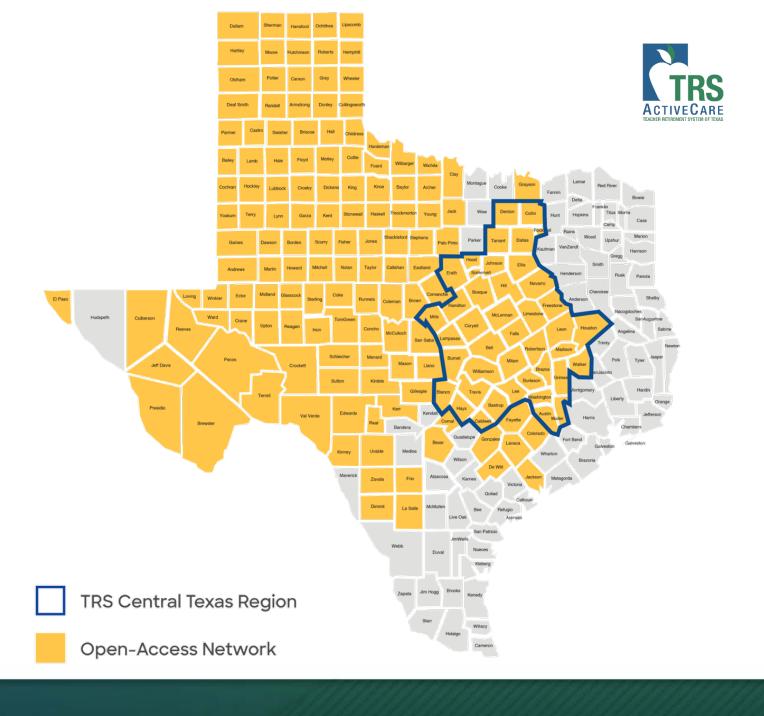


NATURALLY SLIM

A unique mindful-eating curriculum combined with technology to teach people the skills needed to sustainably lose weight and improve their health—while eating foods they love.

- NO COST to SWCP TRS members
- NO WAITING for a class to form
- Accessible via computer and mobile device
- Learn more at trs.swhp.org

TRS Central Texas Region



MEDICAL COVERAGE OVERVIEW



NO PCP copay for first sick visit

NO PCP copay for dependents

(age 19 and under)



2020-21

Deductible

\$950 per individual / \$2,850 per family

Out-of-Pocket Maximum

Includes medical/drug deductible, copayments & coinsurance \$7,450 per individual / \$14,900 per family

Office Visit

Primary Care: \$20 (\$0 for first sick visit)

Primary Care for Dependents (age 19 and under): \$0

Specialist Visits: \$70

Inpatient/Outpatient Services

20% after deductible (member share)

Preventive Care

\$0 with no deductible

2020-21 PREMIUM INFORMATION



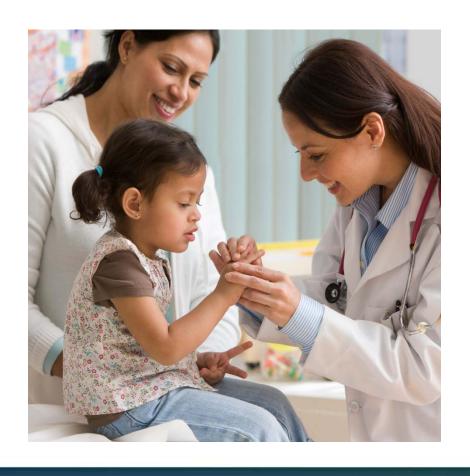
Coverage Category	2020-21 Premiums
Employee Only	\$551.10
Employee and Spouse	\$1,382.06
Employee and Child(ren)	\$883.50
Family	\$1,478.56

For detailed plan information, see the Members' page at trs.swhp.org

PHARMACY COVERAGE OVERVIEW



\$0 copay on ACA Preventive Medications



2020-21

RX Deductible

\$150 per individual (ACA Preventive and Preferred Generics excluded) Rx

Rx Out-of-Pocket Maximum Included in plan's Out-of-Pocket Maximum

Retail 30-Day Supply

ACA Preventive: \$0

Preferred Generics: \$5

Preferred Brand: 30% after Rx deductible

Non-preferred Brand /

Non-preferred Generics: 50% after Rx deductible

Specialty Medications

Tier 1 and 2: 15% after Rx deductible Tier 3: 25% after Rx deductible

RESOURCES FOR REDUCING HEALTHCARE COSTS



- Emergency Room (ER) should only be used when a person's life is in danger or if waiting
 may cause a loss of function of a body part, organ or system
- Urgent Care Clinics when you can't wait until the next day or your doctor's office is closed
- Virtual Care \$0 copay including Baylor Scott & White eVisits and video visits, plus additional services powered by MDLIVE
- Generic Medications use when available and/or order a 90-day supply to save time and money
- Stay In-Network in-network doctors have agreed to accept our payment along with your copayment as the entire cost of their services
- Talk to a Nurse Need care advice? Should you see a doctor? Get the info you need today! See the back of your ID card for additional information

MYBSWHEALTH WEBSITE / APP

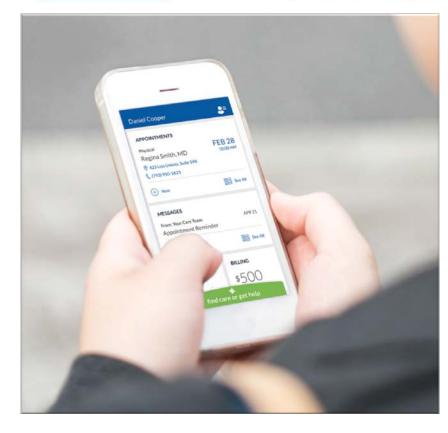


- Find a provider
- Send a secure message
- See copays, track deductible and out-ofpocket max
- Pay bills and track claims
- View test results and past visit summaries
- Experience eVisits or video visits
- Manage and refill prescriptions
- View your digital ID card

Just a download away:







WHY CHOOSE SWHP?



- NO out-of-pocket costs for preventive care service
- NO primary care copays for dependents age 19 and under
- NO referrals required
- Telehealth: MyBSWHealth, MDLIVE and Nurse Advice Line
- Wellness: Online coaching, Naturally Slim and Expecting the Best
- Texas-based customer service
- Worldwide emergency care
- Dedicated website
- Claims and benefit information available 24/7

CONTACT US



CALL Customer Service: 800-321-7947

MESSAGE through the member portal: trs.swhp.org

TRS website:

trs.texas.gov/Pages/healthcare_trs_activecare.aspx







South Texas

WHY BLUE ESSENTIALS?

Delivering Value, Focusing on Quality





AFFORDABILITY

A cost-effective network of select providers at a lower cost than a traditional PPO



ACCESS

The statewide Blue Essentials network offers participants access without compromising benefits, quality or services.



MEMBER ENGAGEMENT

Web and mobile tools such as Provider Finder® help guide decision-making.

BLUE ESSENTIALS

Participants with Blue Essentials select a primary care provider (PCP) who coordinates care with referrals to specialists.

Participants enjoy:

- Affordable, predictable costs
- Patient-centric, PCP-guided care
- Access to a statewide network of highquality health care providers
- 100% coverage of recommended routine preventive care and screenings
- Self-service tools that support decision-making when it comes to selecting a provider, using benefits and understanding treatment costs



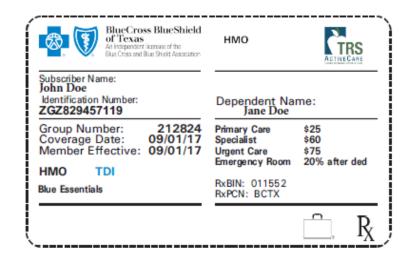


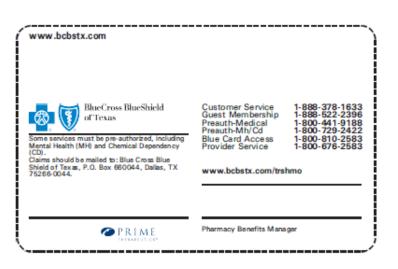


ID CARDS MAILED TO YOUR HOME



- All HMO participants will receive new cards.
- Each individual covered under the plan will receive a card.
- Extra ID cards can be requested, free of charge.
- There will be one card for both Medical and Pharmacy
- The effective date printed on the cards will be 09/01/2020
- Participants should expect to receive new cards around late-August.
- Participants who make changes after the new cards are mailed will get a second set of cards.





SIMPLE, AFFORDABLE AND EASY TO USE

Patient-Centered, Physician-Guided Care



Blue Essentials ^M SOUTH TEXAS HMO		
Deductible	\$500 Individual/\$1,000 Family	
Out-of-Pocket Maximum (Applies to both medical and pharmacy)	\$4,500 Individual/\$9,000 Family	
Office Visits Primary/Specialist	\$25 Copay/\$60 Copay	
Preventive Care	100%	
Emergency Room Copayment	After deductible, plan pays 80%; you pay 20%	
Urgent Care Copayment	\$75 Copay	
Outpatient	After deductible, plan pays 80%; you pay 20%	
Inpatient Copayment	After deductible, plan pays 80%; you pay 20%	
Pharmacy	\$100 Copay per Member Generic: \$10 Retail; \$30 Mail Order Preferred: \$40 Retail; \$120 Mail Order Non-Preferred: \$60 Retail; \$195 Mail Order	

MONTHLY PREMIUM RATES 2020-21



SOUTH TEXAS HMO

Coverage Category	2020-21
Employee Only	\$491.54
Employee and Spouse	\$1182.52
Employee and Child(ren)	\$766.96
Family	\$1258.52

SOUTH TEXAS HMO

TRS

Available to employees living, working or residing in the following counties:

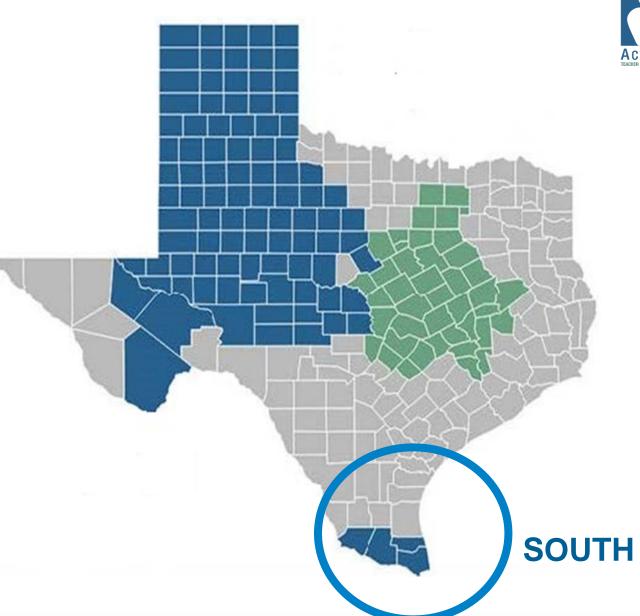
- Cameron
- Hidalgo
- Starr
- Willacy

Provider Network

Blue Essentials

Provider Finder

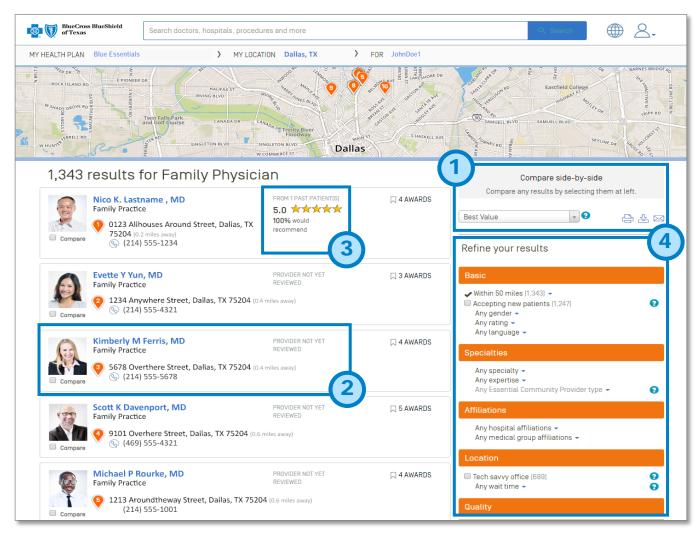
- Blue Essential network providers can
- be found online at:





Find Doctors ... Fast

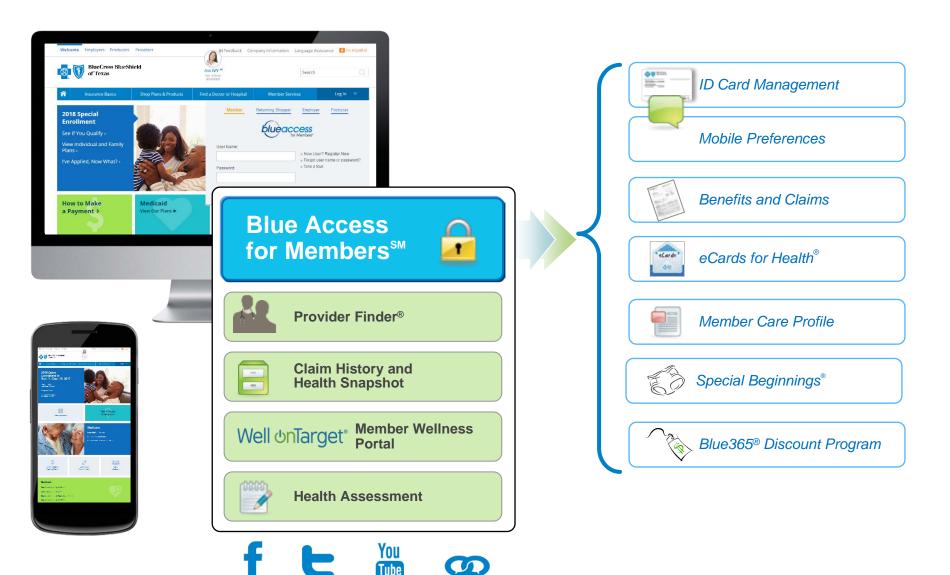




- Refine results with side-by-side comparison
- Advanced demographics information such as doctor photos and highlights help members feel at ease when choosing providers
- View what other members think about the doctor
- Further refine your search to find the most pertinent providers

Online Tools and Resources





Be Your Healthiest Self...We'll Help

TRS
ACTIVECARE
TRADIER RETIREMENT SYSTEM OF TEXAS

Online...on the phone...on the go. However you choose to fit good health into your daily life, you've got tools to help you. Follow these simple steps to sign up for Blue Access for MembersSM (BAMSM) — where you can access all the health and wellness programs included with your plan.







A Path to Wellness

Reach your goals with the Well on Target® online portal or mobile app. Complete self-paced programs to help improve long-term health issues and your overall well being. Plus, get one-on-one support from a health coach and rewards for healthy activities.¹

Fitness at Home and on the Road

Choose gyms from a large, national network, so you can exercise wherever life takes you. Plus, enjoy savings on acupuncture, massage and personal training.²

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If you're ready to start a family or already expecting, check out apps from Ovia Health[®]. They include expert advice to support you through all the stages of planning for and having a baby.



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Increase Member Engagement with Blue Access Mobile[™]







PUBLIC SITE

No log-in required

- Insurance basics
- Find network providers
- Log-in or register for Blue Access for Members[™]
- Contact us



BCBSTX APP

- Quick access to member claims, coverage, ID information and more
- Ability to email your ID or send to Apple Wallet
- Available in English and Spanish





BLUE ACCESS FOR MEMBERS

Secure Site: log-in required

- Digital ID card
- Benefits/eligibility
- Claims status
- User profile
- Osei piolile
- Pay My BillMy Care Profile
- Health and wellness resources



TEXT MESSAGING

Static

 Rx reminders, diabetes diet tips, heart health tips, claim status notifications, exercise and fitness tips

Dynamic

 ID card management, coverage management

BLUE ESSENTIALS – CONTACT US



Personalized, Dedicated Customer Service

- Claim questions/status
- Network provider information
- Medical and pharmacy coverage questions
- ID card requests
- Transition of care information
- Help with online tools





BLUE ESSENTIALS WEST TEXAS HMO 🚳 🛐





BlueCross BlueShield

West Texas

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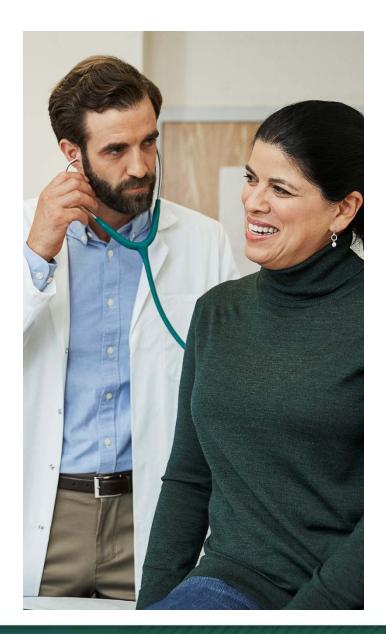
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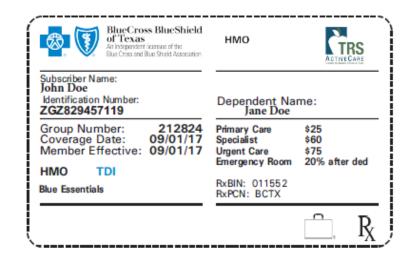




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SIMPLE, AFFORDABLE AND EASY TO USE

Patient-Centered, Physician-Guided Care

	TRS
	ACTIVE CARE TEACHER RETIREMENT SYSTEM OF TEXAS
1	

Blue Essentials [™] WEST TEXAS HMO		
Annual Deductible	\$950 Individual/\$2,850 Family	
Out-of-Pocket Maximum (Applies to both medical and pharmacy)	\$7450 Individual/\$14,900 Family	
Office Visits Primary/Specialist	\$20 Copay/ \$70 Copay	
Preventive Care	100%	
Emergency Room Copay	\$500 Copay; 25% after deductible	
Urgent Care Copay	\$50 Copay per visit	
Outpatient	\$500 Deductible; 25% after deductible is met	
Inpatient	\$500 Deductible; 25% after deductible is met	
Pharmacy	\$150 Deductible Generic: \$5 Retail/\$12.50 Mail Order Preferred Brand: 30% after Pharmacy Deductible Non-Preferred Brand: 50% after Pharmacy Deductible	



Monthly Premium Rates 2020-21 WEST TEXAS HMO

Coverage Category	2020-21
Employee Only	\$534.42
Employee and Spouse	\$1287.58
Employee and Child(ren)	\$835.68
Family	\$1370.12

WEST TEXAS HMO

Available to employees living, working or residing in the following counties:

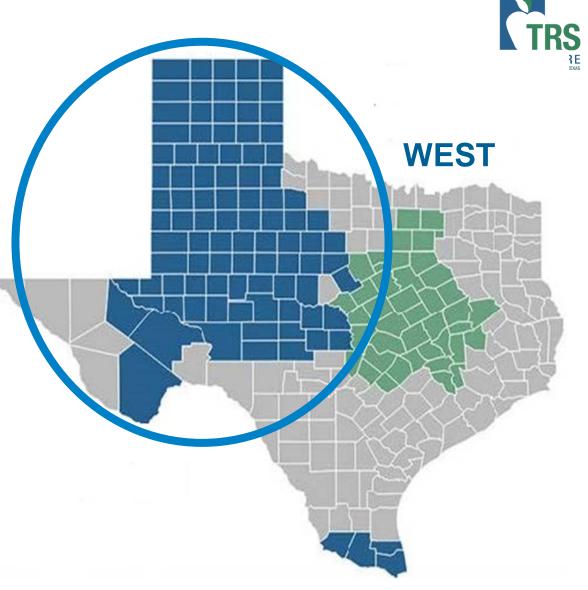
Andrews, Armstrong, Bailey, Borden, Briscoe, Callahan, Carson, Castro, Childress, Cochran, Coke, Coleman, Collingsworth, Comanche, Concho, Cottle, Crane, Crockett, Crosby, Dallam, Dawson, Deaf Smith, Dickens, Donley, Eastland, Ector, Fisher, Floyd, Gaines, Garza, Glasscock, Gray, Hale, Hall, Hansford, Hartley, Haskell, Hemphill, Hockley, Howard, Hutchinson, Irion, Jones, Kent, Kimble, King, Knox, Lamb, Lampasas, Lipscomb, Loving, Lubbock, Lynn, Martin, Mason, McCulloch, Midland, Mitchell, Moore, Motley, Nolan, Ochiltree, Oldham, Parmer, Pecos, Potter, Randall, Reagan, Reeves, Roberts, Runnels, San Saba, Scurry, Schleicher, Shackelford, Sherman, Stephens, Sterling, Stonewall, Sutton, Swisher, Taylor, Terry, Throckmorton, Tom Green, Upton, Ward, Wheeler, Winkler, Yoakum (New Counties)

Provider Network

Blue Essentials

Provider Finder

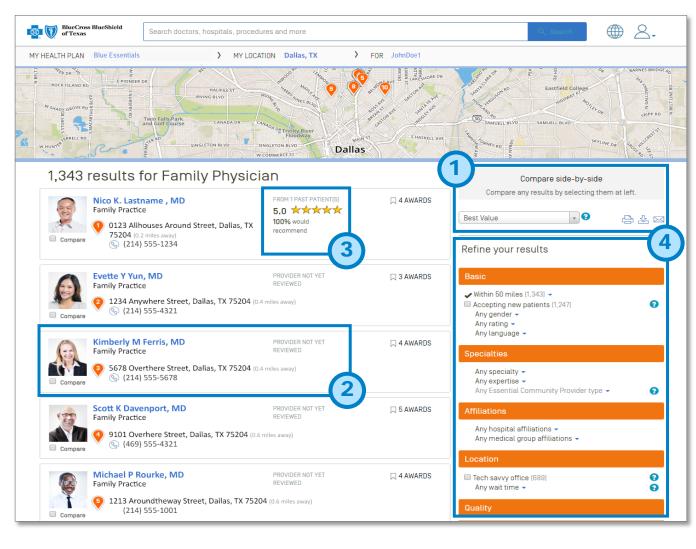
 A complete list of network providers is available at: www.bcbstx.com/trshmo





Find Doctors ... Fast

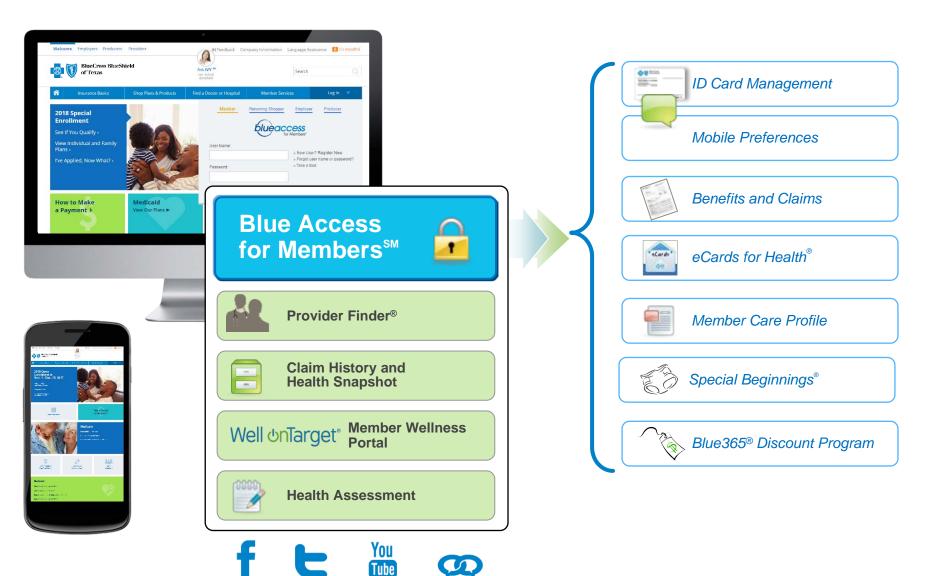




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Secure Site: log-in required

- Digital ID card
- Benefits/eligibility
- Claims status
- User profile
- Pay My Bill
- My Care Profile
- Health and wellness resources



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Static

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- ID card requests
- Transition of care information
- Help with online tools





WHO IS ELIGIBLE TO ENROLL?



To be ELIGIBLE for TRS-ActiveCare coverage, you must:

Be employed by a participating district/entity and

- Be an active, contributing TRS member or
- Be employed 10 or more regularly scheduled hours each week

You are INELIGIBLE for TRS-ActiveCare coverage if you*:

Are receiving health care coverage as an employee or retiree under

- Texas State College and University Employees Uniform Insurance Benefits Act (e.g., coverage offered by The University of Texas System or the Texas A & M University System)
- Texas Employees Uniform Group Insurance Benefits Act (e.g., coverage offered by ERS)
- TRS-Care.

*Note they can be covered as **dependents** of eligible employees

DEPENDENT ELIGIBILITY



Eligible dependent can include:

- Spouse, including common law spouse
- A child under age 26: a natural child, an adopted child (or a child who is lawfully placed for legal adoption), stepchild, foster child, or child under legal guardianship of the employee
- "Any other child" under the age of 26 (unmarried) in a regular parent-child relationship with the employee – must meet residency and support criteria
- A grandchild under age 26
- Unmarried disabled dependent (age 26+) must live with employee

A dependent does not include a brother or sister of an employee unless the sibling is an unmarried individual under 26 years of age who is either: (1) under the legal guardianship of the employee, or (2) in a regular parent-child relationship with the employee and meets the "any other child" criteria

Parents and grandparents of the covered employee do not meet the definition of an eligible dependent

SPECIAL ELIGIBILITY SITUATIONS



- If an employee and spouse both work for a participating district/entity:
 - A spouse may be covered as an employee or as a dependent of an employee
 - Only one parent can cover dependent children
- A child (under age 26) employed by a district/entity can be covered as a dependent:
 - If the child is a contributing TRS member and they are **not** eligible for split or pooled billing



THREE STEPS TO ENROLL



- Choose your health plan
- Complete an Enrollment Changes and Declination Form available online or from your Benefits Administrator
- Sign, date and submit form to your Benefits Administrator

ANNUAL ENROLLMENT



- Enrollment Period for 2020-21 Plan Year:
 July 15– Aug. 21 (Annual Enrollment)
- Use the Enrollment Guide and Provider Directories to pick a plan and coverage that is right for you.
 - If you select the TRS-ActiveCare Primary, TRS-ActiveCare Primary+ or Blue Essentials (South HMO or West HMO) plans, you will need to select a Primary Care Provider (PCP).
- Your current plan election will carry forward to the new plan year (Sept. 1, 2020 through Aug. 31, 2021). You do not have to actively enroll for coverage this year.
- Your premium will be adjusted to reflect any rate change, effective Sept. 1, 2020.

ASK EMMA

- Emma is your new virtual assistant.
- Emma will help you select the best plan based on age, gender, address, plan details and costs. Emma also evaluates expected doctor visits and current prescription drugs usage.

Your benefits are a big deal.

Review your benefits and find the plan that fits you best. Enroll Jul. 15 - Aug. 21

"How much can I expect to pay?" "Which plan should I pick?"



"What exactly does 'deductible' mean, again?"

It's easy with **Ask Emma**™.

Your private, personalized virtual assistant that helps you get the most from your benefits.

Don't wait. Get started today!

Visit trsactivecare.bswift.com from work, home or any mobile device.

SELECTING A PRIMARY CARE PROVIDER (PCP)



- You will be prompted to select a PCP for you and your covered dependents if you elect one of these plans:
 - TRS-ActiveCare Primary
 - TRS-ActiveCare Primary+

- Blue Essentials West Texas HMO
- Blue Essentials South Texas HMO
- A link to BCBSTX Provider Finder search tool will be available with instructions for selection.
- If you are moving to TRS-ActiveCare Primary+, you may see a prepopulated PCP in the enrollment portal based on your prior claims.
- During Annual Enrollment, PCP changes can be made in the enrollment portal or by contacting your Benefits Administrator.
- After Sept. 1, you may make changes to your PCP through Blue Access for Members at www.bcbstx.com/trsactivecare or by calling a Personal Health Guide at 1-866-355-5999.

ENROLLMENT CHANGES AND DECLINATION FORM



Complete the enrollment process by using the Enrollment Changes and Declination Form.

If you are a new enrollee:

- Enter all the requested information for you and any dependents you want to cover.
- Choose coverage that is good for you. You can use Ask Emma to understand your options.
- Sign the Enrollment Changes and Declination Form.
- Return the form to your Benefits Administrator.

If you are an existing employee:

- Select a different TRS-ActiveCare plan option.
- Add or drop dependents.
- Cancel and/or decline coverage (cancellations and declinations must be completed on two separate forms).
- Update demographic information
- Sign the Enrollment Changes and Declination Form.
- Return the form to your Benefits Administrator.

ENROLLING FOR THE FIRST TIME



Enrolling for the first time:

- Forms are due to the Benefits Administrator before:
 - The end of the plan enrollment period, or
 - 31 calendar days after your actively-at-work date, or
 - 31 calendar days after a special enrollment event
- New hires may choose their effective date of coverage
 - Actively-at-work date, or
 - First of the month following their actively-at-work date
- The full premium for the month will be due if choosing actively-at-work date. Premiums are not pro-rated.

MAKING CHANGES/SPECIAL ENROLLMENT EVENTS



Employees may be eligible to enroll for coverage, change plan options or change covered dependents during the plan year, within 31 days after a special enrollment event occurs.

- New dependent
 - Marriage, birth, adoption or placement for adoption
 - Special rules apply to newborns
- Loss of other coverage
- Changing districts/entities is not considered a special enrollment event.

NEWBORN COVERAGE



- Covered first 31 days, if you have coverage
 - Does not apply to newborn grandchildren
- You must add your newborn with your Benefits Administrator or your district's enrollment portal within 31 days after their date of birth
- Plan changes must be made within 31 days after the baby's date of birth
- It is not necessary to wait for the baby's social security number (SSN)
 - Submit application without SSN
 - Re-submit another form after SSN is issued

DEPENDENT DISABILITY PROCESS



Dependent Child's Statement of Disability:

- A letter will be sent to the employee advising them of the loss of coverage for their dependent on their dependent's birthday, unless the employee provides details of their dependent's disability.
- To provide details of disability, an employee completes the *Disabled Dependent Authorization* form and has their dependent's doctor complete the *Disabled Dependent Physician Certification Form*.
- Complete forms can be faxed or mailed along with any supporting documentation the doctor includes for review.
 The fax number and mailing address are noted on the forms.

SPLIT PREMIUM PROCESS



Split Premium Form – Online only:

- Benefits Administrators must complete their portion of the online Application to Split Premium form.
- The Split Funded arrangement will terminate at the end of the plan year and will need to be reissued every year thereafter.
 - Split renewals must be completed during Annual Enrollment, within the special enrollment or new hire enrollment period.
- You must be employed by districts/entities participating in TRS-ActiveCare.
- The cost for TRS-ActiveCare coverage will be split between the two employers.
- One employee must decline coverage.
- The Benefits Administrator must also sign and approve the form.



THREE STEPS TO ENROLL



- Choose your health plan
- Log in to bswift and make any additions, changes or plan elections. If your district/entity uses another third party administrator portal, see your Benefits Administrator for instructions.
- Submit your transaction. It will be reviewed and approved by your Benefits Administrator.

ENROLLING IN THE PLAN – NEW ENROLLEE



Complete the enrollment process by registering on bswift.

The bswift Enrollment Portal can be accessed directly by employees to enroll or change coverage/self-service sign-on.

Go to: www.trsactivecare.bswift.com.

If you are a new enrollee:

- Log into bswift and find your district
- Click Create Your Account
- Enter the required information (*indicates that it is a mandatory field)
- Once all required fields are filled in, create a username and password

Now you are ready to enroll

- Click save and continue to the dependent page, if applicable
- If there are no dependents to enroll check Next

ENROLLING IN THE PLAN – RETURNING ENROLLEE



If you are a returning enrollee and you want to change your benefit plan coverage for 2020-21:

- Log in to bswift; Go to: www.trsactivecare.bswift.com.
- Find your district
- Click Create Your Account.
- Enter your social security number and date of birth. Then create a username and password.
- Update your demographic information under My Profile or Employee Information page, if necessary.
- Click save and continue to the Family Information page, if applicable.
- Add or drop dependents
- Select a TRS-ActiveCare plan.
- Cancel and/or decline coverage