

2024 TRS-Care Plan Guide for Participants with Medicare

January 1 – December 31

Revised Aug. 5, 2024



Eligibility and Enrollment
Medical Coverage
Prescription Coverage

1-888-237-6762 (TRS Health Division)
1-866-347-9507 (UnitedHealthcare)
1-844-863-5324 (Express Scripts)



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This guide is an overview of TRS-Care eligibility and enrollment requirements and program benefits for Medicare-eligible participants. For a detailed description of your plan, read the UnitedHealthcare Evidence of Coverage and Express Scripts Evidence of Coverage.

What Steps Do I Need to Take When I Turn 65?

1. You should enroll in Medicare three months before the month you turn 65.
2. If you're eligible for premium-free Medicare Part A (hospitalization), sign up for it through the Social Security Administration. Apply for Medicare at [Social Security—Plan for Medicare](#)¹, by visiting your local Social Security office, or by calling Social Security at 1-800-772-1213 (TTY: 1-800-325-0778).
3. Buy Medicare Part B (outpatient care; doctor visits) through the Social Security Administration as soon as you can enroll. You must buy and maintain Medicare Part B to be eligible for TRS-Care benefits. The Social Security Administration can confirm your Part B premium; TRS will not deduct your Part B premium from your TRS pension.
4. Review the Medicare enrollment and TRS-Care information you may get in the mail or find on [Are You Turning 65 Soon?](#)² This will help you prepare for this milestone. Attend a [TRS-Care Medicare Advantage and You Webinar](#)³ to learn more about plan benefits and how to enroll.
5. We'll send you a packet with a form asking for your Medicare Beneficiary Identifier (MBI) number. This number is on your Medicare ID card. TRS needs your MBI to process your application and avoid a delay in processing your enrollment. Complete and return the form to TRS.*
6. If you're adding dependents, complete and submit Form 700U4 (Application to add Eligible Dependents) no later than 31 days from the end of the month you turn 65. You should get this form six to eight weeks before your birth month as part of your age-in packet.

If you're eligible for TRS-Care — Once TRS verifies your Medicare enrollment, TRS will enroll you in the TRS-Care Medicare Advantage plans. **If TRS does not get your Medicare Beneficiary Identifier (MBI) number, TRS will not be able to enroll you, and you risk losing all TRS-Care coverage.**

**If you're a retiree or surviving spouse not yet age 65 and you either cancelled TRS-Care or didn't enroll during your Initial Enrollment opportunity but were eligible, you can enroll in TRS-Care when you turn 65. You may add eligible dependents then too.*

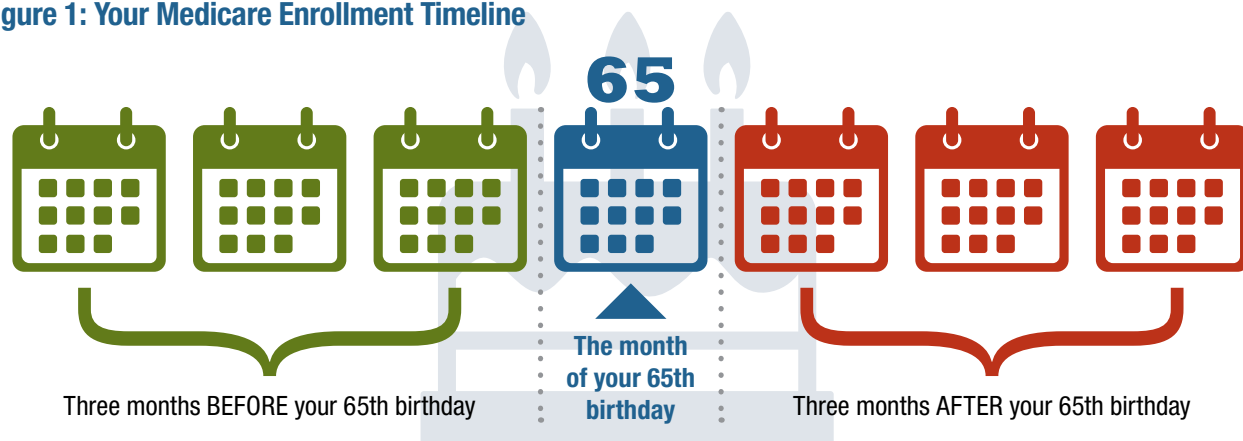
To enroll in TRS-Care at age 65, ask TRS for an application and submit it no later than 31 days from the end of the month you turn 65. TRS recommends that you submit it as soon as you can, ideally the month before you retire and no later. Call TRS Health at 1-888-237-6762 to ask for an application. To learn more, read [When am I Eligible for Medicare?](#) on [page 11](#).

¹<https://www.ssa.gov/medicare>

²https://www.trs.texas.gov/Pages/healthcare_turning_65.aspx

³https://www.trs.texas.gov/Pages/healthcare_benefits_events.aspx

Figure 1: Your Medicare Enrollment Timeline



Medicare allows seven months for enrollment, but TRS-Care requires enrollment in Medicare by the first day of your birth month. If your birthday is on the first, your Medicare should begin the first day of the prior month.

Waiting to enroll AFTER your 65th birthday will cost you more. Late enrollment results in a penalty from the Social Security Administration. Learn more at [Medicare—Avoid Late Enrollment Penalties](#).⁴

⁴<https://www.medicare.gov/basics/costs/medicare-costs/avoid-penalties>

TRS Health Division—Eligibility and Enrollment

- 1000 Red River Street, Austin, Texas 78701-2698
- 1-888-237-6762
- 7 a.m.–6 p.m., Monday–Friday
- [TRS-Care for Participants with Medicare](#)⁵

TRS-Care Medicare Advantage—Medical Coverage

- Medical coverage from UnitedHealthcare
- 1-866-347-9507 (TTY/TDD: 711)
- 7 a.m.–6 p.m. CT, Monday–Friday
- UnitedHealthcare’s Nurse Line: 1-877-365-7949 (TTY: 711)
- [TRS-Care Medicare Advantage from UnitedHealthcare](#)⁶

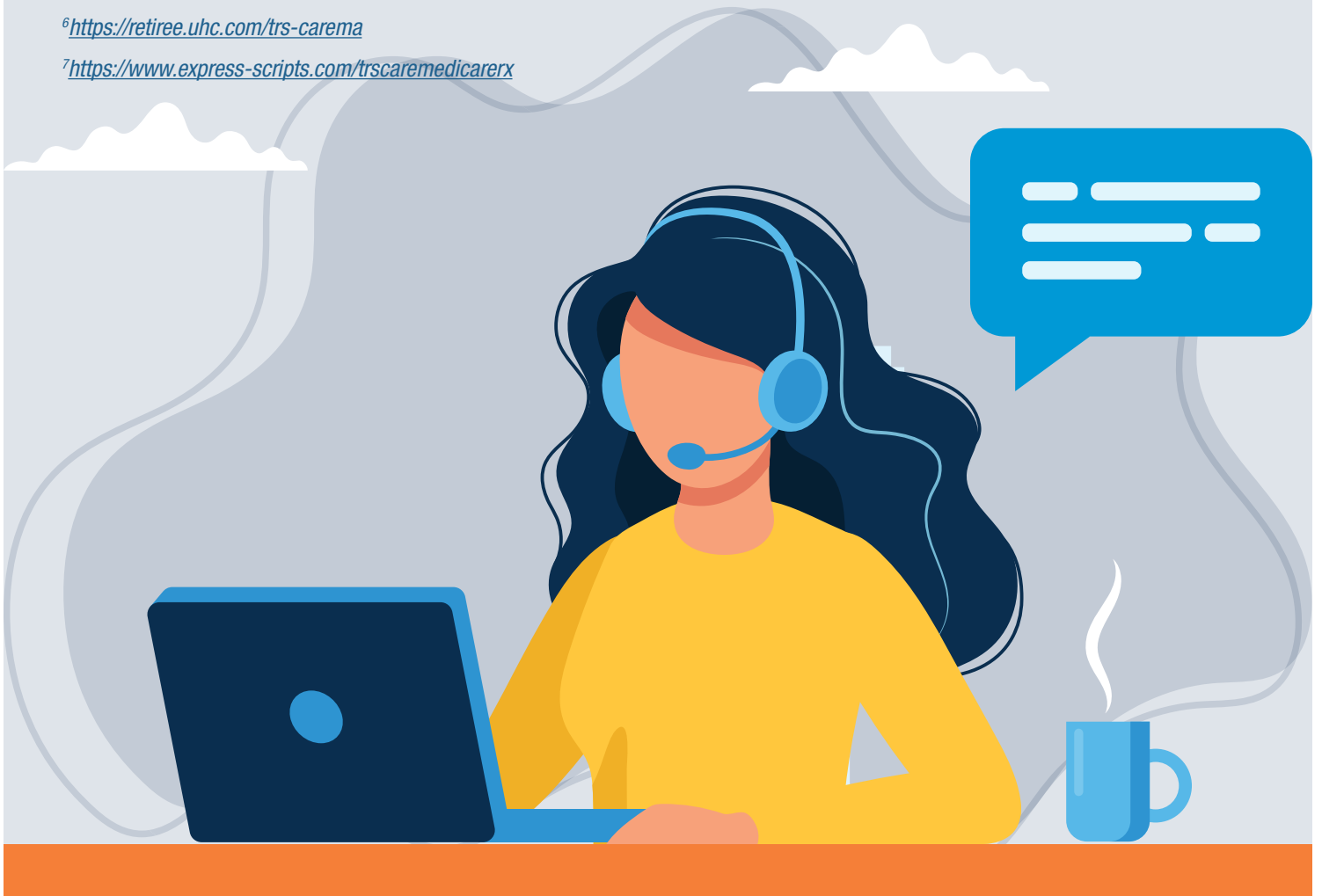
TRS-Care Medicare Rx—Prescription Coverage

- Prescription coverage from Express Scripts
- Express Scripts Member Services: 1-844-863-5324 (open 24 hours a day, seven days a week)
- [TRS-Care Medicare Rx from Express Scripts](#)⁷

⁵https://www.trs.texas.gov/Pages/healthcare_trs_care_medicare.aspx

⁶<https://retiree.uhc.com/trs-carema>

⁷<https://www.express-scripts.com/trscaremedicarerx>



About Your 2024 TRS-Care Plan Guide

The *2024 TRS-Care Plan Guide for Medicare-Eligible Participants* applies only to the 2024 plan year. In addition to applicable laws, rules and regulations, this guide is TRS-Care’s official statement on enrollment matters. It supersedes other statements or representations concerning TRS-Care enrollment, regardless of the source. TRS reserves the right to amend this guide at any time.

What’s New?

TRS-Care has a new pharmacy benefits manager (PBM)!

Express Scripts is the new PBM for TRS-Care Medicare Rx. The new contract will generate savings to help sustain health care benefits for retirees and their families. Express Scripts pharmacy benefits start Jan. 1, 2024. CVS Caremark will serve TRS-Care through Dec. 31, 2023.

New medical benefit enhancements from UnitedHealthcare!

- For 2024, your over-the-counter (OTC) benefit is changing to Healthy Benefits Plus from Solutran, and you’ll get a prepaid debit card that’s updated quarterly with \$40.00 to purchase eligible OTC items at participating retail locations, online, over the phone or by mail through your OTC catalog.
- Plan participants can now buy select OTC hearing aids with no prescription, directly from UCHearing.
- Download the UnitedHealthcare (UHC) app to enjoy updated enhancements on app navigation.

TRS-Care Dental and Vision Benefits coming in 2025!

We’re excited to announce that **dental and vision benefits for TRS retirees and their families are coming to TRS-Care in 2025!** The 88th Texas Legislature passed Senate Bill 1854, which allows TRS to **offer optional dental and vision care coverage** for TRS retirees. This includes their dependents, surviving spouses and surviving dependent children. In the coming year, we’ll communicate when TRS retirees may enroll.

Coverage starts Jan. 1, 2025. Look for updates in our health care newsletter, The Pulse. Visit <https://www.trs.texas.gov/Pages/subscribe.aspx> to subscribe.

This guide also highlights the TRS-Care medical and prescription drug plans TRS offers to retired public school employees—the TRS-Care Medicare Advantage medical plan and TRS-Care Medicare Rx prescription drug plan.

Find more detailed plan information in the UnitedHealthcare Evidence of Coverage and Express Scripts Evidence of Coverage booklets. TRS-Care for retirees is a separate program from TRS-ActiveCare, which is for active public school employees.

Enrollment Periods

Enrollment in TRS-Care is available only during specific windows of opportunity.

First, you have an initial enrollment opportunity to join TRS-Care when you retire. This is your “Initial Enrollment Period.”

If you decide not to enroll in TRS-Care at retirement, you may enroll when you turn 65 or if you have a special enrollment event:

- **At age 65.** At that time, you may enroll in the TRS-Care Medicare Advantage medical plan and TRS-Care Medicare Rx prescription drug plan as long as you buy and maintain Medicare Part B. To learn more, read Medicare & TRS-Care on [page 11](#).
- **Special Enrollment Events.** Generally, Special Enrollment Events arise from an involuntary loss of comprehensive health care coverage or adding a new dependent through marriage, birth, adoption or adoption placement. To learn more, read Special Enrollment Events on [page 12](#).

You may drop dependents, cancel coverage or do both at any time.



Who Can Enroll in TRS-Care?

Service Retirees

A service retiree must have at least 10 years of service credit in the TRS pension when they retire. Service credit may include up to five years of military service credit, but it may not include other purchased special or equivalent service credit. In addition to the “10 years of service credit” requirement, you must meet one of the following requirements when you retire:

- Your age plus years of service credit in the TRS pension must equal or exceed 80 (with at least 10 years of service credit), regardless of whether you had a reduction in your retirement annuity for early age (years of service credit can include purchased service); or
- You have 30 or more years of service credit in the TRS pension (including purchased service).

NOTE: You may not use combined service credit under the Proportionate Retirement Program to establish eligibility for TRS-Care or any type of benefits other than service retirement benefits.

Disability Retirees

People who become a disability retiree under the TRS pension are eligible to participate in TRS-Care. Once enrolled in TRS-Care as a disability retiree, participation continues as long as the person is a disability retiree under the TRS pension. If you're applying for health coverage because of a disability, TRS may contact you to validate your Medicare Social Security Disability status.

NOTE: Coverage for a disability retiree with fewer than 10 years of service credit in the TRS pension continues only up to the total number of years of service credit. Coverage for such a disability retiree ends when their disability retirement benefits under the TRS pension end.

A disability retiree is eligible to enroll in TRS-Care even if they're eligible for ERS, the UT System, or the Texas A&M System health benefit program coverage.

Who can't enroll in TRS-Care?

To be eligible for TRS-Care, a retiree cannot be eligible for the Employees Retirement System of Texas (ERS), the University of Texas (UT) System, or the Texas A&M System health benefit programs.

⁸<https://www.trs.texas.gov/TRS%20Documents/update-april-2023.pdf>

Additionally, a service and disability retiree must meet certain eligibility requirements.

Retirees eligible for any of these health care plans **MAY NOT** join TRS-Care:



Other Scenarios

What if I'm already enrolled in TRS-ActiveCare?

TRS-Care (for retirees) is separate from TRS-ActiveCare (for actively working public school employees). When you retire from a TRS-ActiveCare employer, you must submit an enrollment application only if you want to enroll yourself and your dependents in TRS-Care.

During your Initial Enrollment Period for TRS-Care, if you choose not to enroll in TRS-Care, you don't have to provide a reason for waiving coverage (for example, other group coverage). Contact your school official to verify your TRS-ActiveCare termination date. A TRS retiree can get coverage as a dependent of an active employee enrolled in TRS-ActiveCare.

If you're enrolled in TRS-ActiveCare as a return-to-work retiree, read below.

What happens to my TRS-Care Medicare Advantage coverage if I retire and then return to work?

TRS-Care retirees eligible for Medicare may enroll in TRS-ActiveCare if they return to work for a TRS-covered employer and work 10 or more hours per week. **Keep in mind, if you keep TRS-Care Medicare Advantage and enroll in TRS-ActiveCare, you must pay three separate premiums:**

1. TRS-ActiveCare premium paid through your TRS-covered employer;
2. TRS-Care Medicare Advantage paid to TRS; and
3. Medicare Part B paid to the Social Security Administration.

TRS recommends that you (the retiree) contact Medicare to let them know when you return to work.

Visit [TRS Update: TRS-ActiveCare Enrollment for TRS-Retirees Returning to Work](#)⁸ to learn more.

What if I'm age 65 or older when I retire?

If you're age 65 or older when you retire and don't enroll in TRS-Care in your Initial Enrollment Period, you and your eligible dependents can enter TRS-Care Medicare Advantage only if you or your eligible dependents have a special enrollment event.

What if my spouse and I are TRS pension retirees?

If both spouses are TRS pension retirees and each meets TRS-Care eligibility requirements individually, each can enroll separately in TRS-Care as individuals. In most cases, the premium will be lower. Call TRS Health at 1-888-237-6762 for more information.

Are my dependents eligible for TRS-Care?

The following dependents are eligible to enroll in TRS-Care:

- Your spouse (including a common-law spouse—a common law marriage is not a special enrollment event unless a Declaration of Common Law Marriage is on file with an authorized government agency).
- A child under age 26 who is:
 - a natural child;
 - an adopted child, or one placed lawfully for adoption;
 - a foster child;
 - a stepchild;
 - a grandchild who lives with the retiree or surviving spouse and depends on the retiree or surviving spouse for at least 50% of the child's support; or
 - any other child in a regular parent-child relationship with the retiree or surviving spouse, as TRS determines.
- A child (regardless of age) who, as TRS determines:
 - lives with or gets care from the retiree or surviving spouse on a regular basis;
 - has a mental disability or physical incapacity to such an extent to be dependent on the retiree or surviving spouse for care and support; or
 - both.

Some types of dependents require more documentation to establish they meet eligibility criteria.

How to Enroll in TRS-Care Medicare Advantage

You have a few chances to enroll in TRS-Care:

1. Retirement



Each opportunity requires that you return a form to TRS. You must also buy and maintain Medicare Part B coverage.

If you're eligible for premium-free Medicare Part A, sign up for it. If you're not eligible for premium-free Medicare Part A, make sure you buy Medicare Part B. **If you don't buy and maintain Medicare Part B coverage, you risk losing all TRS-Care coverage.** To learn more, read Special Enrollment Events on [page 12](#).

2. Turning 65



Retiring

If you're retiring and about to be (or are already) eligible for Medicare, TRS sends you an enrollment packet that has this guide and a TRS-Care Enrollment application (TRS 700M). We'll send this form once we get and process your retirement application (TRS 30) and determine you're eligible for TRS-Care. If you want to enroll in TRS-Care, complete and return the TRS 700M to TRS. You will need your Medicare Beneficiary Identifier (MBI) number to complete this form. This number is on your Medicare ID card. This is your Initial Enrollment Period.

3. A Special Enrollment Event



At this time, you can add your eligible dependents to your TRS-Care coverage. TRS will enroll them in the appropriate plan based on their Medicare status.

For example, if your spouse isn't yet eligible for Medicare, TRS will enroll them in TRS-Care Standard, while you would get coverage from TRS-Care Medicare Advantage.

If you're applying for disability retirement, TRS will send you a TRS-Care enrollment packet if the TRS Medical Board approves your disability retirement.

During your Initial Enrollment Period for TRS-Care, if you choose not to enroll, you don't need to do anything. You need to give TRS an enrollment application only if you want to enroll in TRS-Care.

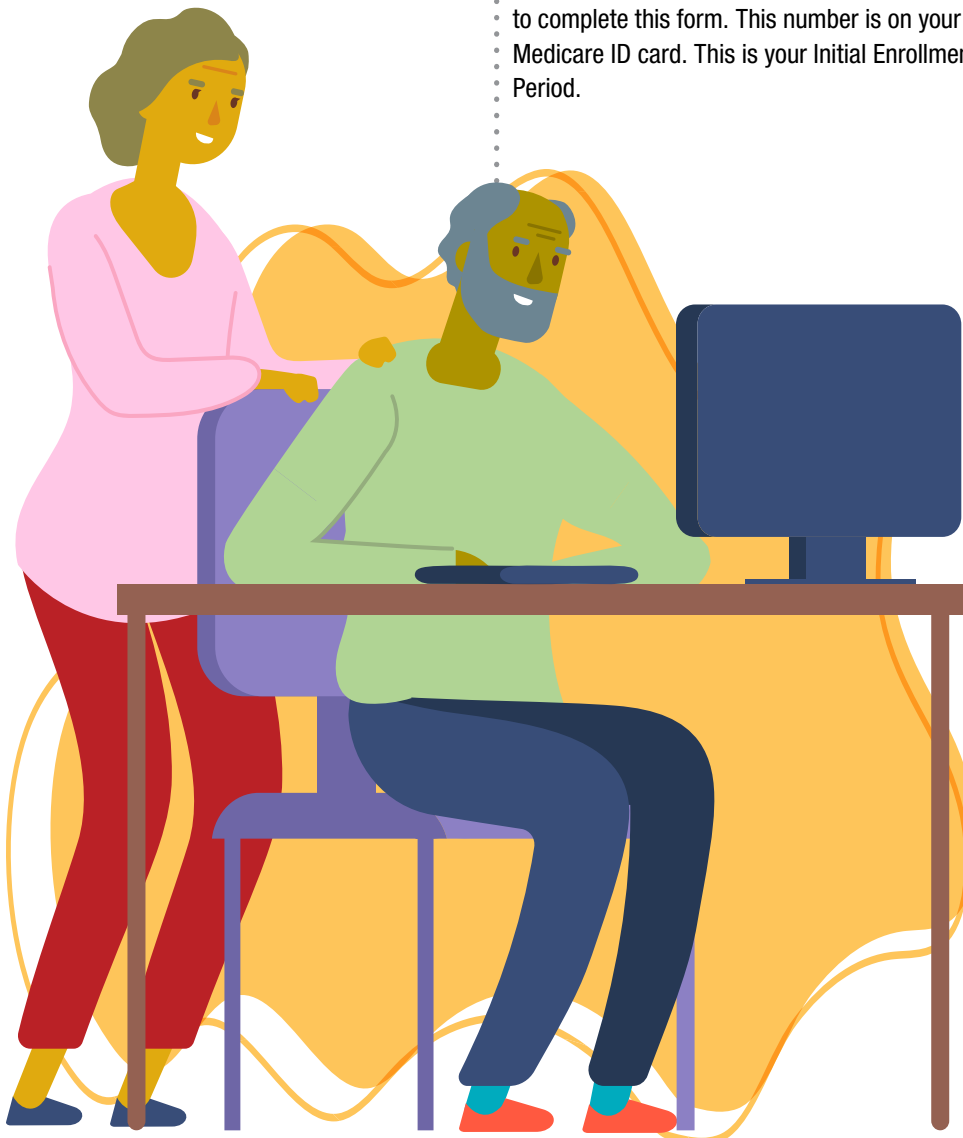
Turning 65

If you never enrolled in TRS-Care but were eligible for the program when you retired, you have another chance to enroll yourself and your eligible dependents at age 65. TRS will reach out to retirees before their 65th birthday inviting them to contact us for an enrollment packet (TRS 700EO). TRS-Care retirees, including people currently enrolled in TRS-Care, may add their eligible dependents to their TRS-Care coverage when the retiree reaches age 65.

NOTE: This enrollment opportunity is not available to dependent spouses or children when they turn 65.

Special Enrollment Event

If you're eligible for Medicare, not enrolled in TRS-Care and have a Special Enrollment Event, you may enroll yourself and your eligible dependents in TRS-Care. Contact TRS Health at 1-888-237-6762 to get an enrollment packet. To learn more, read Special Enrollment Events on [page 12](#).



When You May Enroll

Initial Enrollment Period for Retirement

If you're a service retiree eligible for Medicare, your Initial Enrollment Period is the later period that begins on:

- 1. your effective retirement date**—your Initial Enrollment Period expires at the end of the last day of the month that is three consecutive calendar months, but in no event less than 90 days after your effective retirement date; or
- 2. the last day of the month TRS gets your election to retire**—your Initial Enrollment period expires at the end of the last day of the month that is three consecutive calendar months, but in no event less than 90 days, following the last day of the month TRS gets your election to retire.

Your application for TRS-Care enrollment (TRS 700M) is due no later than the last day of your Initial Enrollment Period. To learn more, read **Table 1. Initial Enrollment Period—Three Consecutive Months but No Less Than 90 Days** on [this page](#).

Initial Enrollment Period for Disability Retirement

If you're a disability retiree, your Initial Enrollment Period starts on the date the TRS Medical Board approves your disability retirement. It expires at the end of the last day of the month that is three consecutive calendar months, but in no event less than 90 days, after the date that the TRS Medical Board approves your disability retirement.

Initial Enrollment Period—Death of a Retiree or Active Member

The Initial Enrollment Period in TRS-Care for an eligible surviving spouse of a **deceased retiree** and for an eligible surviving dependent child of a deceased retiree expires on the last day of the month that is three consecutive calendar months, but in no event less than 90 days, after the retiree died.

The initial enrollment period in TRS-Care for an eligible surviving spouse of a **deceased active member** and for an eligible surviving dependent child of a deceased active member expires on the last day of the month that is

three consecutive calendar months, but in no event less than 90 days, after the active member died.

Effective Date of Coverage for Retirement

If you're retiring, your coverage takes effect:

- The first day of the month following your effective retirement date if TRS gets your TRS-Care Enrollment application (TRS 700M) on or before your effective retirement date; or
- If your retirement date passed but you're still in your Initial Enrollment Period, the first day of the month following the date TRS gets your Form TRS 700M. **If you want your coverage to start the first of the month after your retirement date, TRS must get your application and Medicare Beneficiary Identifier (MBI) number before your retirement date. Your MBI is the number that is on your Medicare ID card.**

The same rules apply for disability retirees.

During your Initial Enrollment Period, you may make changes to your coverage elections. The effective date of coverage for new elections is the first day of the month after TRS gets the new application to ask for changes to your coverage.

Deferring Coverage

During your Initial Enrollment Period, you may postpone the effective date of your TRS-Care coverage to the first of any of the three months immediately following the month after your retirement date. For example, if your retirement date is May 31, you may defer your TRS-Care coverage effective date (normally June 1) to July 1, Aug. 1, or Sept. 1.

For a deferred effective date, you must write the effective coverage date in the space provided on the Initial Enrollment application (TRS 700M). If you have questions about deferring your effective coverage date, call TRS Health at 1-888-237-6762.

Table 1. Initial Enrollment Period—Three Consecutive Months but No Less Than 90 Days

TRS RETIREMENT DATE	TRS 700M DUE DATE
Sept. 30	Dec. 31
Oct. 31	Jan. 31
Nov. 30	Feb. 28 (or 29)
Dec. 31	March 31
Jan. 31	May 1
Feb. 28 (or 29)	May 31
March 31	June 30
April 30	July 31
May 31	Aug. 31
June 30	Sept. 30
July 31	Oct. 31
Aug. 31	Nov. 30

Other Enrollment Rules

Adjustment Rule

If, for any reason, a person enrolls in the wrong level of coverage, TRS will adjust their coverage as described in this Guide. A person has no vested rights to benefits based on the plan before the new start date. The plan pays benefit claims on or after the new start date according to the new plan. Your coverage may not be retroactive, even if you have an increase in benefits.

Letter of Coverage

TRS may ask you to provide a coverage letter with the exact dates your prior insurer gave you comprehensive health coverage and the reason you lost coverage. TRS may also ask you to provide other coverage letters for eligible dependents you want to enroll in TRS-Care.

When can TRS-Care terminate (cancel) my coverage?

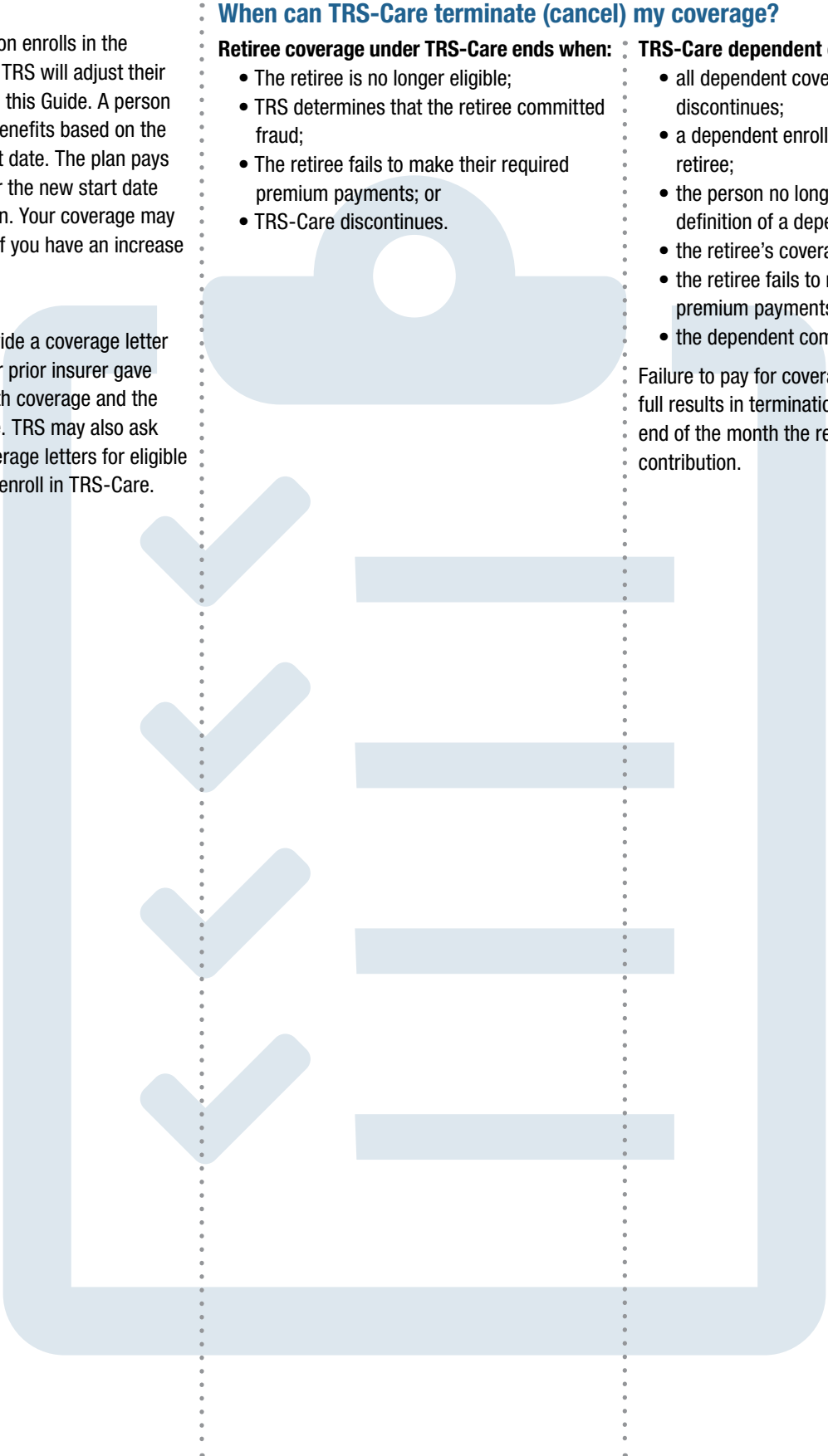
Retiree coverage under TRS-Care ends when:

- The retiree is no longer eligible;
- TRS determines that the retiree committed fraud;
- The retiree fails to make their required premium payments; or
- TRS-Care discontinues.

TRS-Care dependent coverage ends when:

- all dependent coverage under TRS-Care discontinues;
- a dependent enrolls in TRS-Care as a retiree;
- the person no longer meets the TRS-Care definition of a dependent;
- the retiree's coverage ends;
- the retiree fails to make their required premium payments; or
- the dependent committed fraud.

Failure to pay for coverage on time and in full results in termination of coverage at the end of the month the retiree made their last contribution.



Turning 65 — Another Enrollment Opportunity

If you're a retiree or surviving spouse under age 65, and you either cancelled TRS-Care or didn't enroll during your Initial Enrollment opportunity, you can enroll in TRS-Care when you turn 65. You may also add eligible dependents at this time.

Before your 65th birthday, TRS will send you (the retiree) a postcard with instructions on how to enroll. To enroll in TRS-Care at 65, you must ask for an application for TRS-Care and submit your application for coverage no later than 31 days from the end of the month you turn 65. Call TRS Health at 1-888-237-6762 to ask for an application before your 65th birthday.

TRS does not always have information about surviving spouses in its records. Surviving spouses must ask for and submit their application for coverage no later than 31 days from the end of the month they turn 65.

TRS-Care retirees, including people currently enrolled in TRS-Care, may add their eligible dependents to their TRS-Care coverage when the retiree turns 65.

If you're eligible for Medicare, you must buy and maintain Medicare coverage, including Medicare Part B coverage, to participate in TRS-Care Medicare Advantage. **You risk losing all TRS-Care coverage if you**

don't buy and maintain Medicare Part B coverage when you're eligible to buy it. To learn more, read Medicare & TRS-Care on [page 11](#).

This enrollment opportunity is not available to dependent spouses or children when they turn 65



Keep in Mind

Even if you're eligible to enroll in TRS-Care, you must also take the added step of signing up for Medicare early enough so that it starts the first day of your 65th birthday month. To learn more, read Medicare & TRS-Care on [page 11](#).

Medicare & TRS-Care

What Should I Know?

When you enroll in TRS-Care Medicare Advantage, you need to state on your enrollment form when you want your coverage to start. If TRS or UnitedHealthcare can't verify that you have Medicare Part B, you will have 21 days or until the end of the month, whichever is greater, to give your Medicare Beneficiary Identifier (MBI) number to UnitedHealthcare. If you don't give your MBI number in that time frame, TRS will not enroll you in TRS-Care Medicare Advantage or TRS-Care Medicare Rx.

If you're past Medicare age (age 65 or older), still working and will retire soon, you must sign up for Medicare to enroll in TRS-Care when you retire. Enroll in premium-free part A if you've earned it. You don't have to buy Part A if you aren't already getting it for free, but you do need to buy and maintain Medicare Part B. **If you don't buy and maintain Medicare Part B, you risk losing all TRS-Care coverage.**

When am I Eligible for Medicare?

In most cases, you're eligible for Medicare at age 65. You may also be eligible at any age if you got Social Security Disability benefits for a certain length of time.

Medicare Eligibility at Age 65

TRS strongly urges you to enroll in Medicare as soon as you're eligible. You can enroll three months before the month you turn 65. The earlier you sign up, the sooner TRS can

verify your Medicare status and enroll you in TRS-Care Medicare Advantage and TRS-Care Medicare Rx on the first day of your birthday month.

If your birthday is the first of the month, your Medicare coverage starts the first of the previous month. If you don't sign up early enough to make your start date the first day of your birthday month, you risk having a gap in TRS-Care coverage.

The TRS-Care enrollment period is shorter than the Medicare enrollment period.

The enrollment period for Medicare extends for three months after you turn 65, but you must submit an application to enroll in TRS-Care no later than 31 days from the end of the month you turn 65. If you enroll after you turn 65, you may have a break in coverage, or you may not be able to enroll in TRS-Care.

Medicare Eligibility due to End Stage Renal Disease (ESRD)

If you're eligible for Medicare due to ESRD, TRS-Care pays first and Medicare pays second. Federal rules require TRS-Care to pay first for a certain period, known as the Medicare Coordination Period. While you're in this period,

you're not eligible for TRS-Care Medicare Advantage. TRS will enroll you in an alternate medical plan.

You're eligible for prescription drug coverage through TRS-Care Medicare Rx while you're in the Medicare Coordination Period.

Once Medicare is your primary coverage, TRS will enroll you in TRS-Care Medicare Advantage. If you're eligible for Medicare due to ESRD, let TRS know by phone or in writing.

Losing Medicare Part B

If you lose Medicare Part B for any reason, including not paying the premium, but you take steps to reinstate Medicare Part B within 90 days of losing it, TRS will work with you to help you keep your TRS-Care coverage.

If you have Medicare Part A only, then Medicare pays your covered hospitalization costs.

What Happens if I Try to Enroll in TRS-Care for the First Time and I Don't Get Medicare?

If you don't get Medicare Part B, TRS can't enroll you, and you risk losing TRS-Care coverage. You must have your Medicare Beneficiary Identifier (MBI) number to enroll in TRS-Care. This number is on your Medicare ID card.

Remember

You must buy and maintain Medicare Part B to be eligible for TRS-Care benefits after you become eligible for Medicare. This is required even if you're not eligible for premium-free Medicare Part A.

Special Enrollment Events

Special Enrollment Events are opportunities to enroll in TRS-Care outside of your Initial Enrollment Period. You may become eligible for TRS-Care under the special enrollment provisions of the Health Insurance Portability and Accountability Act (HIPAA).

TRS has two general categories of Special Enrollment Events:

- When a person has an involuntary loss of comprehensive health care coverage
- When a person gets a new dependent

Loss of Eligibility for Other Coverage If a retiree or surviving spouse loses coverage

If you, as a retiree or surviving spouse, are not enrolled in TRS-Care, and through no fault of your own, you lose comprehensive health coverage with another health plan, you may be able to enroll in TRS-Care under a Special Enrollment Event. However, you must otherwise be eligible for TRS-Care and you must be able to show that you involuntarily lost comprehensive health coverage. Loss of disability, a specified disease, vision, dental, or other coverage that is not comprehensive health coverage are not Special Enrollment Events.

If you're not enrolled in TRS-Care when you lose comprehensive health coverage through no fault of your own, you may enroll yourself and your eligible dependents in TRS-Care within 31 days after you lose coverage under the other comprehensive health plan.

But, if you're already enrolled in TRS-Care when you lose other comprehensive health coverage, you won't be able to enroll any of your otherwise eligible dependents.

Should you lose coverage with another plan, keep your notice of termination letter to show TRS that your loss of coverage was involuntary.

If a spouse or other eligible dependent loses coverage

When a spouse or other eligible dependent is not enrolled in TRS-Care, and through no fault of their own, they lose comprehensive health coverage with another health plan, you may enroll your eligible dependents in TRS-Care within 31 days

after the dependent's involuntary loss of the other comprehensive health plan coverage. If you enroll an eligible dependent, you must also enroll in TRS-Care (if you're not already enrolled).

Examples of an Involuntary Loss of Comprehensive Health Coverage

- divorce or legal separation which results in you losing coverage under your spouse's comprehensive health plan;
- a dependent is no longer a "covered" dependent under a parent's comprehensive health plan;
- your spouse's death leaves you without comprehensive health coverage under their plan;
- your employment ends along with coverage under your employer's comprehensive health plan, or your spouse's employment ends along with your coverage under your spouse's employer's comprehensive health plan;
- your employer reduces your work hours to the point which their comprehensive health plan no longer covers you;
- your plan decides it will no longer offer comprehensive health coverage to certain people (for example, people who work part time);
- a person loses coverage under a State Children's Health Insurance Program (CHIP) or Medicaid, or becomes eligible to get help with premiums under those programs for group health plan coverage;
- a person involuntarily loses coverage under a Medicare supplement plan (for example, Medigap) or an individual Medicare Advantage plan; and
- you no longer live or work in an HMO's service area and lost comprehensive health coverage.

New Dependents

A retiree or surviving spouse (enrolled or otherwise eligible for TRS-Care) who gets an eligible dependent through marriage, birth, adoption, placement for adoption, or guardianship, must notify TRS in writing within 31 days of the date they got the eligible dependent, for the enrollment to be valid.

For example, if an otherwise eligible retiree isn't enrolled in TRS-Care when they get married, the retiree may enroll themselves and their eligible dependents during a special enrollment event.

But a surviving spouse may not enroll a new spouse if the surviving spouse remarries.

Enrollment is effective:

- in the case of the dependent's birth, on the date of the birth;
- in the case of the dependent's adoption, on the date of the adoption or placement for adoption; and
- in the case of guardianship, on the first day of the month after TRS-Care gets the written request.

TRS requires documentation to establish eligibility for all new dependents.

A common law marriage isn't a special enrollment event unless a Declaration of Common Law Marriage is on file with an authorized government agency.

Not Special Enrollment Events

Among other possible events, these are not Special Enrollment Events:

- Voluntarily dropping other coverage due to a premium increase
- Termination of coverage for failure to pay your premium
- Termination of coverage for cause such as making a fraudulent claim or intentionally misrepresenting material fact in connection with the plan

TRS-Care Medicare Advantage (Medical Coverage)

Medicare-eligible TRS-Care participants are eligible to enroll in the TRS-Care Medicare Advantage medical plan. Your TRS benefits offer maximum flexibility when it comes to the doctors you visit, as well as a simpler health care experience.

You can also take advantage of special offers like free gym memberships through SilverSneakers and wellness programs that reward you for the positive steps you take toward better health.

TRS-Care Medicare Advantage is the only medical option for TRS-Care participants eligible for Medicare. The plan covers everything that original Medicare covers, along with extras. TRS-Care Medicare Advantage gives you richer benefits at a lower cost than many marketplace plans with comparable benefits.

To be eligible, you must:

- be entitled to Medicare Part A (whether it's premium-free or not),
- be enrolled in Medicare Part B, and
- live in the service area of the United States or Puerto Rico.

If you're eligible for premium-free Medicare Part A, sign up for it. If you're not eligible to get Part A for free, make sure you buy and maintain Medicare Part B. You're not required to buy Medicare Part A if you're not eligible to get it for free. **If you don't buy and maintain Medicare Part B, you won't have any TRS-Care coverage.**

Reminder:

If you're currently enrolled in TRS-Care Standard, once you turn 65 and enroll in TRS-Care Medicare Advantage, you'll have a \$0 deductible through Dec. 31, 2024. For example, if your birthday is in April 2024, you'll have a \$0 deductible through the end of 2024 (Apr–Dec 2024). Your \$400 deductible starts Jan. 1, 2025.

Choose Any Doctor

TRS-Care Medicare Advantage lets you choose any doctor who accepts Medicare and will bill UnitedHealthcare.

What to do if your doctor says they won't accept UnitedHealthcare:

- Tell the provider you're a TRS-Care Medicare Advantage participant.
- Confirm with the provider that they take Medicare.
- Tell the provider that your plan provides out-of-network coverage.
- Give the flyer in your UnitedHealthcare Plan Guide to your doctor. It explains that your doctor doesn't have to be in the network for UnitedHealthcare to reimburse them.
- Call UnitedHealthcare Customer Care at 1-866-347-9507, 7 a.m.–6 p.m. CT, Monday–Friday (TTY/TDD 711). They'll work with your provider to accept your plan.

Table 2. TRS-Care Medicare Advantage Premiums⁹

TIER	PREMIUM
Retiree Only	\$135
Retiree + Spouse	\$529
Retiree + Child(ren)	\$468 ¹⁰
Retiree + Family	\$1,020

2024 TRS-Care Medicare Advantage Coverage and Benefits¹¹

- Annual medical deductible: \$400¹²
- Coinsurance: You pay 5% or only a copay after you meet your deductible
- Annual maximum out-of-pocket: \$3,500
- Services with a copay:
 - Your deductible DOES NOT apply to these services:
 - \$5 copay for primary care sick visit
 - \$35 copay for urgent care visit
 - \$65 copay for emergency room visit
 - Your deductible DOES apply to these services:
 - \$10 copay for specialist visit
 - \$500 copay for inpatient hospital stay (total)
 - \$250 copay for outpatient procedure or service
- \$0 copay for preventive care benefits and annual wellness visits.
- \$0 copay for virtual medical visits through AmWell, Doctor on Demand and Teladoc
- \$5 copay for other providers who offer virtual medical visits
- \$10 copay for virtual behavioral health visits

Preventive care benefits and annual wellness visits are 100% covered with \$0 copay.

⁹The TRS retiree's Medicare eligibility status determines premiums, regardless of their dependents' Medicare eligibility status.

¹⁰TRS reduces premiums for retirees with disabled children (regardless of the disabled child's age) by \$200 in tiers with covered children.

¹¹<https://retiree.uhc.com/trs-carema/coverage-and-benefits>

¹²Are you a current TRS-Care participant who turns 65 in 2024? You have a \$0 deductible in TRS-Care Medicare Advantage from your birthday month to the end of the plan year on Dec. 31, 2024.

TRS-Care Medicare Rx (Prescription Drug Coverage)

Express Scripts administers the TRS-Care Medicare Rx prescription drug plan. The federal Centers for Medicare & Medicaid Services (CMS) approved this plan. It offers more coverage than an individual Medicare Part D prescription drug plan.

TRS created this plan specifically for TRS-Care. It's the only option for Medicare-eligible TRS-Care participants. Participants don't have to pay a higher TRS-Care premium to enjoy the benefits of this plan. Because the plan is specifically for TRS retirees, it bridges the coverage gap or "donut hole" found in many Medicare prescription drug plans, resulting in lower prescription drug costs.

You don't have to meet the \$400 medical deductible that applies toward the TRS-Care Medicare Advantage plan before you can pay copays for prescription drugs shown in **Table 3. TRS-Care Medicare Rx** on this page. You pay the copays regardless of the Medicare Part D prescription drug stage you meet. You won't have the coverage gap or "donut hole."

Medicare Part D for Prescription Drugs

An individual Medicare Part D plan is a prescription drug plan that you buy from a Medicare-approved insurer. While you can opt out of TRS-Care Medicare Rx, CMS prohibits people enrolled in a Medicare Advantage plan through their group retiree benefits from joining an individual Medicare prescription drug plan.

The reverse is true as well—a person with a group Medicare prescription drug plan cannot have an individual Medicare Advantage plan.

If you opt out of TRS-Care Medicare Rx and get medical coverage through TRS-Care Medicare Advantage, TRS will not lower your premium.

Table 3. TRS-CARE MEDICARE RX®

DRUG TIER	31-day supply at Retail Pharmacies	Up to a 90-day Supply at Network Retail Pharmacies and Through Home Delivery
Tier 1: Generic Drugs	\$5	\$15
Tier 2: Preferred Brand Drugs	\$25	\$70
Tier 3: Non-preferred Drugs	\$50	\$125*

Maintenance drugs are prescriptions taken regularly to manage a chronic or long-term condition, such as high blood pressure and diabetes. Save money by buying these drugs in bulk through home delivery or network retail pharmacies.

**You can buy only up to a 31-day supply of a specialty medication.*

What is creditable prescription drug coverage?

According to Medicare, creditable coverage means your health care coverage provides equal or better coverage than an individual prescription drug plan from a Medicare-approved insurer. Having creditable prescription drug coverage lets you enroll in an individual Medicare Part D plan during future Medicare annual enrollment periods without the penalty of higher premiums.

For example, if you go 63 days or longer with no prescription drug coverage and choose to enroll in an individual Medicare Part D plan from

a Medicare-approved insurer during Medicare's annual enrollment period (Oct. 15–Dec. 7), each year your Medicare Part D premium is 1% higher per month for each month you didn't have Medicare Part D. Medicare's annual enrollment period is not a qualifying event to add dependents, increase your level of coverage, or both.

For people with limited income or resources, the Social Security Administration (SSA) provides extra help to pay for Medicare Part D. Contact SSA at 1-800-772-1213 (TTY: 1-800-325-0778) or at [Social Security Administration](https://www.ssa.gov/).¹³



¹³<https://www.ssa.gov/>

Glossary of Terms

Age 65 Enrollment Opportunity

The opportunity for retirees eligible for TRS-Care to enroll for the first time and add eligible dependents. TRS retirees eligible for and covered by TRS-Care when they turn 65 may also add eligible dependents at this time.

Any Other Child Who is in a Regular Parent-Child Relationship

A child who is not your grandchild; the child is unmarried; the child's primary residence is your household; you provide at least 50% of the child's support; the child's natural parents don't live in your house; you have the legal right to make decisions on the child's medical care; and you have full legal guardianship of the child (TRS requires documentation).

Appeal

A request to review a decision that denies a benefit or payment. You have the right to appeal the decision. Read more at How to File Medical Claims Appeals.¹⁴

Deductible

The amount of covered medical expenses that you pay each plan year (Jan. 1–Dec. 31) before the plan pays for eligible, non-preventive covered medical expenses.

TRS-Care Medicare Advantage (medical coverage) has a \$400 deductible. Office visit copays, precertification penalties, charges for services not covered and any payment for charges more than allowable reimbursement amounts don't apply to the deductible. The plan still covers preventive services at 100% even if you don't meet your deductible.

TRS-Care Medicare Rx (prescription drug coverage) has no deductible.

Coinsurance

Coinsurance is the percentage of allowed amounts for covered medical expenses you must pay after you meet your TRS-Care deductible. Coinsurance is in addition to your deductible, office visit copayment (copay), charges for services not covered, precertification penalties and out-of-network charges—these are your responsibility. Out-of-network charges don't apply to coinsurance.

Deferring Coverage

To delay the start of TRS-Care coverage, complete and submit the enrollment application during your Initial Enrollment Period. Indicate your effective (start) date in the application.

Initial Enrollment Period

The first time a retiree can enroll in TRS-Care—when they retire. **Read Table 1. Initial Enrollment Period—Three Consecutive Months but No Less Than 90 Days** on [page 8](#) for your time frame.

Maximum Out-of-Pocket (MOOP)

The most you must pay for covered medical expenses out of your own pocket in a plan year. When you reach your maximum out-of-pocket, the plan pays 100% of eligible expenses for the rest of the plan year (Jan. 1 – Dec. 31). The MOOP includes the deductible, any medical copays (if applicable), and medical coinsurance.

Medicare Beneficiary Identifier (MBI)

This number is on your Medicare ID card and is required for TRS to accept and process your TRS-Care Medicare application form.

Premiums

The monthly contribution a retiree or surviving spouse makes for TRS-Care coverage for themselves and their eligible dependents. TRS-Care Medicare participants must pay a Medicare Part B premium in addition to their TRS-Care Medicare premium.

Special Enrollment Event

An opportunity to enroll in TRS-Care at a time other than the Initial Enrollment Period. Special enrollment events have specific criteria.

TRS-Care Enrollment Form

May refer to the Initial Enrollment application or Special Enrollment application.

¹⁴ <https://www.trs.texas.gov/Pages/healthcare-file-medical-claims.aspx>

Legal Notices

Disclaimer

TRS-Care may change the coverage levels described in this guide, or TRS-Care may discontinue. TRS-Care participant cost may change with approval from the TRS Board of Trustees. If this guide is not consistent with TRS laws and rules, TRS laws and rules supersede this guide. The TRS-Care Benefits Booklet also supersedes this guide. TRS-Care reserves the right to amend the TRS-Care Benefits Booklet any time. Generally, TRS will post such amendments in the online version of the TRS-Care Benefits Booklet.

Corrections and Addendums

TRS will post corrections and addendums to this guide at [TRS-Care for Participants with Medicare](#).¹⁵ Refer to this website for the most recent version of the guide or call TRS Health at 1-888-237-6762 for a printed copy.

Discrimination is Against the Law

TRS complies with applicable federal civil rights laws and does not discriminate based on race, color, national origin, age, disability or sex. TRS does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The Teacher Retirement System of Texas:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters; and
- Written information in other formats (large print, audio, accessible electronic formats, other formats).

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters; and
- Information written in other languages.

If you need these services, call 1-888-237-6762 (TTY: 711).

If you believe TRS failed to provide these services or discriminated in another way based on race, color, national origin, age, disability, or sex, **you can file a grievance** in person, by mail, by fax, or email:

- **In person or by mail:** Section 1557 Coordinator, 1000 Red River St., Austin, Texas, 78701
- **Fax:** 512-542-6575
- **Email:** section1557coordinator@trs.texas.gov

You can file a civil rights complaint with the U.S. Department of Health and Human Services online, by mail, or by phone at:

- [U.S. Department of Health and Human Services Office for Civil Rights Complaint Portal Assistant](#)¹⁶
- Complaint forms are at [U.S. Department of Health and Human Services Office for Civil Rights – Filing with OCR](#).¹⁷
- **Mail:** U.S. Dept. of Health and Human Services, 200 Independence Ave. SW, Room 509F, HHH Building, Washington, D.C. 20201
- **Phone:** 1-800-368-1019, 1-800-537-7697 (TDD)

¹⁵https://www.trs.texas.gov/Pages/healthcare_trs_care_medicare.aspx

¹⁶<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

¹⁷<https://www.hhs.gov/ocr/office/file/index.html>

Notice of Privacy Practices

TRs changed its Notice of Privacy Practices (NPP) on Sept. 1, 2020. Read the full version at [Teacher Retirement System of Texas Notice of Privacy Practices](#).¹⁸

The NPP explains how TRS may use and disclose your protected health information, as well as your rights and the obligations of TRS with respect to that information. TRS revised the NPP to add companies that may assist TRS with the operations of TRS-Care and TRS-ActiveCare.

How TRS May Use and Disclose Your Protected Health Information

Certain Uses and Disclosures Do Not Require Your Written Permission.

For any use or disclosure of your protected health information that is described immediately below, TRS and/or Medical Board members, auditors, actuarial consultants, lawyers, health plan administrators or pharmacy benefit managers acting on behalf of TRS, TRS-Care or TRS-ActiveCare may use and disclose your protected health information without your written permission (an authorization).

- A.** For all activities that are included within the definitions of “payment,” “treatment” and “health care operations” as set out in 45 C.F.R. Section 164.501, including the items noted below. This notice does not contain all the activities found within these definitions; refer to 45 C.F.R. Section 164.501 for a complete list. When “TRS” is used below in describing these reasons, the auditors, actuarial consultants, lawyers, health plan administrators and pharmacy benefit managers acting on behalf of TRS, TRS-Care or TRS-ActiveCare are intended to be included.
- a. For treatment.** TRS is not a medical provider and does not directly participate in decisions about what kind of health treatment you should get. TRS also does not maintain your current medical records. However, TRS may disclose your protected health information for treatment purposes. For example, TRS may disclose your protected health information if your doctor asks that TRS disclose the information to another doctor to help in your treatment.
- b. For payment.** Here are two examples of how TRS might use or disclose your protected health information for payment. TRS may use or disclose your information to prepare a bill for medical services to you or another person or company responsible for paying the bill. The bill may include information that identifies you, the health services you got, and why you got those services. The second example is that TRS could use or disclose your protected health information to collect your premium payments.
- c. For health care operations.** TRS may use or disclose your protected health information to support health plan administration functions. TRS may provide your protected health information to its accountants, attorneys, consultants, and others to make sure TRS is complying with the laws that affect it. For example, your protected health information may be given to people looking at the quality of the health care you got. Another example of health care operations is TRS using and sharing this information to manage its business and perform its administrative activities.
- B. When federal, state or local law, judicial or administrative proceedings, or law enforcement requires a use or disclosure.** For example, upon receipt of your request for disability retirement benefits, TRS and members of the Medical Board may use your protected health information to determine if you’re entitled to a disability retirement. TRS may disclose your protected health information:
- a.** To a federal or state criminal law enforcement agency that asks for the information for a law enforcement purpose;
- b.** To a law enforcement official for the purpose of alerting law enforcement of your death if TRS has a suspicion that your death may have resulted from criminal conduct;
- c.** To the Texas Attorney General to collect child support or to ensure health care coverage for your child;
- d.** In response to a subpoena if the TRS Executive Director determines that you will have a reasonable opportunity to contest the subpoena;
- e.** To a governmental entity, an employer, or a person acting on behalf of the employer, to the extent that TRS needs to share the information to perform TRS’s business;
- f.** To the Texas Legislature or agencies of the state or federal government, including, but not limited to health oversight agencies for activities authorized by law, such as audits; investigations; inspections; licensure or disciplinary actions; civil, administrative, or criminal proceedings or actions; or other activities. Oversight agencies seeking this information include government agencies that oversee: (i) the health care system, (ii) government benefit programs, (iii) other government regulatory programs, and (iv) compliance with civil rights laws;
- g.** To a public health authority for the purpose of preventing or controlling disease; and
- h.** If required by other federal, state, or local law.
- C. For specific government functions.** TRS may disclose protected health information of military personnel and veterans in certain situations. TRS may also disclose protected health information to authorized federal officials for conducting national security, such as protecting the President of the United States, or conducting intelligence activities, or to the Texas Legislature or agencies of the state or federal government, including, but not limited to health oversight agencies, for activities authorized by law, such as audits, investigations, inspections, licensure or disciplinary actions, civil, administrative, or criminal proceedings or actions, or other activities. Oversight agencies seeking this information include government agencies that oversee: (i) the health care system, (ii) government benefit programs, (iii) other government regulatory programs, and (iv) compliance with civil rights laws.
- D. Business associates.** TRS has contracts with individuals and companies (business associates) that help TRS in its business of providing health care coverage and in making disability retirement benefit decisions. Some of the functions these companies provide are performing audits; performing actuarial analysis; adjudication and payment of claims; customer service support; utilization review and management; coordination of benefits; subrogation; pharmacy benefit management; and technological functions. TRS may disclose your protected health information to its business associates so that they can perform the services that TRS has asked them to do. To protect your health information, however, TRS requires that these companies follow the same rules that are set out in this notice and to notify TRS in the event of a breach of your unsecured protected health information.
- E. Executor or administrator.** TRS may disclose your protected health information to the executor or administrator of your estate.
- F. Health-related benefits.** TRS or one of its business associates may contact you to provide appointment reminders. They may also contact you to give you information about treatment alternatives or other health benefits or services that may be of interest to you.
- G. Legal Proceedings.** TRS may disclose your protected health information: (1) in the course of any judicial or administrative proceeding, including, but not limited to, an appeal of denial of coverage or benefits; (2) in response to an order of a court or administrative tribunal (to the extent such disclosure is expressly authorized by law); and (3) because it is necessary to provide evidence of a crime that occurred on our premises.

(continued on next page)

- H. Coroners, Medical Examiners, Funeral Directors, and Organ Donation.** TRS may disclose protected health information to a coroner or medical examiner for purpose of identifying a deceased person, determining a cause of death, or for the coroner or medical examiner to perform other duties authorized by law. TRS also may disclose, as authorized by law, protected health information to funeral directors so that they may carry out their duties. Further, TRS may disclose protected health information to organizations that handle organ, eye, or tissue donation and transplantation.
- I. Research.** TRS may disclose your protected health information to researchers when an institutional review board or privacy board has: (1) reviewed the research proposal and established protocols to ensure the privacy of the information; and (2) approved the research.
- J. To Prevent a Serious Threat to Health or Safety.** Consistent with applicable federal and state laws, TRS may disclose your protected health information if we believe that the disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public, such as disclosures to prevent disease, help with product recalls, report adverse reactions to medications, or report suspected abuse, neglect or domestic violence.
- K. Inmates.** If you're an inmate of a correctional institution, TRS may disclose your protected health information to the correctional institution or to a law enforcement official for: (1) the institution to provide health care to you; (2) your health and safety and the health and safety of others; or (3) the safety and security of the correctional institution.
- L. Workers' Compensation.** TRS may disclose your protected health information to comply with workers' compensation laws and other similar programs that provide benefits for work-related injuries or illnesses.
- M. To your personal representative.** TRS may provide your protected health information to a person representing or authorized by you, or any person that you tell TRS in writing is acting on your behalf.
- N. To an entity assisting in disaster relief.** TRS may also disclose your protected health information to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status, and location. If you're not present or able to agree to these disclosures of your protected health information, then TRS may, using our professional judgment, determine whether the disclosure is in your best interest. TRS will attempt to gain your personal authorization when possible before making such disclosures.

Certain Uses and Disclosures Requiring an Opportunity to Agree or to Object

Under the following circumstances, TRS may use or disclose protected health information, provided that TRS informs you in advance of the use or disclosure and you have an opportunity to agree to or prohibit or restrict the use or disclosure of your protected health information. TRS may inform you orally or in writing of and obtain your oral or written agreement or objection to the use or disclosure of your protected health information. TRS will follow your instructions.

- TRS may disclose to a family member, other relative, or a close friend, or any other person you identify, your protected health information that (i) is directly relevant to such person's involvement with your health care or payment related to your health care, or (ii) serves to notify or assist in the notification of your location, general condition, or death.
- TRS may use or disclose your protected health information to a public or private entity authorized by law or by its charter to assist in disaster relief efforts, for the purpose of notifying or assisting in the notification of your location, general condition, or death.

For example, if you're not able to communicate your preference to TRS because you're unconscious, TRS may share your protected health information if TRS believes it's in your best interest to do so.

Certain Disclosures that TRS is Required to Make

TRS is required by law to make the following disclosures:

- **Disclosures to the Secretary of the U.S. Department of Health and Human Services.** TRS is required to disclose your protected health information to the Secretary of the U.S. Department of Health and Human Services when the Secretary is investigating or determining our compliance with the HIPAA Privacy Regulations.
- **Disclosures to you.** TRS is required to disclose to you most of your protected health information in a "designated record set" when you ask for access to this information, including information maintained electronically. Generally, a "designated record set" contains medical and billing records, as well as other records that are used to make decisions about your health care benefits. TRS is also required to provide, upon your request, an accounting of the disclosures of your protected health information. In many cases, your protected health information will be in the possession of a plan administrator or pharmacy benefits manager. If you ask for protected health information, TRS will work with the administrator or pharmacy benefits manager to provide your protected health information to you.

Certain Uses and Disclosures of Genetic Information that Cannot Be Made

TRS and Medical Board members, auditors, actuarial consultants, lawyers, health plan administrators or pharmacy benefit managers acting on behalf of TRS, TRS-Care or TRS-ActiveCare are prohibited from using or disclosing genetic information for underwriting purposes.

Certain Uses and Disclosures of Protected Health Information that Will Not Be Made

The following uses and disclosures of protected health information will not be made by TRS and Medical Board members, auditors, actuarial consultants, lawyers, health plan administrators or pharmacy benefit managers acting on behalf of TRS, TRS-Care or TRS-ActiveCare:

- Uses and disclosures that constitute marketing purposes;
- Uses and disclosures that constitute the sale of your protected health information; and
- Uses and disclosures that constitute fundraising purposes.

All Other Uses and Disclosures Require Your Prior Written Authorization

The following uses and disclosures will be made by TRS and Medical Board members, auditors, actuarial consultants, lawyers, health plan administrators or pharmacy benefit managers acting on behalf of TRS, TRS-Care or TRS ActiveCare only with a written permission (an authorization) from you:

- Most uses and disclosures of psychotherapy notes; and
- For any other use or disclosure of your protected health information that is not described in this notice.

If you provide TRS with such an authorization, you may cancel (revoke) the authorization in writing at any time, and this revocation will be effective for future uses and disclosures of your protected health information. Revoking your written permission will not affect a use or disclosure of your protected health information that TRS and Medical Board members, auditors, actuarial consultants, lawyers, health plan administrators or pharmacy benefit managers acting on behalf of TRS, TRS-Care or TRS-ActiveCare already made, based on your written authorization.

Your Rights

The Right to Request Limits on Uses and Disclosures of Your Protected Health Information

You can ask TRS to limit how it uses and discloses your protected health information. TRS will consider your request but is not required to agree to it. If TRS agrees to your request, TRS will put the agreement in writing and will follow the agreement unless you need emergency treatment, and the information that you asked to be limited is needed for your emergency treatment. You cannot limit the uses and disclosures that TRS is legally required to make. If you're enrolled in TRS-ActiveCare, you may request a restriction by writing to: Blue Cross and Blue Shield of Texas, P.O. Box 805106, Chicago, IL 60680-4112. In your request, state: (1) the information whose disclosure you want to limit, and (2) how you want to limit our use and/or disclosure of the information. If you're enrolled in TRS-Care, you may request a restriction by writing to: Blue Cross and Blue Shield of Texas, P.O. Box 805106, Chicago, IL 60680-4112. In your request, state: (1) the information whose disclosure you want to limit, and (2) how you want to limit our use and/or disclosure of the information. You have the right to request that your protected health information not be disclosed to TRS if you have paid for the service received in full.

The Right to Choose How TRS Sends Protected Health Information to You

You can ask that TRS send information to you at an alternate address (for example, sending information to your work address rather than your home address) or by alternate means (for example, courier service instead of U.S. mail) only if not changing the address or the way TRS communicates with you could put you in physical danger. You must ask in writing. You must be specific about where and how to contact you. TRS must agree to your request only if:

- You clearly tell TRS that sending the information to your usual address or in the usual way could put you in physical danger; and
- You tell TRS a specific alternative address or specific alternative means of sending protected health information to you. If you ask TRS to contact you via email, TRS will not send protected health information by email unless it is possible to encrypt the protected health information.

The Right to See and Get Copies of Your Protected Health Information

You can look at or get copies of your protected health information that TRS has or that a business associate maintains on TRS' behalf. You must make this request in writing. If your protected health information is not on file at TRS and TRS knows where the information is maintained, TRS will tell you where you can ask to see and get copies of your information. You may not inspect or copy psychotherapy notes or certain other information that may be contained in a designated record set that is in the possession of TRS or a business associate of TRS.

If you request copies of your protected health information, TRS can charge you a fee for each page copied, for the labor involved in compiling and copying the information, and for postage if you request that the copies be mailed to you. Instead of providing the protected health information you request, TRS may provide you with a summary or explanation of the information, but only if you agree in advance to:

- Get a summary or explanation instead of the detailed protected health information; and
- Pay the cost of preparing the summary or explanation.

The fee for the summary or explanation will be in addition to any copying, labor, and postage fees that TRS may require. If the total fees will exceed \$40, TRS will tell you in advance. You can withdraw or change your request at any time.

TRS may deny your request to inspect and copy your protected health information in certain limited circumstances. If you're denied access to your protected health information, you may request that the denial be reviewed, TRS will choose a licensed health care professional to review your request and the denial. The person performing this review will not be the same one who denied your initial request. Under certain conditions, the denial will not be reviewable. If this event occurs, TRS will inform you in our denial that the decision is not reviewable.

You have the right to get a list of TRS' uses and disclosures of your protected health information. By law, TRS is not required to create a list that includes any uses or disclosures:

- To carry out treatment, payment, or health care operations;
- To you or your personal representative;
- Because you gave your permission;
- For national security or intelligence purposes;
- To corrections or law enforcement personnel; or
- Made prior to three (3) years before the date of your request, but in no event made before April 14, 2003.

TRS will respond to your request within 60 days of receiving it. TRS can extend this deadline one time by an additional 30 days. If TRS extends its response time, TRS will tell you in writing the reasons for the delay and the date by which TRS will provide the list. The list will include:

- The date of the disclosure or use;
- The person or entity that got the protected health information;
- A brief description of the information disclosed; and
- Why TRS disclosed or used the information.

If TRS disclosed your protected health information because you gave TRS written permission to disclose the information, instead of telling you why TRS disclosed information, TRS will give you a copy of your written permission. You can get a list of disclosures for free every 12 months. If you request more than one list during a 12-month period, TRS can charge you for preparing the list, including charges for copying, labor, and postage to process and mail each additional list. These fees will be the same as the fees allowed under the Texas Public Information Act. TRS will tell you in advance of the fees it will charge. You can withdraw or change your request at any time.

(continued on next page)

The Right to Correct or Update Your Protected Health Information

If you believe that there is a mistake in your protected health information or that a piece of important health information is missing, you can ask TRS to correct or add the information. You must request the correction or addition in writing.

Your letter must tell TRS what you think is wrong and why you think it is wrong. TRS will respond to your request within 60 days of receiving it. TRS can extend this deadline one time by an additional 30 days. If TRS extends its response time, it must tell you in writing the reasons for the delay and the date by which TRS will respond.

Because of the technology used to store information and laws requiring TRS to retain information in its original text, TRS may not be able to change or delete information, even if it is incorrect. If TRS decides that it should correct or add information, it will add the correct or additional information to your records and note that the new information takes the place of the old information. The old information may remain in your record. TRS will tell you that the information has been added or corrected. TRS will also tell its business associates that need to know about the change to your protected health information.

TRS will deny your request if your request is not in writing or does not have a reason the information is wrong or incomplete. TRS will also deny your request if the protected health information is:

- Correct and complete;
- Not created by TRS; or
- Not part of TRS' records.

TRS will send you the denial in writing. The denial will say why your request was denied and explain your right to send TRS a written statement of why you disagree with TRS' denial. TRS' denial will also tell you how to complain to TRS or the Secretary of the Department of Health and Human Services. If you send TRS a written statement of why you disagree with the denial, TRS can file a written reply to your statement. TRS will give you a copy of any reply. If you file a written statement disagreeing with the denial, TRS must include your request for an amendment, the denial, your written statement of disagreement and any reply when TRS discloses the protected health information that you asked to be changed; or TRS can choose to give out a summary of that information with a disclosure of the protected health information that you asked to be changed. Even if you don't send TRS a written statement explaining why you disagree with the denial, you can ask that your request and TRS' denial be attached to all future disclosures of the protected health information that you wanted changed.

The Right to be Notified of a Breach of Unsecured Protected Health Information

You have the right to be notified and TRS has the duty to notify you of a breach of your unsecured protected health information. A breach means the acquisition, access, use, or disclosure of your unsecured protected health information in a manner not permitted under HIPAA that compromises the security or privacy of your protected health information. If this occurs, you will be provided information about the breach and how you can mitigate any harm from the breach.

The Right to Get This Notice

You can get a paper copy of this notice on request.

The Right to File a Complaint

If you think that TRS has violated your privacy rights concerning your protected health information, you can file a written complaint with the TRS Privacy Officer by mailing your complaint to:

TRS Privacy Officer
Teacher Retirement System of Texas
1000 Red River Street
Austin, TX 78701

All complaints must be in writing.

You may also send a written complaint to:

Region VI, Office for Civil Rights
Secretary of the U.S. Department of Health and Human Services
1301 Young St., Suite 1169
Dallas, TX 75202

FAX to (214) 767-0432 and e-mail at OCRComplaint@hhs.gov

Complaints filed directly with the Secretary must: (1) be in writing; (2) contain the name of the entity against which the complaint is lodged; (3) describe the relevant problems; and (4) be filed within 180 days of the time you became or should have become aware of the problem.

Finally, you may send a written complaint to:

Texas Office of the Attorney General
P.O. Box 12548
Austin, TX, 78711-2548
(800) 806-2092

TRS will not penalize or in any other way retaliate against you if you file a complaint.

More Information

Contact the TRS Privacy Officer in writing at the following address if you have any questions about the privacy practices described in this notice or how to file a complaint.

TRS Privacy Officer
Teacher Retirement System of Texas 1000 Red River St.
Austin, TX 78701

If you want more information about this notice or how to exercise your rights, contact the TRS Telephone Counseling Center at **(800) 223-8778**. For the Hearing Impaired: Dial Relay Texas 711.



Teacher Retirement System of Texas
1000 Red River St.
Austin, TX 78701-2698
www.trs.texas.gov