

Your 2018-19
TRS-ActiveCare 1-HD Plan

RESOURCE GUIDE

See all your plan offers to help you stay healthy, live well and save money





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Six ways to save on health care

Did you know? TRS-ActiveCare is a self-funded medical plan. This means TRS, not Aetna, funds medical claims for participants. Aetna simply processes the claims. When you make choices that save you money on health care, you're saving TRS money, as well, and helping to keep everyone's costs down.



Be an informed consumer and make smart choices. Here are some tips to help:

1. STAY IN THE NETWORK

When you choose doctors, hospitals and other care providers in Aetna's network, you pay less for care. Here's why:

- · Your deductible is lower, so benefits start sooner.
- Your out-of-pocket maximum is lower, so you reach it sooner. After that, the plan pays benefits at 100% for the rest of the year.
- You take advantage of negotiated rates. In-network providers charge less for Aetna members.
- You don't pay more than the plan's allowable amount for a given service. An
 out-of-network provider may bill for the difference between his or her actual
 charge and the allowable amount.

You also save time with in-network providers because they file claims and take care of the plan's precertification requirement for you.

Compare in-network vs. out-of-network benefits and costs with the chart on pages 18-19.

Find in-network providers: Go to www.trsactivecareaetna.com and click Find a Doctor or Facility on the home page. Or call TRS-ActiveCare Customer Service at 1-800-222-9205 for help to find in-network providers near you.

2. USE TELADOC®

Teladoc lets you talk with a doctor via phone or video consult 24/7. It's a fast and easy way to get help for non-emergency problems, such as colds and flu, earache or headache, poison ivy, pink eye, and more. Your Teladoc doctor can diagnose, treat and prescribe medications, all for just \$40 per consult.

To learn more and get started with Teladoc, visit www.teladoc.com/trsactivecare. Or call 1-855-TELADOC (1-855-835-2362).



- Select a primary care doctor for regular wellness check-ups, health consultations and medical care.
- Save the hospital ER for life-threatening emergencies.
- Avoid using freestanding ERs for non-emergency care (page 6).
- Use your primary care doctor, urgent care centers or walk-in clinics for non-emergency care.
- Schedule lab work and imaging at freestanding medical service facilities instead of hospitals for outpatient diagnostic services, except in the case of freestanding ERs (see page 6).

Find network facilities near you: Go to www.trsactivecareaetna.com and click Find a Doctor or Facility.

4. COMPARE COSTS AHEAD OF TIME

With the Member Payment Estimator, you can enter your treatment or service and compare costs among up to ten in-network providers. To use the tool, link to your secure member website from www.trsactivecareaetna.com then select See Coverage & Costs>Estimate Costs.

5. SAVE ON ADVANCED IMAGING SCANS, SUCH AS MRIS. CTS AND PET SCANS

USIN is a new, advanced imaging benefits provider for TRS-ActiveCare participants. You can access this high-quality network and save significantly on out-of-pocket costs — up to \$500 per scan or more.

How does it work? Once your doctor submits your imaging request to Aetna and the image is preauthorized, the USIN concierge desk will call you directly within 24 hours if a lowercost alternative is available. USIN will arrange your appointment at a convenient date, time and location.

6. TAKE ADVANTAGE OF AETNA MEMBER DISCOUNTS

As an Aetna member, you can save on:

- Vision and hearing care
- Fitness memberships and equipment
- Natural products and services, such as massage and chiropractic
- Weight-management programs
- · Books, CDs, magazine subscriptions
- Travel, family care, dining and more

Get started with your discounts by linking to your secure member website at www.trsactivecareaetna.com. Select Stay Healthy>Discounts on your home page.









ABOUT FREESTANDING EMERGENCY ROOMS

Not all ERs are located in hospitals. More and more are operating as freestanding facilities. They may look like urgent care centers or walk-in clinics, but they charge much like a hospital ER — even for non-emergency care.

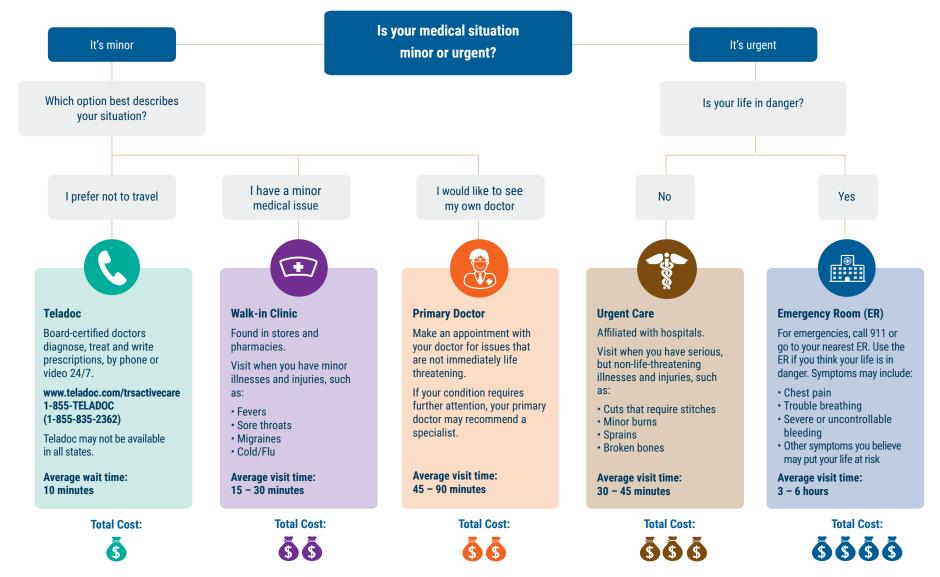
How to know: If the facility has "emergency" in its name, you'll be billed the same as you would for a hospital-based ER.

Choose wisely: For non-life threatening ailments visit your doctor, walk-in clinic or urgent care. In an emergency, dial 911 or go to a hospital-based ER. If you use a freestanding ER, you'll pay a \$500 copay per visit plus 20% after the deductible.

KNOW YOUR OPTIONS SAVE TIME AND MONEY

Knowing your options for medical care can help save you time and money. Follow the path below for help in getting the right level of care at the right place for the lowest cost.







Preventive care is covered at 100%

Preventive services and certain generic preventive drugs are covered at 100% when you use in-network providers. Take advantage and stay up to date on:

- Routine physical exams
- Cancer screenings
- Immunizations
- · Wellness counseling
- Women's preventive care (checkups, contraception, prenatal care)
- · Certain generic preventive drugs (anticoagulants, blood pressure and cholesterol medications, prenatal vitamins)

For a complete list of covered services, refer to the TRS-ActiveCare Benefits Booklet at www.trsactivecareaetna.com.

Why it's important: Preventive care can tell you and your doctor a great deal about your current state of health and your risk for future problems. It can catch health conditions, such as cancer, heart disease and diabetes, in their earliest stages, when treatment works best and costs less. With 100% coverage for in-network services, there isn't a better health care bargain out there. Be sure to schedule your preventive visits early in the year.



You pay medical and non-preventive services out of your own pocket (or using your HSA) until you meet the deductible.

- If you have employee-only coverage, you must meet the employee-only deductible before the plan begins to pay claims.
- If you have family coverage, the family deductible must be met before benefits are paid for any covered individual. One person or a combination of family members may meet the deductible.

Remember: Only in-network expenses apply to the in-network deductible, and only out-of-network expenses apply to the out-of-network deductible.

You pay coinsurance

Once you meet the deductible, the plan pays a percentage of covered expenses, and you pay the rest (coinsurance). You can pay your share of expenses out of your own pocket or use HSA funds.

You're protected from high out-of-pocket costs

If your share of out-of-pocket expenses (deductible, coinsurance, prescription costs) reaches the out-of-pocket maximum, the plan pays 100% of covered expenses for the rest of the plan year.

Unlike the deductible, the out-of-pocket maximum apples to each covered person individually, up to the family maximum. Once each covered person meets his or her individual out-of-pocket maximum, the plan pays benefits at 100% for that person.

Remember: Only in-network expenses apply to the in-network out-of-pocket maximum, and only out-of-network expenses apply to the out-of-network out-of-pocket maximum.

You can open a Health Savings Account (HSA)

TRS does not administer an HSA, but some entities/districts participating in TRS-ActiveCare may. Check with your Benefits Administrator to find out if your entity/district offers an HSA. You may also open an account at a bank, credit union or other financial institution. Any money you contribute to your account reduces your taxable income and, therefore, the amount you pay in income taxes.

You can use your account to pay current and/or future qualified medical expenses.* You can also let balances accumulate for future needs, even those in retirement. Any amounts you use for qualified expenses are not taxed.

Your account balance rolls over year to year and earns interest. Once your balance reaches a certain amount (usually \$1,000 or \$2,000), you may start to invest.

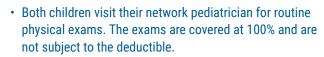
*For a list of qualified expenses, visit www.irs.gov (Publication 502) or call **1-800-829-3676**.



WHAT YOU PAY, WHAT THE PLAN PAYS

See the TRS-ActiveCare 1-HD Plan Highlights chart on pages 18-19.





- Joan woke up with what she thought might be a sinus infection. She called Teladoc and talked to a doctor, who diagnosed her with a sinus infection. The doctor called in a prescription to her network pharmacy. Joan paid \$40 for the Teladoc consultation and \$14 for her generic antibiotic. This \$54 will go toward reaching the plan deductible and out-of-pocket maximum.
- Joan has her annual preventive OB/GYN exam with a network doctor. The exam and Pap test are covered at 100% and are not subject to the deductible.
- Sam has high blood pressure. He takes daily medicine to keep it under control. Through his TRS-ActiveCare 1-HD plan, certain generic preventive medications are covered at 100% and are not subject to the deductible.
- Sam visits his primary care doctor for his routine physical checkup. The exam is preventive and covered at 100% and is not subject to the deductible.
- Sam fell while doing some chores around the house. He ended up breaking his leg in two places. His total in-network costs equaled \$6,480. Sam paid \$5,446 to meet the plan deductible. The plan paid 80% of the remaining charges of \$1,034 = \$827.20. Sam paid the remaining 20% of the costs: \$206.80. Since the deductible has been met for the family, any other incurred expenses will be paid at 80% by the plan.

Case Study: Griffin Family

Deductible	\$5,500 (family)
	, , ,
Covered expenses (for children)	\$560 (two routine physical exams)
Paid by plan (100%, no deductible)	\$560
Covered expenses (Joan)	\$54 (Teladoc visit and generic prescription)
Paid by Joan	\$54
Covered expenses (Joan)	\$325 (OB/GYN preventive exam and Pap test)
Paid by plan (100%, no deductible)	\$325
Covered expenses (Sam)	\$360 (annual generic preventive prescription)
Paid by plan (100%, no deductible)	\$360
Covered expenses (Sam)	\$425 (routine preventive physical)
Paid by plan (100%, no deductible)	\$425
Covered expenses (Sam)	\$6,480 (broken leg)
Paid by Sam	\$5,652.80 (deductible + 20% coinsurance)
Paid by plan (80% after deductible met)	\$827.20
Plan paid	\$2,497.20
Paid by Joan	\$54
Paid by Sam	\$5,652.80
Amount applied to deductible	\$5,500



How to fill your prescriptions

Where you can fill prescriptions depends on the type of medication you need, as described below:

Short-term medications: You can get up to a 31-day supply of medication used on a short-term basis at any Caremark retail network pharmacy. Find a participating pharmacy at www.caremark.com/trsactivecare. Be sure to take your Caremark ID card to the pharmacy.

Maintenance medications: These are taken on a regular basis for conditions such as high blood pressure, diabetes or high cholesterol. You have a choice of four ways to fill your prescription:

- Visit a Caremark Retail-Plus Pharmacy. Find one at www.caremark.com/ trsactivecare.
- Use the mail service. Get started with the mail service at www.caremark.com/ trsactivecare. Complete the order form for your first fill. Request refills online or use the order form that comes with your first fill. You can also use Caremark's copay installment program to break up the total cost of your prescription into three equal payments.
- Use Caremark's FastStart® tool at www.caremark.com/trsactivecare.
- · Call FastStart at 1-800-875-0867.

You can use any of the above to fill your prescription for a 60- to 90-day supply of maintenance medication.

Specialty medications: These are drugs used to treat complex conditions such as cancer or hemophilia. They may be injected, inhaled, infused or taken orally and may require special handling. You must use Caremark Specialty Pharmacy to fill these prescriptions.

Get started: Call CaremarkConnect toll-free at 1-800-237-2767 or sign in at www.caremark.com/trsactivecare to get started with Caremark Specialty Pharmacy.

Diabetic meter and supplies

If you have diabetes, you may qualify for a preferred brand blood glucose meter and long-term diabetic supplies (needles, syringes, alcohol swabs) at no cost to you. Here's how it works:

- Preferred brand glucose meter: Free. Contact Member Services Diabetic Meter Team at 1-800-588-4456.
- Short-term retail supplies: Coinsurance will be waived for needles and syringes only if you purchase them on the same day as insulin and the insulin is processed first.
- 90-day supply at a Retail-Plus Pharmacy or via mail service:
 Coinsurance will be waived for needles, syringes and alcohol swabs whether or not they are processed on the same day as the insulin and regardless of brand. To receive test strips and lancets at no cost, you must use the preferred brand. To find preferred brands, go to www.caremark.com/trsactivecare for the preferred drug list.

To learn more, contact the CVS Caremark Member Services Diabetic Meter Team at 1-800-588-4456.

Six ways to save on prescription drugs

- **1. ASK FOR GENERICS.** Ask your doctor if generics are available for the medications you already use and for new prescriptions. Generics can cost significantly less than their brand-name counterparts. They are also pharmaceutically and therapeutically equivalent to brand-name drugs.
- 2. SAVE WITH PREFERRED BRAND-NAME DRUGS. If a generic drug isn't available, ask your doctor to prescribe a brand-name drug from the preferred drug list. You'll find the list at www.caremark.com/trsactivecare.
- **3. REGISTER AT CAREMARK.COM.** We'll keep you up-to-date on new and unique ways to save.
- **4. USE THE CHECK DRUG COSTS TOOL.** Research drug costs based on your plan and prescription dosage online.

 Visit www.caremark.com/trsactivecare and look under

 Check Drug Costs for TRS-ActiveCare 1-HD Network Plan –

 Check Drug Cost.
- **5. FILL SHORT-TERM PRESCRIPTIONS AT A CAREMARK PHARMACY.** If you use a pharmacy that does not belong to the Caremark network, you'll generally pay more.
- 6. FILL MAINTENANCE MEDICATION PRESCRIPTIONS AT A CAREMARK RETAIL-PLUS PHARMACY OR USE THE MAIL SERVICE. You can save with a 90-day supply of your medication.



Create a healthier you





Simple Steps To A Healthier Life®

Improve your health one step at a time

Simple Steps To A Healthier Life is an online wellness program that helps you reach your goals at your own pace. You start by taking just 15 minutes to complete a health assessment that establishes your health profile and needs. Then you receive a health report with recommendations for online health coaching programs.

Each program is broken down into "journeys" that lead you step by step to goals, such as losing weight, quitting tobacco, eating healthier, managing a chronic condition and others. Read articles, view videos, take quizzes and more as you move toward your healthier self.

To get started: Link to your secure member website from www.trsactivecareaetna.com and select Stay Healthy>Complete your Assessment.

Aetna Health ConnectionsSM

Get expert help and support for chronic condition management

Work with registered nurses and other health care professionals to learn how to better manage your condition(s) and enjoy better overall health. Aetna Health Connections covers more than 30 conditions, including asthma, high blood pressure, diabetes, heart disease and others. You'll get coaching, monitoring and motivation to stay on track with treatments, medications and healthy habits.

To get started: Link to your secure member website from www.trsactivecareaetna.com and select Stay Healthy>Health Programs.

Aetna Care Advocate Team (CAT)

Find your way around the health care system

Health care can be complicated. With the Aetna Care Advocate Team (CAT), you have help from trained nurses to navigate the system and better understand conditions, terminology, treatments and procedures. If you or a family member needs complex care, CAT can help with coordination of services.

To reach CAT: Call 1-800-222-9205.

Aetna Maternity Program

Give your baby a healthy start in life

This program puts you in touch with an obstetrically trained nurse who can provide information and support for a healthier pregnancy, delivery and baby. When you join, you'll receive:

- A pregnancy risk survey
- A pregnancy handbook
- A personalized smoking-cessation program
- Information for dad or partner

To get started: Call 1-800-272-3531. Or link to your secure member website at www.trsactivecareaetna.com and select Stay Healthy>Health Programs.

Navigate Wellness Live Healthy Challenge

Take the challenge and win prizes!

Live Healthy America is an eight-week challenge sponsored by TRS-ActiveCare and Aetna. When you join, you'll set goals, take part in team activities and track your progress to win prizes for your team or school. You can participate as part of a team or as an individual.

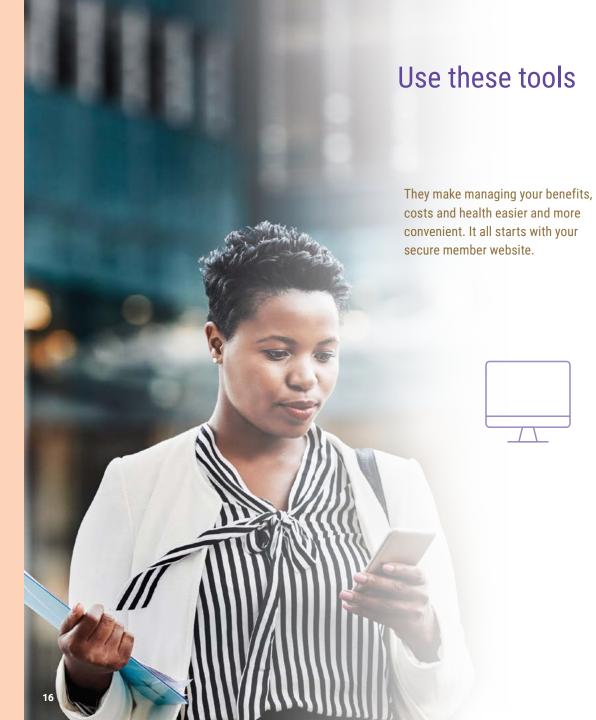
To learn more: Go to www.trsactivecareaetna.com and click Live Healthy America.





GET BABY STARTED WITH TRS-ACTIVECARE 1-HD

Your plan automatically covers your newborn for the first 31 days after birth. You must actively enroll your baby within 31 days of his or her date of birth. Contact your Benefits Administrator to enroll your newborn.



Register with your secure member website

Here's how:

- 1. Have your Aetna member ID card ready.
- **2.** Visit www.trsactivecareaetna.com and click Register on Aetna Navigator.
- **3.** On the welcome screen, click Register next to First-time users.
- **4.** Fill in the information requested, then click Continue to create your login.





· check on a claim,

of time,

• get a snapshot of plan benefits,

• take the health assessment, and

• get started with your Aetna discounts.

• use the Member Payment Estimator to see costs for care ahead



Click Contact Us at the top of any page to email Aetna Member Services.



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TRS-ActiveCare 1-HD Plan Highlights



An overview of plan benefits and costs.

TYPE OF SERVICE	NETWORK (YOU PAY)	NON-NETWORK (YOU PAY)
Deductible (per plan year)	\$2,750 employee only \$5,500 family	\$5,500 employee only \$11,000 family
Out-of-Pocket Maximum (per plan year; includes medical deductible/any medical copays/coinsurance/any prescription drug deductible and applicable copays/coinsurance)	\$6,650 individual \$13,300 family (the individual out-of-pocket maximum only includes covered expenses incurred by that individual)	\$13,300 individual \$26,600 family (the individual out-of-pocket maximum only includes covered expenses incurred by that individual)
Doctor Office Visits	20% after deductible	40% after deductible
Preventive Care (see the Benefits Booklet at www.trsactivecareaetna.com for a list of preventive services)	Plan pays 100% (deductible waived)	40% after deductible
Teladoc Physician Services	\$40 consultation fee (applies to deductible and out-of-pocket maximum)	Not applicable
Diagnostic Lab	20% after deductible	40% after deductible
High-Tech Radiology (CT scan, MRI, nuclear medicine)	20% after deductible	40% after deductible
Inpatient Hospital (facility charges)	20% after deductible (preauthorization required)	40% after deductible (preauthorization required)
Inpatient Hospital (physician/surgeon fees)	20% after deductible	40% after deductible
Outpatient Surgery	20% after deductible	40% after deductible
Bariatric Surgery (physician charges; only covered if performed at an Institutes of Quality® facility)	\$5,000 copay plus 20% after deductible (does apply to out-of-pocket maximum)	Not covered
Ambulance (true emergency use)	20% after deductible	Same as network
Emergency Room (true emergency use)	20% after deductible	Same as network
Freestanding Emergency Room (true emergency use)	Participant pays \$500 copay per visit plus 20% after deductible	Same as network

TYPE OF SERVICE	NETWORK (YOU PAY)	NON-NETWORK (YOU PAY)
Urgent Care	20% after deductible	40% after deductible
Maternity Care (physician charges; does not include laboratory tests; hospital/facility charges are covered same as inpatient hospital facility charges)	Initial Visit to Confirm Pregnancy 20% after deductible Routine Prenatal Care Plan pays 100% (deductible waived)	Prenatal/Delivery/Postnatal Care 40% after deductible
	Delivery/Postnatal Care 20% after deductible	
Mental Health/Behavioral Health/Substance Abuse Disorders	Outpatient Services 20% after deductible Inpatient Services 20% after deductible (preauthorization required)	Outpatient Services 40% after deductible Inpatient Services 40% after deductible (preauthorization required)
Prescription Drugs Drug deductible (per plan year)	Subject to plan-year deductible	Same as network
Retail Short Term (up to 31-day supply) Generic* Brand (preferred list) Brand (non-preferred list)	20% after deductible 20% after deductible 50% after deductible	You will be reimbursed the amount that would have been charged by a network pharmacy, less the required deductible and coinsurance
Retail Maintenance (after first fill, up to 31-day supply) Generic* Brand (preferred list) Brand (non-preferred list)	20% after deductible 20% after deductible 50% after deductible	You will be reimbursed the amount that would have been charged by a network pharmacy, less the required deductible and coinsurance
Mail Order and Retail-Plus (60- to 90-day supply)** • Generic* • Brand (preferred list) • Brand (non-preferred list)	20% after deductible 20% after deductible 50% after deductible	Not applicable
Specialty Drugs (up to 31-day supply)	20% after deductible	Not applicable

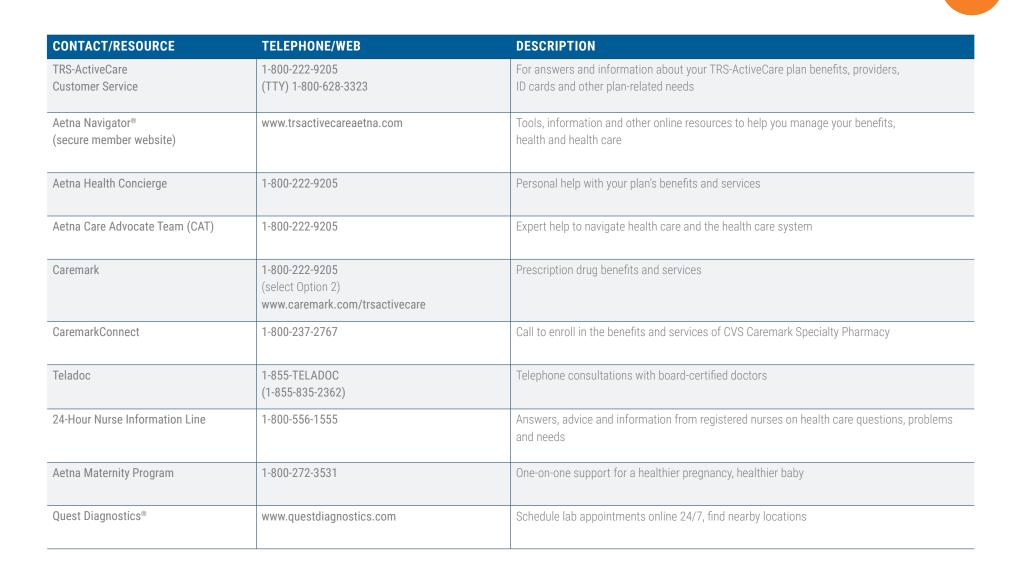
^{*}Deductible and coinsurance waived for certain generic preventive drugs; to view the list, go to www.trsactivecareaetna.com/coverage.

^{**}Participants can fill 32- to 90-day supply through mail service.





Contacts for help and information



NOTICE OF NON-DISCRIMINATION AND AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES

DISCRIMINATION IS AGAINST THE LAW

The Teacher Retirement System of Texas (TRS) complies with applicable Federal civil rights laws and does not discriminate or exclude people on the basis of race, color, national origin, age, disability, or sex. TRS provides free aids and services, such as: written information in other formats (large print, audio, accessible electronic formats, other formats), qualified interpreters (including sign language interpreters), and written information in other languages.

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

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

MAIL: Section 1557 Coordinator

1000 Red River Street, Austin, Texas, 78701

FAX: 512-542-6575

EMAIL: section1557coordinator@trs.texas.gov

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

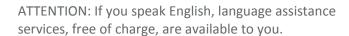
ONLINE: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

MAIL: U.S. Department of Health and Human Services

200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201

PHONE: 1-800-368-1019, 800-537-7697 (TDD)



CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان.

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں ۔

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

यान द: यदद आप ह दी बोलते ह तो आपके ललए मु त म भाषा सहायता सेवाएं उपल ध ह।

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.

સચુ ના: જો તમે ગજુ રાતી બોલતા હો, તો નન:શુ ક ભાષા સહાય સેવાઓ تتو افر لك بالمجان. تتو افر لك بالمجان.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

注意事項:日本語を話される場合、無料の言語支援をご利用い ただけます。

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍ ເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ ທ່ານ.

This guide provides an overview of the tools and resources available under the TRS-ActiveCare 1-HD Plan. For a detailed description of your program, see your TRS-ActiveCare Benefits Booklet. The Benefits Booklet is available online at www.trsactivecareaetna.com and is the official TRS-ActiveCare statement on benefits. TRS-ActiveCare benefits will be paid according to the Benefits Booklet and other legal documents governing the program.

TRS-ActiveCare is administered by Aetna Life Insurance Company. Aetna provides claims payment services only and does not assume any financial risk or obligation with respect to claims. Prescription drug benefits are administered by Caremark.

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