



Did you know?

Teacher Retirement System of Texas (TRS) was created November 1936. Voters approved an amendment to the Texas Constitution, creating a statewide teacher retirement system.

In 1985, TRS was assigned responsibility for administering a health insurance program for public school retirees.



Got Part B?

To be eligible for the TRS-Care Medicare Advantage plan, you **MUST** obtain Medicare Part B.



ssa.gov/benefits/medicare



Questions about your health benefits?

**Call TRS Health and Insurance Benefits
at 1-888-237-6762.**

Monday – Friday
7 a.m. – 6 p.m. CST

TRS Mission

To improve the retirement security of our members by prudently investing and managing the Trust assets and delivering benefits that make a positive difference in their lives.

COMMON TERMS



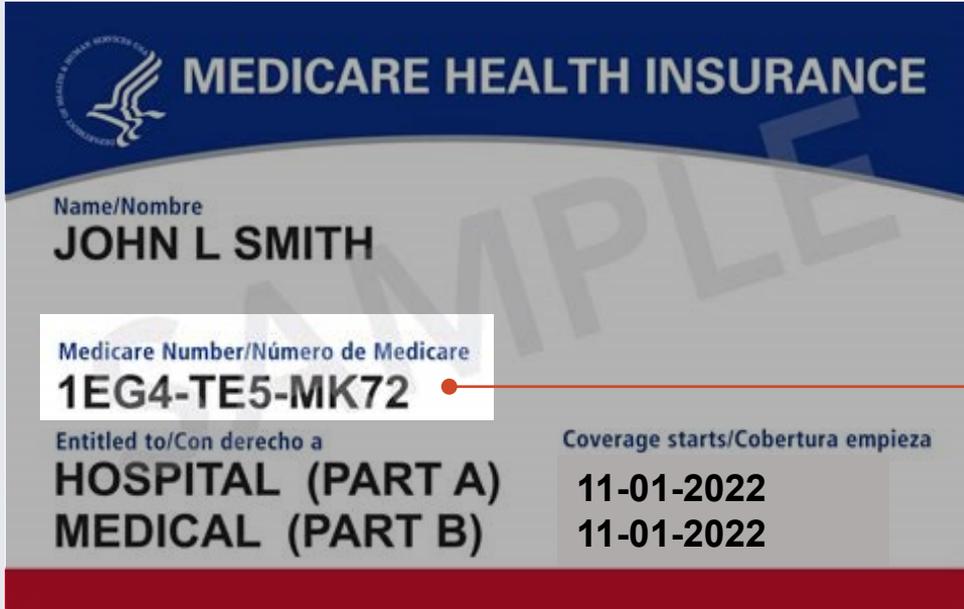
Deductibles

The amount of money you must spend out of pocket before your health plan begins to pay.



Coinsurance

The percentage your health plan and you pay after you paid or “met” your deductible.



The image shows a Medicare Health Insurance card for John L. Smith. The card has a blue header with the Medicare logo and the text "MEDICARE HEALTH INSURANCE". Below the header, the name "JOHN L SMITH" is listed. A white box highlights the Medicare Number "1EG4-TE5-MK72". Below this, the card lists the types of coverage and their start dates: Hospital (Part A) and Medical (Part B), both starting on 11-01-2022. A large, faint "SAMPLE" watermark is visible across the card.

MEDICARE HEALTH INSURANCE	
Name/Nombre JOHN L SMITH	
Medicare Number/Número de Medicare 1EG4-TE5-MK72	
Entitled to/Con derecho a	Coverage starts/Cobertura empieza
HOSPITAL (PART A)	11-01-2022
MEDICAL (PART B)	11-01-2022

Before you turn 65

**Remember to
give TRS your
Medicare number!**



CARE YOU CAN COUNT ON

TRS-Care Medicare & You

Agenda

1. What is Medicare?
2. Costs for Medicare and TRS-Care
3. Enrolling in TRS-Care Medicare plans
4. Things to Think About
5. TRS-Care Medicare Advantage (UnitedHealthcare)
6. TRS-Care Medicare Rx (SilverScript)
7. Closing Q&A

A large, semi-transparent number '1' is positioned on the left side of the slide, serving as a background element for the title.

What is Medicare?

- Medicare Defined
- Parts of Medicare

Medicare is federal health insurance that you pay for out of your FICA tax.

IT'S FOR:



PEOPLE AGE
65 AND OLDER



PEOPLE WITH
A DISABILITY



PEOPLE WITH END-STAGE
RENAL DISEASE



Hospitalization



Doctor Visits



Medical Coverage

Combines Medicare
with your TRS
medical plan to make
TRS-Care Medicare
Advantage



**Prescription
Coverage**

Combines Medicare
with your TRS health
plan to make TRS-
Care Medicare Rx



Costs for Medicare and TRS-Care

- Medicare Part A
- Medicare Part B
- Medicare Part C
- Medicare Part D

MEDICARE

Part A



No cost for most people.

If you are not eligible to get “premium-free Part A,” TRS doesn’t require you to sign up for it.

MEDICARE

Part B



In 2023, most people will pay **\$164.90 per month**.

You may pay more if you're in a high tax bracket. Visit [medicare.gov](https://www.medicare.gov) for more info.



Everyone must buy Medicare Part B to have coverage through TRS-Care.



The Part B premium is separate from what you pay for your TRS-Care premium.

MEDICARE
Part C



TRS-Care Medicare Advantage medical plan — you pay **\$135 per month** if you are a retiree or surviving spouse covering just yourself.

Monthly Premiums for TRS-Care Medicare Advantage & TRS-Care Medicare Rx

Retiree Only	\$135
Retiree + spouse	\$529
Retiree + child(ren)	\$468
Retiree + family	\$1,020

MEDICARE

Part C



**Your 2023 TRS-Care
premium payable to
TRS for Medical and
Prescription Coverage**

\$135 for Retiree Only

**Your 2023 Medicare
Part B premium payable
to Medicare**

\$164.90 per Medicare
participant

MEDICARE

Part D



TRS-Care Medicare Rx prescription drug plan — your payment for this is **included** in your TRS-Care premium.

Why choose TRS- Care?



HOSPITAL STAYS

are one copay per stay – not per day.

For a 3 day hospital stay:

- TRS-Care Medicare: **\$500**
- Other Medicare plans: **\$1,050**



LOW COPAYS

for services other plans may not cover.

- **\$0 copay** for annual wellness visit and flu shot
- **\$5 copays** for sick visits with a primary care provider (PCP)
- **\$0 copay** for routine eye exam



PRESCRIPTION DRUG COVERAGE

at no extra cost and no coverage gap.

- TRS-Care Medicare for 90 day supply of Januvia (antidiabetic): **\$70**
- Other Medicare plans: **\$329**



SEE ANY DOCTOR

who accepts Medicare and will bill UnitedHealthcare



Enrolling in TRS-Care Medicare plans

- Who should enroll
- Taking action
- Automatic enrollment
- Initial enrollment
- Retiring at age 65 or older
- Age 65 packet

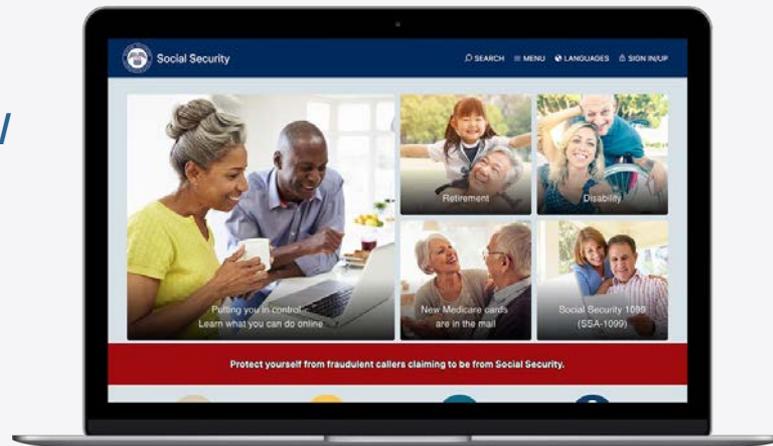
WHO SHOULD ENROLL

- Current TRS-Care participants who are turning 65 soon.
 - Current TRS-Care participants who are eligible for Medicare due to disability.
 - Retiring TRS members and their eligible dependents who are age 65 or over (initial enrollment period).
- Eligible TRS retirees turning 65 who:
 - Were eligible at retirement but didn't enroll at initial enrollment.
 - Terminated TRS-Care coverage before turning 65.
 - Had a special enrollment event.

TAKING ACTION

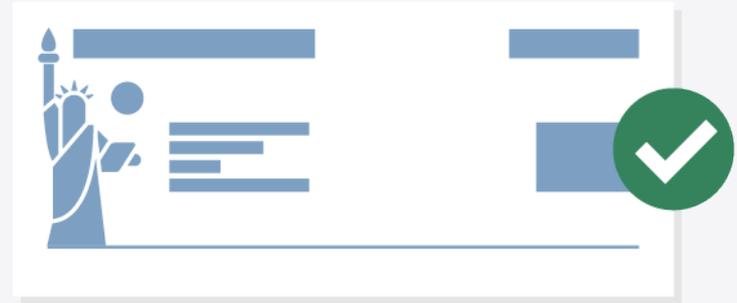
If you're not getting SSA benefits, you need to take action to enroll in Medicare:

- **SIGN UP ON www.ssa.gov/benefits/medicare/**
- **CALL SSA AT 1-800-772-1213**
- **VISIT A LOCAL SSA OFFICE**



AUTOMATIC ENROLLMENT

If you're already getting SSA benefits, you will be **automatically enrolled** in Medicare. Typically, the premiums come out of your SSA check.



INITIAL ENROLLMENT

Medicare gives you **seven months** to enroll—three months before your birthday month, your birthday month, and three months after your birthday month.



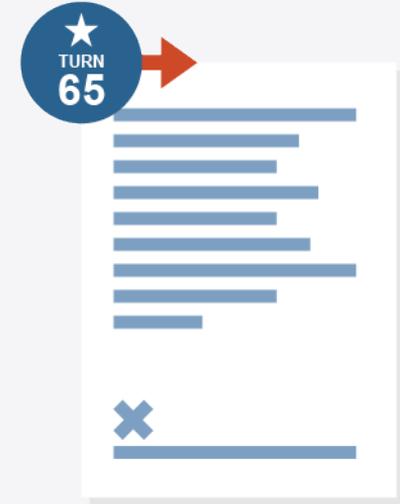
TRS recommends that you start the enrollment process **three months** before your 65th birthday month.

RETIRING PAST AGE 65

If you're still actively employed at age 65, you can delay Medicare Part B enrollment.

SSA will send you a form that your employer needs to complete — this way, you won't pay a late enrollment penalty when you do sign up.

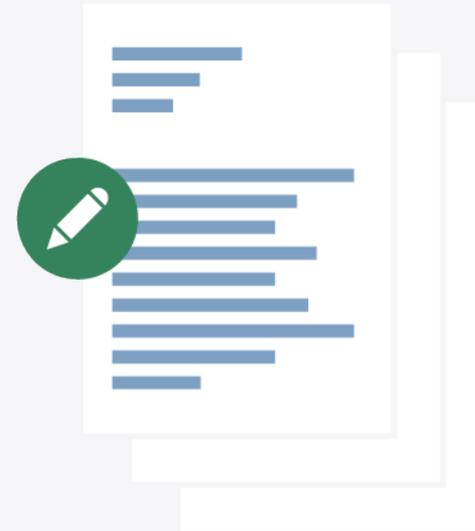
When you decide to retire, you should contact SSA about three months before your retirement date to ensure your Medicare coverage takes effect the same day as your first day of TRS-Care coverage.



TURNING 65 PACKET

Every current TRS-Care participant will get a packet from TRS, UnitedHealthcare & SilverScript before turning 65.

- Welcome Letter
- TRS-Care Application (**return to TRS only if you're adding new dependents**)
- TRS-Care Medicare Advantage Guide
- TRS-Care Medicare Rx Summary of Benefits



4 Things to Think About

- Penalties for missing the initial enrollment period
- Special situations
- Failure to enroll in Medicare

PENALTIES FOR MISSING THE MEDICARE INITIAL ENROLLMENT PERIOD

If you don't sign up for Medicare Part B on time, your Medicare monthly premium will go up **10%** for each full 12-month period delay.

The penalty is for life.



SPECIAL SITUATIONS (1 OF 3)

Return-to-Work Retirees

If Medicare-eligible retirees return to work for a TRS employer and work 10+ hours, they can:

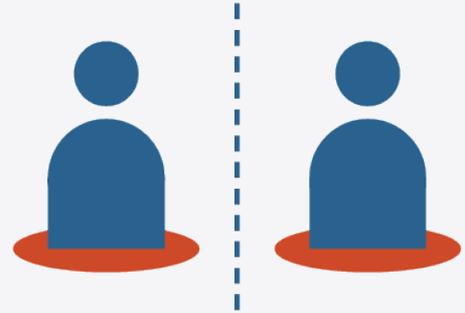
1. Maintain their current enrollment in the TRS-Care Medicare plans and decline TRS-ActiveCare;
2. Stay enrolled in both TRS-Care Medicare & TRS-ActiveCare plans; or
3. Terminate TRS-Care, enroll in coverage with that employer, and reenroll in TRS-Care as a special enrollment event when they leave that job.



SPECIAL SITUATIONS (2 OF 3)

Split Households

- If you or your covered dependents are on Medicare, TRS will enroll you on the TRS-Care Medicare Advantage and TRS-Care Medicare Rx plans for retirees aged 65 or older.
- If you or your covered dependents are not eligible for Medicare coverage, TRS will enroll you in the TRS-Care Standard plans for retirees under age 65.



SPECIAL SITUATIONS (3 OF 3)

Enrolling in Medicare Advantage or Part D plans outside of TRS-Care

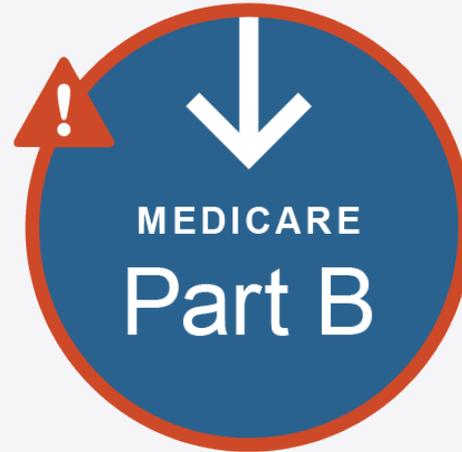
- If you enroll in a Medicare Advantage plan outside of TRS-Care, you will be terminated from TRS-Care medical and prescription coverage.
- If you enroll in an individual Part D plan, you'll be terminated from all TRS-Care coverage.



The Centers for Medicare and Medicaid Services (CMS) prohibits people enrolled in a Medicare Advantage plan through their group retiree benefits from joining an individual Medicare prescription drug plan.

FAILURE TO ENROLL IN MEDICARE (1 OF 2)

- If you do not buy and maintain Medicare Part B, you risk losing all TRS-Care coverage for you and your covered dependents.



FAILURE TO ENROLL IN MEDICARE (2 OF 2)

- If TRS or UHC can't verify that you have Medicare Part B, TRS can't enroll you in TRS-Care Medicare Advantage or TRS-Care Medicare Rx. **You risk losing all TRS-Care coverage.**





TRS-Care Medicare Advantage

Insured by UnitedHealthcare® (UHC)

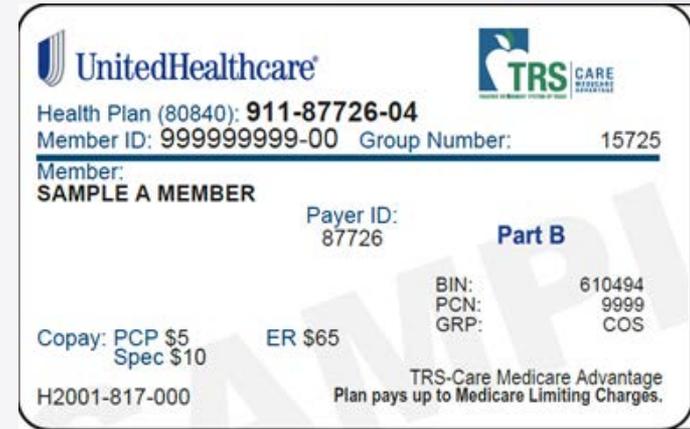
TRS-Care Medicare Advantage PPO plan

- No need for supplemental coverage
- One card for all medical services
- Provides dedicated TRS Customer Service phone number
- Copayments conveniently listed

First, you must enroll in Medicare Part B and provide your Medicare ID to TRS in order to enroll in TRS-Care Medicare Advantage and TRS-Care Medicare Rx®.

With your TRS-Care Medicare Advantage plan, you can see any provider of your choice, with no change in your benefits, as long as the provider accepts Medicare and is willing to bill UnitedHealthcare.

What does my ID card look like?





Building healthy provider relationships

Benefits of having a Primary Care Provider (PCP)

- Your PCP can get to know your overall health history
- You can build a trusting, long-term relationship
- Your plan doesn't require referrals to see other providers
- Your PCP will help take care of you when you're sick and help you stay healthy with preventive care

Finding a doctor is easy



If you need help finding a doctor or a specialist, just give UnitedHealthcare a call. We can even help schedule that first appointment. To see if your provider is part of the UnitedHealthcare network, go to **www.retiree.uhc.com/TRS-CareMA** and click on “Look up a provider now”.

Do you know your vocabulary terms?



Deductible

Coinsurance

Maximum
out-of-pocket

TRS-Care Medicare Advantage plan



Your deductible*

You will pay a \$400 deductible up front.



Your copay or coinsurance

Once you have paid your \$400 deductible, you may pay a copay or coinsurance depending on the service provided.



Your Out-of-Pocket Maximum

Your deductible, copay and coinsurance accumulate to your out-of-pocket maximum of \$3,500.

*All preventive services have a \$0 copay and DO NOT apply to the deductible.

If you are transferring from the TRS-Care Standard plan in 2022, you will have no deductible through the rest of the plan year – Dec. 31, 2022. Your \$400 deductible will begin Jan. 1, 2023.

TRS-Care Medicare Advantage benefits

Benefit Coverage	In-Network	Out-of-Network	Must Meet Deductible?
Primary care provider (PCP) sick visit	\$5 copay	\$5 copay	No
Specialist office visit	\$10 copay	\$10 copay	Yes
Urgent care	\$35 copay	\$35 copay	No
Emergency room	\$65 copay	\$65 copay	No
Inpatient hospitalization (Unlimited number of days)	\$500 per stay	\$500 per stay	Yes

TRS-Care Medicare Advantage benefits

Benefit Coverage	In-Network	Out-of-Network	Must Meet Deductible?
Outpatient surgery	\$250 copay	\$250 copay	Yes
Outpatient Laboratory Services	\$0 copay	\$0 copay	Yes
Physical Therapy	\$5 copay	\$5 copay	Yes
Outpatient Radiology Services (CT scans MRI)	5% coinsurance	5% coinsurance	Yes
Durable Medical Equipment	5% coinsurance	5% coinsurance	Yes

Explanation of Benefits (EOB)

- Stay informed
- Clear and detailed financials
- Information you can share with your provider
- High-level claims overview such as Dates of Service, rendering provider and services provided

Remember that all services received and billed to your TRS-Care Medicare Advantage plan process with the same In-Network & Out-of-Network benefits

Provider: Park Central Urgent Care Network provider Claim #: 1005439612010	Provider billed plan	Total cost (allowed amount)	Plan paid	Your share
June 13, 2023 Ost Skn Barrier Solid 4x4 Ext W/O Convexity Billing code A-4385-NU	\$194.00	\$139.00	\$0.00	\$55.00
Totals	\$194.00	\$139.00	\$0.00	\$55.00

Preventive* vs. Diagnostic

What is a preventive service?

- Annual Physical
- Annual Wellness Visit
- Immunizations
- Breast Cancer Screenings
- Colon Cancer Screenings
- Cardiovascular Screening
- Diabetes Screenings

What is a diagnostic service?

- X-ray
- MRI
- Mental health
- Rehabilitation
- CT scan
- Sick visits

*All preventive services have a \$0 copay and **DO NOT** apply to the deductible.

Telephonic Nurse Support



You are never alone with Telephonic Nurse Support

- Telephonic Nurse Support was designed specifically to help make your health decisions simple and convenient by providing answers to your health questions anytime, anywhere — 24 hours a day, 7 days a week — at no additional cost.

When you call, a registered nurse can help you:

- Choose where to go for care — whether that's self-care, a doctor visit or urgent care.
- Find a doctor or hospital that meets your needs and preferences.
- Understand your diagnosis and explore treatment options.

**You can contact the Telephonic Nurse Support line at 1-877-365-7949, TTY 711.
This number is also located on the back of your ID card.**



Pop quiz

Where do you go for care?

You wake up at 2 a.m. Sunday with a headache from sinus pressure and a sore throat. You are miserable and cannot go back to sleep.

You know your doctor's office is not open on weekends. Although you don't feel it's an emergency, you know you will worsen if you wait until Monday for treatment.

- A. You go to the emergency room.
- B. You try and find an urgent care center open on Sundays.
- C. You can go to www.retiree.uhc.com/TRS-CareMA and pay \$0 copay for a virtual visit through AmWell, Teledoc, or Doctors on demand



Pop quiz

Where do you go for care?

You wake up at 2am Sunday morning with a headache from sinus pressure and a sore throat. You are miserable and cannot go back to sleep.

You know your doctors office is not open on weekends. Although you don't feel its an emergency, you know you will worsen if you wait until Monday for treatment.

- A. You go to the emergency room.
- B. You try and find an urgent care center open on Sundays.
- C. You can go to www.retiree.uhc.co/TRS-CareMA and pay \$0 copay for a virtual visit through AmWell, Teledoc, or Doctors on demand

PHYSICIAN FINDER

1

Find a provider

English 

Spanish 

Find a provider who fits your needs

www.retiree.uhc.com/TRS-CareMA

Under How to Find a Provider click on Find a Provider

PHYSICIAN FINDER

2

What location do you want to find a provider in?

Enter a street address, city & state or 5 digit zip code.

Continue

What location do you want to find a provider in?

Enter a street address, city & state or 5-digit zip code.

PHYSICIAN FINDER

3

What type of Medical care can we help you find

The screenshot shows the UnitedHealthcare Physician Finder interface. At the top left is the UnitedHealthcare logo. To its right is a blue button labeled "FIND CARE" and a "SAVED" indicator. In the top right corner, there is a language dropdown menu set to "ENGLISH". Below the header is a search bar with the placeholder text "Search by provider, service, or condition" and a blue "Search" button with a magnifying glass icon. Underneath the search bar is the heading "Find Health Care by Category". Below this heading are four circular icons, each with a corresponding title and description:

- People**: Doctors, medical groups, and other professionals by specialty
- Places**: Hospitals, clinics, labs, imaging centers, medical suppliers
- Services and Treatments**: Providers for office visits, tests, treatments, surgeries
- Care by Condition**: Find care for common concerns

You will automatically be directed to view doctors, hospitals, and services with in your TRS-Care Medicare Advantage PPO Network. Search by provider, service or condition

Virtual Visits

You can find a list of participating Virtual Visit providers by logging into your member website at www.retiree.uhc.com TRS-CareMA



With Virtual Visits, you're able to live video chat with a doctor or behavioral health specialist from your computer, tablet or smartphone anytime, day or night.¹

Virtual Doctor Visits

You can ask questions, get a diagnosis, or even get medication prescribed and have it sent to your pharmacy. All you need is a strong internet connection. Virtual Doctor Visits are good for minor health concerns like:

- Allergies, bronchitis, cold/cough
- Fever, seasonal flu, sore throat
- Migraines/headaches, sinus problems, stomachaches

Virtual Behavioral Health Visits

Virtual Behavioral Health Visits may be best for:

- Initial evaluation
- Medication management
- Addiction
- Depression
- Trauma and loss
- Stress or anxiety

Diabetes testing and monitoring supplies

When you use one of the approved meters and corresponding strips, your cost-share for diabetes testing and monitoring supplies is a **\$0 copay**.

These supplies also include any brand of lancets, lancing device, glucose control solution (to test the accuracy of your meter), and replacement batteries for your meter.



To switch to one of the preferred brands, you may be required to get a new prescription from your doctor. A temporary supply of your current brand can be requested.



Your plan provides coverage for many of the OneTouch® and ACCU-CHEK® blood glucose testing strips and meters

UnitedHealthcare[®] HouseCalls

Yearly check-ups at home to help stay up-to-date on your health between regular doctor's visits at a \$0 Copay.

What to expect from a HouseCalls visit:

- A member of our licensed medical staff will perform a head-to-toe exam, health screenings, review your health history and current medications, help identify health risks and provide health education.
- You can talk about health concerns and ask questions that you haven't had time to ask before.
- You'll get a personalized checklist of topics to discuss at your next doctor's visit.
- HouseCalls will send a summary of your visit to you and your primary care provider.
- Video visits from UnitedHealthcare HouseCalls – A HouseCalls video visit uses technology to connect plan members with a health care practitioner for up to a full hour to review your health history and current medications, discuss important health screenings, identify health risks and provide health education.



Enjoy a \$0
preventive care
visit in the privacy
of your own
home*

*HouseCalls may not be available in all areas

Additional benefits and resources: Rally Coach Programs



You have access to 3 unique programs that provide online and telephonic coaching support designed to support your health and wellness goals

- **Real Appeal®** is a simple, step-by-step online program that helps make losing weight fun. The program offers tools that may help you lose weight, reduce your risk of developing serious health conditions, gain energy and achieve your long-term health goals, at no additional cost.*
- When you enroll in Real Appeal, you receive:
 - A Transformation Coach who leads weekly online group sessions
 - Online tools to help you track your food, activity and weight-loss progress
 - A Success Kit with food and weight scales, recipes, workout DVDs and more — shipped directly to your door
- **Rally Wellness Coaching** provides personal coaching, online learning and support for a variety of topics that promote whole-person health. Wellness Coaching offers a comprehensive solution to address your physical, mental, social and emotional needs. Wellness Coaching includes the option to select a program topic of interest, work with a coach, set an action plan and engage with online learning modules and digital tools at your own pace.
- With the **Quit For Life®** Tobacco Cessation Program, you will have 24/7 access to tools and resources to help you quit all types of tobacco use.

Gym and fitness membership



SilverSneakers® is a fitness benefit that includes:

- A \$0 membership fee
- Memberships to thousands of locations* nationwide
- Group exercise classes** designed for all fitness level and abilities
- Always-available fitness classes through SilverSneakers On-Demand™
- SilverSneakers Live virtual classes and workshops throughout the week
- SilverSneakers GO™ mobile app with adjustable workout plans and more
- Fun activities held outside the gym**
- Group activities and classes offered outside the traditional gym setting
- You can call SilverSneakers at 1-888-423-4632, TTY 711, 8 a.m. – 8 p.m. ET, Monday – Friday, for more details

*Participating locations ("PL") are not owned or operated by Tivity Health, Inc. or its affiliates. Use of PL facilities and amenities are limited to terms and conditions of PL basic membership. Facilities and amenities vary by PL.

**Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer members additional classes. Classes vary by location.

©2022 United HealthCare Services, Inc. All rights reserved.

Proprietary information of UnitedHealth Group.

Do not distribute or reproduce without express permission of UnitedHealth Group.

UnitedHealthcare Hearing



Hear the moments that matter most

With UnitedHealthcare Hearing, you can receive a hearing exam and have access to a wide selection of name-brand and private-labeled custom-programmed hearing aids at significant savings. Plus, you'll receive personalized care and follow-up support from experienced hearing providers, helping you to hear better and live life to the fullest.

- \$500 allowance for hearing aids every 3 years.
- Get access to the largest nationwide accredited network of more than 7,000 hearing providers*
- Choose latest technology hearing aids from major manufacturers, including Phonak, Starkey[®], Oticon, Signia, ReSound, Widex[®] and Unitron[™]
- Order hearing aids in-person or through home delivery
- Receive exclusive pricing, helping you save thousands of dollars

Trusted care at home when you need it



You are eligible for in-home non-medical care through our national provider CareLinx.

This may include grocery shopping, meal preparation, light housekeeping, personal care, medication reminders and more.

- \$0 Copay
- Coverage includes 8 hours of in-home, non-medical care per month through provider CareLinx; Unused hours do not roll over.
- Some restrictions and limitations apply.

Routine Transportation program



Get to health-related appointments easier at no additional cost

If you don't have a way to get to your health care appointments, our transportation program can help — at no extra cost to you.

- \$0 Copay
- Up to 24 one-way trips or 12 round trips per year, up to 100 miles one way
- Transportation provided to and from approved locations and must be medically-related such as doctors' appointments and pharmacy trips
- Transportation cannot be used for emergency-related situations
- Scheduling is allowed up to 30 days in advance but requires at least two business days advanced notice.

Healthy at Home



With UnitedHealthcare Healthy at Home, you are eligible for the following benefits up to 30 days following all inpatient and skilled nursing facility discharges:

- 28 home-delivered meals through Mom's Meals[®] when referred by a UnitedHealthcare Advocate*.
- 12 one-way rides to medically related appointments and to the pharmacy when referred by a UnitedHealthcare Advocate*.
- 6 hours of in-home personal care provided through a CareLinx[®] professional caregiver to perform tasks such as preparing meals, bathing, medication reminders and more. A referral is not required.

*A new referral is required after every discharge to access your meal and transportation benefit provided through the Health at Home program

©2022 United HealthCare Services, Inc. All rights reserved. Propriety information of UnitedHealth Group.
Do not distribute or reproduce without express permission of UnitedHealth Group.

Personal Emergency Response System (PERS)



With the Personal Emergency Response System, help is a button push away.

- \$0 Copay
- Quick access to help in any situation whether an emergency or just need helping hand
- Helps give member confidence and independence

Health Products Benefit FirstLine Essentials+



Over-the-Counter care at no cost to you

FirstLine Essentials+ is an over-the-counter benefit that gives you credits to spend on over-the-counter care. Shop toothpaste, pain relief, vitamins, cough drops and more. It's all included with your health plan.

\$40 is added to your account every three months for a total of (\$160 annually). Credits may be carried over month to month, but expire at the end of the plan year. You can use it to buy health and wellness products.

Choose how to shop for products:

Catalog: You'll receive a catalog in the mail 4 to 6 weeks after enrollment. A new catalog will be sent every three months. Fill out an order form and mail it in. Or call to order by phone.

Online: Use your digital account on the FirstLine Essentials website



Vision Benefits

- Vision benefits worth a look
- Vision care is an important part of your overall health. Regular visits to an eye doctor can help keep your eyes healthy.
- Your TRS-Care Medicare Advantage plan gives access to:
 - \$0 copay for an annual eye exam
 - Up to a \$70 allowance for eyeglasses or up to a \$105 allowance for contact lenses, every 12 months
 - Freedom to see any participating vision provider
 - Nationwide network of providers to serve your vision needs

Visit your Virtual Education Center[®] today to explore your TRS-Care Medicare Advantage plan and learn more about the additional programs available to you



uhcvirtualretiree.com/TRS-CareMA/

- Learn more about the additional programs offered to TRS-Care Medicare Advantage participants
- Watch videos from real life UnitedHealthcare Medicare Advantage members
- Print additional plan program information
- Access via any tablet, computer or smartphone

What to expect after you enroll



Quick Start Guide



**TRS-Care Medicare
Advantage Member
ID Card**



Welcome Call



**Evidence of
Coverage (EOC)**



Welcome Webinar

What to expect after enrollment

- Once your plan is effective, simply use your TRS-Care Medicare Advantage ID card each time you go to the doctor or hospital.
- The back of your ID card lists important phone numbers you may need throughout the year like your TRS-Care Medicare Advantage Dedicated Advocates phone number: 1-866-347-9507.
- Don't discard your red, white and blue Medicare card.

Store your Medicare card in a safe place



Use this card when your plan becomes effective



Follow these easy steps to sign up for your online account:

- Visit the website and click on the “New user? Register Now” button and then click “Register Now.”
- Enter your information (first and last name, date of birth, ZIP code, TRS-Care Medicare Advantage ID number) and click "Continue."
- Create your username and password, enter your email address, and click “Create my ID.”
- For security purposes, you will need to verify your account by email, call or text.

Setting up your personal TRS-Care Medicare Advantage online account

After you get your TRS-Care Medicare Advantage ID card, sign up for your secure online personal account at www.retiree.uhc.com/TRS-CareMA.

After you sign up, you can:

- Look up your latest claim information.
- Review benefit information and plan materials.
- Print a temporary TRS-Care Medicare Advantage ID card and request a new one.
- Search for network doctors.
- Explore Renew by UnitedHealthcare, our members-only Health & Wellness experience.
- View your plan documents online.



Advocacy that delivers for TRS Participants

You will have a dedicated customer care team to help you with anything related to TRS-Care Medicare Advantage Plan

Call Us:

Toll-free 1-866-347-9507, TTY 711
7 a.m. – 6 p.m. CT, Monday – Friday

Or visit

www.retiree.uhc.com/TRS-CareMA

Thank you



TRS-Care Medicare Rx

SilverScript



Enrollment and Eligibility

- Once you enroll in Medicare, give TRS your Medicare ID number. TRS will then initiate your enrollment and send you welcome materials.
- You may opt out of TRS-Care Medicare Rx®, but you won't have any prescription coverage through TRS-Care and won't see a reduction in monthly premiums.
- Once you're eligible for Medicare, you must enroll on time or you will incur a Late Enrollment Penalty.



TRS-Care Medicare Rx[®] Benefits

- Richer benefits than individual Part D plans
- No “donut hole” or coverage gap
- No large out-of-pocket costs for brand or specialty drugs
- Access to a broad network of pharmacies
- 90-day supply option through CVS Caremark Mail Service Pharmacy™ or Retail-*Plus* pharmacies
- No requirement to use CVS pharmacies
- Predictable Copays



Copays – Up to a 31-Day Supply at Retail

Drug Tier	Copayment
Generic	\$5
Preferred Brand Drugs	\$25
Non-Preferred Drugs	\$50
Specialty/High Cost Tier (Limited to a 31-Day Supply)	\$50



Copays – Up to a 90-Day Supply

at Retail-Plus Pharmacies or CVS Mail Service Pharmacy

Drug Tier	Copayment
Generic	\$15
Preferred Brand Drugs	\$70
Non-Preferred Drugs	\$125
Specialty/High Cost Tier*	Limited to a 31-Day Supply

Medicare Part D Drug Payment Stages

Participant: You pay copays or less through all stages in 2023.

1

Deductible Stage
(\$505 for 2023)

**No deductible,
you pay your copay**

2

Initial Coverage Limit
Stage (\$4,660)

You pay your copay

3

Coverage Gap (Donut
Hole: \$4,660-\$7,400)

You pay your copay

4

Catastrophic Stage
(over \$7,400)

**You pay your
copay or less**

Medicare Drug Stage Example

Ronald takes Forteo (Non-Preferred Brand) at a 31-day supply.

The cost of this medication is \$3,846.

Here's what would happen with a "marketplace" plan vs. TRS-Care Medicare Rx®.

Phase	Marketplace Plan	TRS-Care Medicare Rx	Savings with TRS
Deductible	\$1340.25	\$50.00	\$1290.25
Initial Coverage Limit	\$961.50	\$50.00	\$911.50
Gap "Donut Hole"	\$961.50	\$50.00	\$911.50
Catastrophic Phase	\$177.30	\$50.00	\$127.30

Diabetic Supply Coverage



Meters, Lancets and Test Strips – Present your TRS-Care Medicare Advantage (UHC) card at the pharmacy when filling these supplies to receive them at no cost to you.



Needles and Syringes – Fill a 90-day supply through SilverScript to obtain needles or syringes at no cost to you. If you fill a prescription for less than 90 days, you'll pay a copay.



Prior Authorizations (PAs)

- PAs won't automatically transfer from your non-Medicare prescription coverage. Call 844-345-4577 to ask about getting a new PA.
- If you take drug that has a change in usage restriction (Quantity Limits, Prior Authorization), you will be granted a Transition Fill by CMS to allow for the Prior Authorization or other documentation to be submitted to SilverScript.

CMS Required Communications

1

Turning 65 packet from TRS – approximately 90 days before you join

- Includes a Summary of Benefits to advise participants of their 2021 cost-sharing amounts
- If you choose to opt out of this prescription drug coverage, you will lose your retiree prescription drug coverage from TRS-Care

3

Confirmation of Enrollment from SilverScript – approximately 30 days before enrollment

- Contains ID Card

2

You will receive your Welcome Kit from SilverScript– approximately 30 days before plan becomes effective

- Includes Evidence of Coverage, Drug List, Pharmacy Directory and a mail order form

4

Participants who utilize their prescription drug benefit will receive a monthly Explanation of Benefits (EOB) that summarizes all of the medication they filled the previous month



Thank You



Visit info.Caremark.com/trscaremedicarerx or call **SilverScript Customer Care at 1-844-345-4577, 24 hours a day, 7 days a week**. TTY users call 711.



Up next: Closing Q&A

Contact Information

TRS-Care Eligibility and Enrollment (TRS)

1-888-237-6762, M-F, 7 a.m. - 6 p.m.

trs.texas.gov

Medical Questions (UnitedHealthcare)

1-866-347-9507 (TTY: 711), M-F, 7 a.m. – 6 p.m.

retiree.uhc.com/TRS-CareMA

Prescription Drugs Questions (SilverScript)

1-844-345-4577 (TTY: 711), 24 hours a day, 7 days a week

info.caremark.com/trscaremedicarerx

Up Next: Q&A