Comparing TRS-Care to individual Medicare plans?

Talk to your agent about these key issues.

The TRS-Care Medicare Advantage® and TRS-Care Medicare Rx® plans are designed to give you valuable coverage at a competitive price.

When it comes to your monthly premium, paying a higher amount up-front means you may have a more manageable deductible and more affordable copays down the road. You’ll pay less when you need healthcare, making healthcare costs more predictable.

If you choose to sign up for another plan that has lower premiums than TRS-Care, but has a higher deductible, coinsurance and copays, you will save money in premiums but may have large, unpredictable costs when you need health care.

MAKE AN INFORMED DECISION

You should carefully consider any decisions you make about your health benefits because you may not be able to re-enter TRS-Care once you leave. **Retirees and surviving spouses, age 65 and above, who have terminated their TRS-Care coverage can only re-enter if they experience a special enrollment event. Generally, special enrollment events occur if you lose comprehensive coverage at no fault of your own, or you add a new dependent through marriage, birth or adoption.**

*It’s also important to think about your health care needs now—and what they might be in the future.*

MAINTAIN MEDICARE PART B

You must maintain Medicare coverage, including Medicare Part B coverage, to participate in TRS-Care. You risk losing all TRS-Care coverage if you do not have Medicare Part B coverage, which can result in significant out-of-pocket health care costs.

HAVE QUESTIONS? CONTACT TRS.

TRS has experienced staff that can also talk with you about your options and offer factual information. Contact TRS by telephone at 1-888-237-6762 (Dial Relay Texas 711), Monday-Friday 7 a.m. to 6 p.m., Central Time.
ASK YOUR AGENT TO GO THROUGH THIS CHECKLIST

☐ Will premiums increase simply because I’m getting older?
Some individual plan premiums increase each year along with your age, so a lower premium this year doesn’t guarantee lower premiums in the future. Ask how your premiums will increase if you enroll in a plan outside TRS-Care.

☐ How do out-of-pocket costs for this plan compare to the TRS-Care Plan? How much are doctor office visit copays, inpatient hospital copays, and the maximum out-of-pocket?
With the TRS-Care Medicare Advantage® plan, you’ll have low doctor visit copays, a low inpatient hospital admission copay, and low maximum out-of-pocket costs. Although the monthly premium may be higher than some plans, you’ll benefit from more predictable costs when receiving medical care.

☐ How big is my network? Which doctors and hospitals can I choose from?
Some Medicare plans with lower premiums offer small networks of doctors and hospitals. They also keep premiums low by not covering medical services by providers who are not in the network, except in emergencies. TRS-Care Medicare Advantage® offers a large, nationwide network of doctors and hospitals. And if you need to go out of the network, you’ll still have coverage.

☐ What’s the premium if the Medicare Part D plan covering prescription drugs is sold separately?
Unlike many plans, with TRS-Care Medicare Rx®, there isn’t a separate additional premium for prescription drug coverage. That cost is included in the premium for your medical plan.

☐ What are the copays for brand and specialty drugs? Will I have to pay a portion of the cost through coinsurance, or are my costs fixed?
With the TRS-Care Medicare Rx® plan, both specialty and brand-name drugs are covered with a low copay. Many Medicare Part D plans require members to pay a percentage of the cost of these drugs, which can get very expensive.

☐ Does the Medicare Part D plan include a coverage gap, or what they call a “donut hole?”
Most Medicare Part D plans include a coverage gap. That means when a member’s pharmacy claims reach a certain dollar level, the member must pay a larger percentage of the cost of specialty and brand-name drugs for a period of time. TRS-Care Medicare Rx® does NOT have a coverage gap. You pay the same low copays when you reach the coverage gap stage, so you never experience the “donut hole.”