Comparing TRS-Care to individual Medicare plans? Talk to your agent about these key issues.

The TRS-Care program was uniquely designed for retired Texas public school employees. 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. In fact, retirees and surviving spouses, age 65 and above, who have terminated their TRS-Care coverage, can only re-enter if they have 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.

⚠️ 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.

Please be aware that if you leave TRS-Care, you won’t be able to re-enter the program unless you have a special enrollment event. So it’s important that you consider your health care needs now, and in the future.

Have Questions? Contact TRS.
TRS has experienced staff that can also talk with you about your options, and they aren’t selling you a product that they profit from. Contact TRS by telephone at 1-888-237-6762 (Dial Relay Texas 711), Monday–Friday 8 a.m. to 5 p.m., Central Time. You can also register for one of the retiree information sessions TRS is holding across the state. See the Health Care Events section of the TRS website at www.trs.texas.gov.

Revised Oct. 2, 2017
Will premiums increase simply because I’m getting older?
A lower premium this year doesn’t guarantee lower premiums in the future. TRS-Care premiums do not increase due to age, but some individual plan premiums can increase each year along with your age. Ask how your premiums will increase if you enroll in a plan outside TRS-Care. And remember, if you leave TRS-Care, you most likely won’t be able to come back. So be sure to consider your best option, not just for this year, but for the coming years.

What about out-of-pocket costs? How does this plan compare to the TRS-Care Plan?
How much are doctor office visit copays? My inpatient hospital copay? My maximum out-of-pocket cost?
With the TRS-Care Medicare Advantage plan, you’ll have low doctor visit copays, low inpatient hospital admission copays, and low maximum out-of-pocket costs. Although the monthly premium may be higher than some plans, there will be no surprises when you need medical care. Paying a little more each month, but avoiding big, unexpected medical bills, is important to anyone living on a fixed income.

How big is my network? And what doctors and hospitals can I choose from?
Some Medicare plans with lower premiums offer a very small network of doctors and hospitals. They also keep premiums low by not covering medical services provided by doctors and hospitals that are not in the network, except in emergencies. TRS-Care Medicare Advantage offers a large network of doctors and hospitals. And if you need to go out of 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 and 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 through a copay?
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.”

I’m healthy now, but what if I get sick next year? What will my out-of-pocket costs for care and prescription drugs look like?
Many individual Medicare plans offer low premiums but they are a reflection of limited coverage. If you have trips to a hospital, they can charge per-day copays, which add up. Or if you need prescription drugs to treat a condition, you can pay significant costs. And because you may not be able to re-enter TRS-Care, it’s important to consider what coverage you might need in the future.