

# TRS-Care Standard Frequently Asked Questions

## ID Cards

### Is there a digital ID card option?

Yes. A digital ID card gives you easy access to your coverage information all the time. While you may have received your ID card in the mail, you can also get it digitally. It works the same as your physical ID card. With your digital ID card, you can:

- Share your digital ID card with your doctor's office.
- View, download or print your digital ID card.

### How do I get my digital ID card?

You can get your digital ID card two ways — on your phone or computer.

By phone:

1. Download the **BCBSTX App**. You can find it in the Apple App Store or Google Play Store. You can also text **BCBSTXAPP** to **33633**.
2. Log in with your **BAM** username and password. If you don't have one, create an account.
3. On the dashboard, select **View ID Card**.
4. That's it! You're looking at your digital ID card. You can save the ID card directly to your phone for easy access.

By computer:

1. Go to [www.bcbstx.com/trscarestandard](http://www.bcbstx.com/trscarestandard) and select **Log In**.
2. To log in, use your **BAM** username and password. If you don't have one, create an account.
3. Select the **ID card icon** on the dashboard.
4. That's it! You're looking at your digital ID card. You can download or print the ID card from here.

### If I misplace or lose my ID card, how can I get another one?

- Use the BCBSTX App.
- Go to [TRS-Care Standard by BCBSTX](#) and log in with your BAM username and password. Select **Log In** in the upper-right hand corner of the page.
- Call a Personal Health Guide at **1-866-355-5999** to ask for a new ID card.

## Provider Finder and In-Network Providers

### Will I benefit from using an in-network provider instead of an out-of-network provider?

An in-network doctor or health care provider is one who contracts with BCBSTX to provide services to TRS-Care participants. You pay your copay or coinsurance according to your TRS-Care Standard benefits. If you

choose out-of-network providers, you may have higher out-of-pocket costs and benefits will be paid at the out-of-network benefits level. Your provider may require you to submit claims for the services provided, rather than bill BCBSTX directly. You may also be subject to balance billing from out-of-network providers.

#### Can I compare costs before getting care or services?

Yes. You can estimate costs for your care up front, so you aren't surprised with a bill later.

Use the BCBSTX [Cost Estimator Tool in Provider Finder®](#). This tool helps you make more informed health care choices by estimating the out-of-pocket costs before you head to the provider. That way, you know what to expect before your appointment.

You can also call a Personal Health Guide at **1-866-355-5999**, 24 hours a day, seven days a week, to help estimate the costs of specialist visits, X-rays or other diagnostic tests.

#### How can I find an in-network provider or hospital?

Use Provider Finder to see providers and hospitals in the nationwide network. Go to [TRS-Care Standard by BCBSTX](#) and select **Doctors and Hospitals** to search. Or log in to BAM for personalized Provider Finder results or call a Personal Health Guide at **1-866-355-5999**.

#### What is the name of my health plan's network?

Your health plan's network is Blue Choice PPO. **To check if your provider is in-network**, ask if they're a *PPO contracting provider with BCBSTX's Blue Choice PPO* **instead** of asking if they accept BCBSTX.

#### Can my current doctor become an in-network provider?

Nominate a provider for the BCBSTX network at [TRS-Care Standard by BCBSTX](#). Select **Doctors and Hospitals** and then **Nominate a Provider**. Check Provider Finder or call a Personal Health Guide at **1-866-355-5999** after 30 to 60 days to check the provider's status.

#### If my doctor is listed in Provider Finder, does that mean they are in network?

Yes. Your doctor is in-network if they're listed in Provider Finder.

#### What is Member Rewards?

Member Rewards is a program that lowers your out-of-pocket costs and gives you **cash rewards** when you choose a lower-cost, quality option for certain medical services. The benefits of using Member Rewards includes:

- compare costs and quality for many procedures such as screenings, scans, surgeries and more
- estimate out-of-pocket costs
- earn cash rewards with a max of \$599 per calendar year
- save money and make the most efficient use of your health care benefits
- consider treatment decisions with your doctors

For more information, visit [TRS-Care Standard Member Rewards](#) or call a Personal Health Guide at **1-866-355-5999**.

## Benefits

What are my TRS-Care Standard plan benefits?

Find more information about benefits at [TRS-Care Standard by BCBSTX](#).

When I retire, I'll switch from my current insurance to TRS-Care Standard. Will I have to meet a new deductible when I change?

Yes. You'll have to meet a new deductible under TRS-Care Standard.

How can I find out what services, procedures and equipment TRS-Care Standard covers?

Visit [Coverage and Benefits - TRS-Care Standard | Blue Cross and Blue Shield of Texas](#), and select the Summary of Benefits and Coverage and the Benefits Booklet. You can also call a Personal Health Guide at **1-866-355-5999**.

Is there a website where I can view all my benefits options?

Yes, it's [TRS-Care Standard by BCBSTX](#).

What is the difference between preventive and diagnostic services at a doctor's visit?

The purpose of a preventive care service is to prevent certain illnesses and diseases. The purpose of a diagnostic service is to find the nature and cause of an illness or other medical concern, along with the method of treatment.

Are treatments for preexisting conditions covered as preventive?

No. If you're getting care for a known medical condition, that care is diagnostic.

What mental health resources are available?

You can get help with your mental health in many ways.

- Use [Provider Finder](#) to find an in-network therapist, psychiatrist or other mental health specialist.
- Use [Teladoc](#) to schedule a virtual mental health appointment.
- Use [Headway](#) to find a mental health provider based off location, concern and your insurance.
- Use [Learn to Live](#) to see how much better life can feel with digital mental health programs.

Find out more at [TRS-Care Standard Mental Health](#).

Are colonoscopies preventive?

TRS-Care Standard covers screening colonoscopies as preventive service with a \$0 copay. If you have a history of colon cancer or had polyps removed in a past colonoscopy, all future colonoscopies are diagnostic and covered as an outpatient surgery. Call a Personal Health Guide at **1-866-355-5999** to find out if your colonoscopy is routine or diagnostic.

[Do I need a doctor's order to schedule my annual mammogram?](#)

No. Your annual screening mammogram doesn't require a written order. As with colonoscopy, screening mammograms are covered as a preventive service with \$0 copay. But if a previous screening mammogram resulted in additional diagnostic studies, future mammograms may have out-of-pocket cost.

[Can I get a list of preventive care services that are covered including immunizations?](#)

Call a Personal Health Guide at **1-866-355-5999**. They can provide information on all preventive services available to you.

[Is there a difference between a wellness visit and annual checkup?](#)

There can be a difference in patient responsibility for your annual checkups, depending on how your doctor bills the service. Call a Personal Health Guide at **1-866-355-5999** if you have questions on billing. Personal Health Guides can reach out to your doctor if you feel your bill has errors.

[Do I have to use a specific lab for lab work?](#)

We recommend calling a Personal Health Guide at **1-866-355-5999** before getting labs so you can verify that the lab you want to use is in-network.

[Does BCBSTX offer transportation to and from medical appointments?](#)

No. BCBSTX doesn't provide transportation services for plan participants.

[How should I determine where to go for care?](#)

Call the 24/7 Nurseline at no cost to you at **1-833-968-1770**. A registered nurse can help you decide if you should go to an emergency room, urgent care center or make an appointment with your doctor.

[Do you have a video library where I can learn how to get and use my benefits?](#)

Yes. We have a video library just for TRS-Care Standard participants. You can get quick, easy answers in short "how to" videos. They're packed with great information to help answer questions about your plan and help you use your benefits. Visit [TRS-Care Standard Video Library](#).

## Primary Care Provider and Referrals

[What is a PCP?](#)

A primary care provider is a health care professional who is your main point of contact for nonemergency care. With a PCP, you'll have somebody in your corner ensuring you get the care you need.

### Am I required to have a PCP?

No. TRS-Care Standard doesn't require a PCP. But we recommend having a PCP to help manage your health care needs.

### How can I find a PCP?

Use the [BCBSTX Provider Finder](#) to find a provider near you. You can search by location, specialty and more. You can also call a Personal Health Guide at **1-866-355-5999** for help.

### Do I need a referral to see a specialist?

You don't need a referral to see a specialist. But be sure to use in-network providers to ensure the highest level of benefits.

## Blue Access for Members<sup>SM</sup>

### What is Blue Access for Members?

BAM<sup>SM</sup> is a helpful resource at your fingertips. You can use BAM from your computer, phone or tablet. You and your covered dependents ages 18 and over can register for a BAM account. Once you register, you can get information about your health benefits anytime, anywhere.

### What can I do in BAM?

- **Find care** — find nearby care providers whether you're at home or traveling.
- **Review claims, coverage and wellness** — you can download your Explanation of Benefits, view dependent coverage and opt into health and wellness programs.
- **Use secure messaging** — send a message to Personal Health Guides and our trained clinicians.
- **Get your digital ID Card** — view, download, print or reorder it.

### How do I log into BAM on my computer?

1. Go to [www.bcbstx.com/trscarestandard](http://www.bcbstx.com/trscarestandard).
2. Select **Log In** in the upper-right hand corner of the page.
3. Use the information on your ID card to sign up.

### Is there an App for BAM?

Yes. It's called the BCBSTX App. You can get it by texting **BCBSTXAPP** to **33633**. It's available for download in the Apple App Store or Google Play Store.

## Out-of-State Coverage

### Do I have coverage outside of Texas?

Yes. You have nationwide coverage, so TRS-Care Standard covers you if you move or travel out of state. You also have emergency care when you travel internationally.

### What happens if my dependent lives out of state?

If your covered dependents are out of state for any length of time, they can continue to use BCBSTX's extensive nationwide network of providers. Call a Personal Health Guide at **1-866-355-5999** for help finding an in-network provider.

## TRS Virtual Health

### Do I have a virtual health option?

Yes. You have low-cost virtual care options through Teladoc and RediMD\* for medical and mental health. You can see a doctor 24/7 or make an appointment with a mental health specialist, whether you're traveling, taking a lunch break or want care from the comfort of home. Teladoc and RediMD providers will send your prescription to your preferred pharmacy in any state.

- Teladoc is a \$42 copay per visit.
- RediMD is a \$30 copay per visit.
- Both copays apply to your deductible. When you meet your deductible, the plan pays 80% and you pay 20%.

Immediate family members who don't have a TRS-ActiveCare health plan can also use TRS Virtual Health at a fixed rate.

- Teladoc is \$55 per visit
- RediMD is \$35 per visit. Use code **TRS35** when registering a family member.

\*RediMD doesn't provide mental health care.

### How do I use Teladoc?

- Go to [Teladoc](#) and follow the instructions to set up your account.
- Download the Teladoc mobile app from the [Apple App Store](#) or [Google Play Store](#).
- Call **1-855-Teladoc** (1-855-835-2362) to speak to a representative.

If the patient is 17 or younger, a parent or guardian must be present during the virtual visit.

### How do I use RediMD?

- Go to [RediMD](#) and follow the instructions to register. Enter the code **trscarestandard** when prompted. If you're registering a family member who isn't a TRS-Care Standard participant, use code **TRS35**.
- Download the RediMD mobile app from the [Apple App Store](#) or [Google Play Store](#).
- You can also call **1-855-942-4900** to speak to RediMD customer service.

If the patient is 17 or younger, a parent or guardian must be present during the virtual visit.

#### What are my virtual mental health benefits through TRS?

Teladoc also offers confidential mental health services from licensed therapists, psychologists, psychiatrists, or certified drug and alcohol abuse counselors for participants 13 and older. **Parents don't need to be present during mental health appointments for patients aged 13 to 17.**

- Psychiatrist (initial consultation) = \$185 before deductible
- Psychiatrist (ongoing consultations) = \$95 before deductible
- Psychologist or licensed clinical social worker consultations = \$85 before deductible

#### Can a Teladoc or RediMD provider write me a prescription from anywhere?

Teladoc and RediMD have providers throughout the United States. The provider you see can send a prescription to a pharmacy near you, if necessary, but they can't fill ongoing prescriptions. The provider may be able to fill a prescription if they feel it's medically necessary until you can see your physician in person. They also can't prescribe controlled substances.

## Health and Wellness

#### Does TRS-Care Standard offer programs for women's and family health?

Yes. You can get help with things like hormones, menopause, periods, pregnancy and parenting support. Your coverage covers well woman visits and preventive screenings at no added cost to you. If you need support for menopause, you can use the Ovia Health app. It can educate, support and guide you to understand and manage menopause.

#### What is Well OnTarget?

Well onTarget® offers personalized tools and resources to help all members — no matter where you may be on the path to health and wellness.

Find out how your health measures up by taking a Health Assessment. Answer a few questions about your health and lifestyle. Then, get a personal report that suggests programs that can help you improve your health.

You can even enroll in one-on-one [Wellness Coaching](#). To get started:

1. Log in to BAM by selecting **Log In** at the top of the webpage.
2. Select the **Wellness** tab then select **Well onTarget**.

3. You can also download the AlwaysOn® wellness app.

### What is the Fitness Program?

Discounted gym and fitness memberships are available through the Fitness Program. With affordable, no-contract memberships, you can go to any participating gym facility in the program's nationwide network. You can exercise even when you're traveling. Plus, save on well-being services like acupuncture, massage and personal training. You must be 18 or older to buy a membership.

### How much does the Fitness Program cost?

The Fitness Program has an initiation fee of \$19. Monthly fees range from \$19 to \$129, depending on the size of the gym network you choose. It's easy to sign up.

1. Log in to BAM at [TRS-Care Standard by BCBSTX](#).
2. Select **Wellness** and then **Fitness Program**. On this page, you can enroll, search for nearby fitness locations and learn more about the program.
3. Select **Enroll Now**. Then search and select the fitness location that's best for you. Remember, you can visit any participating fitness location in your plan after you sign up.
4. Verify your personal information and method of payment. Print or download your Fitness Program ID card. You may also ask to get your ID card in the mail.
5. Visit a fitness location today!

### What are Blue Points and how do they work?

Blue Points is a rewards program that lets you earn points to redeem for gift cards. You earn Blue Points when you:

- take a health assessment
- link a fitness device
- exercise
- complete an online, self-directed course

It's easy to get started with Blue Points:

1. Log in to your BAM account on [TRS-Care Standard by BCBSTX](#).
2. Go to the **Wellness** tab and select **Well onTarget**.

### Are Blue Points available for dependents?

Blue Points are available for dependents 18 and older with a BAM account.

### Can I get discounts on health and wellness products and services?

You can get savings on products and services from top retailers through [Blue365](#). It's free to join, and you can sign up to have weekly featured deals emailed to you.



Get deals on:

- hearing and vision
- fitness memberships and devices
- apparel and footwear
- nutrition
- pet products
- and more

## Vision and Dental Benefits

Does TRS-Care Standard offer vision and dental benefits?

- No. TRS-Care Standard does not offer routine vision and dental benefits.
- TRS-Care Standard covers routine eye exams if you have diabetes. Exams are subject to the deductible and coinsurance.
- TRS-Care Standard covers glasses within 12 months after intraocular surgery or accidental injury. The plan covers 80% of your first pair of glasses, frames, lenses or contact lenses, after you meet your deductible, up to the allowed amount.
- TRS-Care Standard may cover dental services if they are a medical service.
- Call a Personal Health Guide at **1-866-355-5999** for more benefit questions.

Does TRS-Care offer vision and dental benefits?

Yes. TRS offers separate, optional dental and vision plans for TRS retirees and their eligible dependents. Visit [TRS-Care Vision and TRS-Care Dental](#) to learn more. MetLife administers both plans.

## Claims and Billing

I paid out of pocket for a doctor's appointment. How do I submit that information?

Call a Personal Health Guide at **1-866-355-5999** for a medical claim form. The medical claim form is also at [TRS-Care Standard by BCBSTX](#) under **Tools and Resources**.

Are treatments for preexisting conditions covered as preventive?

If you're getting care for a known medical condition, it's considered diagnostic.

What is the allowed amount?

In-network providers have negotiated rates, or allowed amounts, in their contracts. The allowed amount is the maximum amount TRS-Care Standard will pay for a covered service.

The allowed amount is lower for out-of-network providers, so always see in-network providers to avoid [balance billing](#). In areas where there is no network, your plan covers medical expenses based on reasonable and customary charges, determined by claims from the same types of providers in a geographic region.

[Can an out-of-network provider balance bill me?](#)

[Balance billing](#) is when a medical provider or facility bills patients the difference between provider charges and insurance company allowed amounts. In-network providers may not balance bill for covered services. To prevent balance billing, be sure to use in-network doctors and providers.