

RESOURCE GUIDE

SEE HOW YOU CAN STAY HEALTHY,
AND SAVE MONEY

Follow the Path to Better Health With Your
2019-20 TRS-ActiveCare Select Whole Health Plan

Start Here to Explore Plan Resources

Your TRS-ActiveCare Select Whole Health Plan has a lot to offer for better health, convenience and savings. Follow along in this guide to review how the plan works, find great ways to save on health care and learn how to fill prescriptions with CVS Caremark®.

Wherever you are and wherever you're going, your TRS-ActiveCare Select Whole Health Plan is here to help.

Get in Touch

TRS-ActiveCare Select Whole Health Plan

1-800-222-9205 – TRS-ActiveCare Customer Service

711 – TTY number

When you call, select:

Option 1: Aetna (medical) Monday through Friday, 8 a.m.-8 p.m. CT

Option 2: CVS Caremark (prescription drug) 24 hours a day, 7 days a week

HOW TO FIND WHAT YOU ARE LOOKING FOR

Want to get to a topic quickly? Click on

- Table of Contents section
- Navigation arrows (at the bottom of each page)
- Home icon on each page to go back to Table of Contents
- Web addresses

You'll get moved to that section, page or website automatically.

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10 GREAT TIPS

for getting the most from your health plan and saving on health care costs



Who Pays?

Because TRS-ActiveCare is a self-funded plan, TRS funds medical and pharmacy claims for participants. Aetna and CVS administer the plan and pay claims. When you take steps to save on health care, TRS saves too. This helps keep everyone's costs under control.

1. KNOW YOUR BENEFITS

Download and use the TRS Health mobile app to see how you and your plan share costs. You can view benefits and use other great features, like TRS Virtual Health and the 24-Hour Nurse Information Line, from the convenience of your home or wherever you go.

2. CHOOSE A PCP

Your primary care physician (PCP) is your partner for better health. If you don't already have a PCP, consider making this vital connection. Your PCP is your health and wellness ally, helping you catch or prevent illness and navigate the health care system.

Find a PCP: Use the TRS Health app or go to www.trsactivecare.aetna.com and click "Find a Doctor or Facility" on the home page. 

3. STAY IN-NETWORK FOR CARE


To receive benefits from your TRS-ActiveCare Select Whole Health plan, you must use doctors, hospitals and other care providers that belong to the Select Whole Health network. If you go outside the network for care, you will pay the entire cost of your care, except in the case of a true medical emergency.

Find in-network providers: Use the TRS Health app or go to www.trsactivecare.aetna.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.


4. KNOW WHERE TO GO

- Visit your PCP for preventive and basic care.
- Avoid the hospital ER unless for life-threatening emergencies.
- Visit your PCP, an urgent care center or a walk-in clinic for non-emergency care.
- Use freestanding lab and imaging facilities instead of hospitals and doctor's offices for lab work and imaging.
- Avoid freestanding emergency rooms for non-emergency care (see page 5).

5. SAVE ON YOUR PRESCRIPTIONS

Ask your doctor or pharmacist for generic drugs when available. If no generic is available, ask about lower-cost alternatives for the drugs you use. Use the mail-order service or Retail-Plus for drugs you take regularly. Know and compare costs ahead of time with the drug cost estimator at www.caremark.com/trsactivecare and on the TRS Health app. 

6. RESEARCH COSTS

The cost estimator tool lets you compare costs for treatments, procedures and tests among up to 10 in-network providers. To use the tool, link to your secure member website from www.trsactivecareatna.com or the TRS Health app then select See Coverage & Costs>Estimate Costs. 

7. SAVE ON ADVANCED SCANS

USIN, our advanced imaging benefits provider, can help you save up to \$500 or more (per scan) on MRIs, CTs and PET scans.

How it works: Once your doctor submits your imaging request to Aetna and the image is preauthorized, the USIN concierge desk will call you within 24 hours if a lower-cost alternative is available. USIN also will set up your appointment at a convenient date, time and location.

8. USE TRS VIRTUAL HEALTH


With the Virtual Health general medicine services, you can talk with a doctor via phone or video chat 24/7. Doctors can listen, diagnose, treat and prescribe, all at no cost for you. Call when you need help with non-emergency problems such as colds/flu, earaches, headaches, pink eye and more. **New mental health services are now available by appointment. See page 6 for more on this new service.**

Get started: Register in advance at www.teladoc.com/trsactivecare, or call **1-855-TELADOC (1-855-835-2362)**. When you need a consult, just go online or call the toll-free number.

9. USE YOUR MEMBER DISCOUNTS

Take advantage of your Aetna® members-only discounts to save on:

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

Get started: Link to your member website on the TRS Health app or at www.trsactivecareatna.com and select Stay Healthy>Discounts on your home page. 

10. STAY INFORMED

Online resources at www.trsactivecareatna.com and www.aetna.com offer a wealth of health, wellness and benefits information. For quick answers and help, call TRS-ActiveCare Customer Service at **1-800-222-9205** to talk with an Aetna Health Concierge. Stay up to date on TRS-ActiveCare news by subscribing to *The Pulse for TRS-ActiveCare*, the TRS health care newsletter. Visit www.trs.texas.gov and click "Subscribe!"



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 clinic. In case of 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.

NEW TRS VIRTUAL HEALTH SERVICES

More care, more support for you and your family



Your TRS benefits include two new telemedicine services from Teladoc. Now you can take advantage of convenience and affordable rates for:

Mental Health Consults – Confidential Therapy on Your Terms

Taking care of your mental health is an important part of your overall well-being. With this new service, adults 18 and older can get care for depression, anxiety, stress, grief and more. Choose to see a psychiatrist, psychologist, social worker, or therapist and establish an ongoing relationship. The cost for this service is \$70 per consult. Appointments must be scheduled in advance and are only available through video conference via a computer, smart phone or tablet.

Scheduling a visit with a psychiatrist or therapist is easy and convenient. You can make an appointment seven days a week, from 7 a.m. to 9 p.m. local time. Appointments are confirmed within 48 hours. You can schedule your video appointment online, www.teladoc.com/trsactivecare, or via the Teladoc app.



Giving Your Family a Hand

When caring for a loved one, you have enough to worry about. This service gives you a convenient and affordable way to provide care, letting you arrange a two- or three-way video or phone visit with a doctor 24/7 for general medical consults. The cost for this service is \$45 per consult. Add the individual you care for to your Teladoc account, even if they're not covered by your health plan. Eligible care recipients include adult children (age 18+), someone you have legal guardianship over, a spouse or elderly parents.

To add your loved one to your account and request a visit, just follow these steps:

- **Add a Care Recipient**
Log into your account by web or app and click "Add a Care Recipient."
- **Authorization**
Teladoc will email the care recipient an agreement for authorization that states the caregiver can participate in, and facilitate, all aspects of the care provided by Teladoc. You will be allowed to upload legal documents.
- **Fill Out the Health History**
Health history can be completed by caregiver or care recipient.
- **Request Visit**
Caregiver or care recipient schedules a visit by web or app.

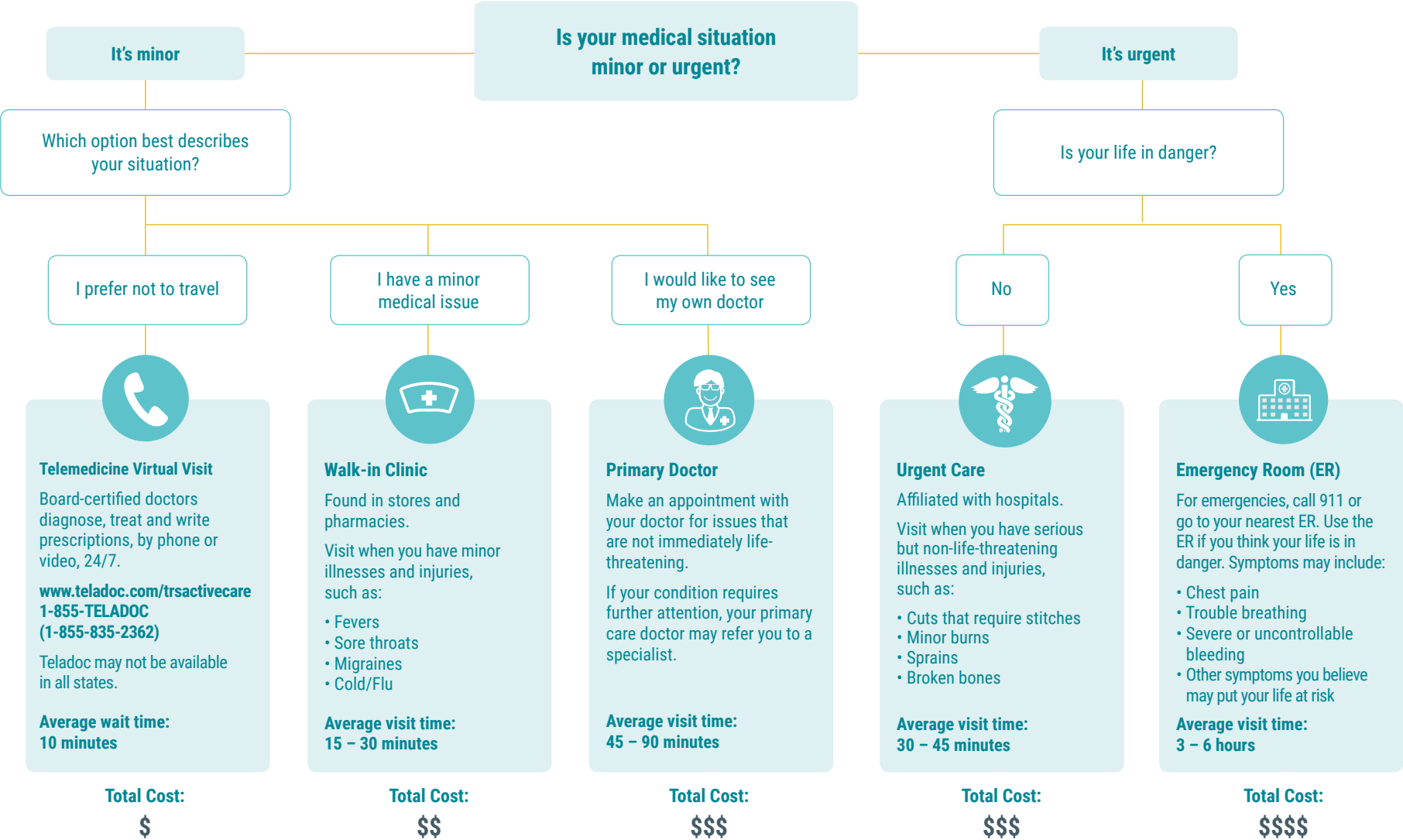


 Teladoc.com/TRSActiveCare   Download the app

 **1-855-Teladoc (835-2362)**

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 getting the right level of care at the right place for the lowest cost.



NEED HELP DECIDING? Call the 24-Hour Nurse Information Line at **1-800-556-1555** to talk with a nurse who can guide you through your care options.

KNOW HOW YOUR PLAN WORKS



Preventive Care Is Covered at 100%

Preventive services 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 on the TRS Health app or at www.trsactivecare.aetna.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.

Get to know how the plan works before you need care.

Need help? Call your Aetna Health Concierge at **1-800-222-9205** for answers to benefits and wellness questions. Learn how a claim was paid, get help to find the right care and much more.





Benefits are Paid for In-Network Care Only

TRS-ActiveCare Select Whole Health is a network-only plan. To receive benefits from the plan, you must use in-network providers. If you seek care outside the network, you will pay all billed charges out of your own pocket, except in the case of a true emergency.

You and your covered dependents (including those who live temporarily or permanently outside the network area) must receive care from Select Whole Health network providers. Your TRS-ActiveCare medical ID card shows the name of your Select Whole Health network.

For true emergencies, the plan will cover care received from an out-of-network provider.



You Meet the Deductible Each Year

You pay medical and non-preventive services out of your own pocket until you meet the deductible. The deductible applies to all covered expenses EXCEPT in-network routine preventive care and doctor's office visits.

- **If you have employee-only coverage**, you must meet the individual deductible before the plan begins to pay claims.
- **If you have family coverage**, three or more family members can combine expenses to meet the family deductible. Once the family deductible is reached, all family members are considered to have met the deductible.

A True Medical Emergency is the sudden and unexpected onset of a change in a person's physical or mental condition which, if care is not given immediately, could (as determined by Aetna) reasonably be expected to result in serious illness or death.



You Pay a Share of Expenses

Once the deductible is met, the plan pays a percentage of your covered expenses, and you pay a percentage (coinsurance).

You Pay a Flat Fee (Copay) for Office Visits

For most in-network doctor's office visits used for diagnosis and treatment (non-preventive care) with your PCP or specialists, you pay a flat dollar amount, called a copay. Deductible and coinsurance do not apply.

You're Protected from High Out-of-Pocket Costs

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

The out-of-pocket maximum applies 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.

About the Select Whole Health Network

The Select Whole Health network is a local accountable care network that includes doctors, nurses and other providers dedicated to keeping you and your family healthy. These providers belong to your care team, led by your network PCP.

Your PCP provides preventive, routine and basic care. If you need specialty or other types of care, your PCP will refer you to the appropriate network provider(s). Your care team shares information and coordinates services, so everyone is familiar with your treatments, medications, lab results, health history and more. It's a better approach to care, one that is focused on wellness as much as illness.

WHAT YOU PAY, WHAT THE PLAN PAYS:

SEE THE TRS-ACTIVECARE SELECT WHOLE HEALTH PLAN HIGHLIGHTS CHART ON PAGES 18-19.



How to Get the Most Out of Your TRS-ActiveCare Select Whole Health Plan

The chart on the right shows how the health plan works for the Wilsons. Tom and Mary are an empty nester couple. They live in Harris County and are enrolled in the TRS-ActiveCare Select Whole Health plan. Since they live in a local accountable care network area – Memorial Hermann Accountable Care Network – they will only see providers who belong to this network.

- Tom has a chronic condition and visits his primary care physician three times a year for follow-up care. After Tom pays his **\$30** copay per visit, the plan pays **100%**, not subject to the deductible.
- Tom takes two long-term prescription medications on a daily basis. He takes advantage of the plan's mail-order pharmacy. Tom pays **\$45** per prescription for a 90-day supply. By using this service, he saves money and time.
- Mary believes she has pink eye. She calls Teladoc® and talks to a doctor, who diagnoses her with an eye infection. The doctor calls in a prescription to her network pharmacy. Mary pays **\$15** for her generic medication. The plan pays the Teladoc consult fee at **100%**.
- Mary has her annual preventive OB/GYN exam with a Memorial Hermann network gynecologist. The exam and Pap test are covered at 100%, not subject to the deductible.
- Mary has an outpatient surgery. The care is coordinated through her care team from the Memorial Hermann Accountable Care Network. She pays her deductible (\$1,200) and a \$150 copay before the plan pays 80% (\$1,492) of the cost. Mary is responsible for the remaining 20% (\$373) of the network negotiated cost.

Case Study: Tom and Mary Wilson

Deductible	\$1,200 (individual); \$3,600 (family)
Covered expenses (Tom)	\$425 (three primary care doctor visits)
Paid by Tom	\$90 (\$30 primary copay per visit)
Paid by plan (100% after copays, no deductible)	\$335
Covered expenses (Tom)	\$1,800 (two annual generic prescriptions)
Paid by Tom	\$360 (copays for mail-order generic prescriptions)
Paid by plan (100% after copays, no deductible)	\$1,440

Covered expenses (Mary)	\$160 (Teladoc consult and generic prescription)
Paid by Mary	\$15 (copay for prescription)
Paid by plan (100% after copay, no deductible)	\$145
Covered expenses (Mary)	\$325 (OB/GYN preventive exam and Pap test)
Paid by plan (100%, no deductible)	\$325
Covered expenses (Mary)	\$3,200 (outpatient surgery)
Paid by Mary	\$1,708 (\$1,185 to meet deductible; \$150 copay; \$373 coinsurance)
Paid by plan (80% after copay and deductible)	\$1,492

Plan paid	\$3,737
Paid by Tom	\$450
Paid by Mary	\$1,723

Amount applied to deductible	\$1,200 (Mary met her deductible) \$450 (Tom deductible)
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FILL PRESCRIPTIONS WITH CVS CAREMARK





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 CVS Caremark retail network pharmacy. Find a participating pharmacy at www.caremark.com/trsactivecare. Be sure to take your CVS 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.

- Use the mail-order service, CVS Caremark Mail Service pharmacy. You can order up to a 90-day supply of your medication and have it delivered to any address you provide. You can pay via credit card, check or money order. To learn more about the service, visit www.caremark.com/trsactivecare or use the TRS Health app. 
- Use the copay installment program, which will allow you to break up the total amount due for your 90-day supply prescription order into three equal monthly payments.
- Visit a CVS Caremark Retail-Plus pharmacy. Retail pharmacies that participate in the Retail-Plus network can dispense a 60- to 90-day supply of your medication. To find Retail-Plus pharmacies near you, visit www.caremark.com/trsactivecare, use the TRS Health app or call TRS-ActiveCare Customer Service at **1-800-222-9205** and select option 2. 

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 CVS Caremark Specialty pharmacy to fill these prescriptions.


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

Your prescription drug benefits are shown in the TRS-ActiveCare Select Whole Health Plan Highlights chart on pages 18-19. You must meet the brand-name deductible each year before benefits are paid for brand-name prescription drugs. The deductible does not apply to generic drugs.



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 through CVS Caremark. 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.
- **90-day supply at a Retail-Plus Pharmacy or via mail service:** Coinsurance will be waived for needles and syringes 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 use the TRS Health app or go to **www.caremark.com/trsactivecare** for the preferred drug list. 

To learn more about diabetic equipment and coverage, contact the CVS Caremark Member Services Diabetic Meter Team at **1-800-588-4456**.

Your Aetna plan pays 80% after the deductible for blood glucose monitors and insulin infusion pumps from a network provider. The coverage includes external insulin infusion devices and supplies such as:

- Adhesive supplies
- Batteries
- Cartridges
- Infusion sets
- Skin preparations
- Other disposable supplies needed to maintain insulin infusion pump therapy
- Durable and disposable devices used to help in the injection of insulin

If you have questions about your Aetna plan coverage, call TRS-ActiveCare Customer Service at **1-800-222-9205** to talk with an Aetna Health Concierge.

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** or use the TRS Health app. 
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** or use the TRS Health app and look under Check Drug Costs for TRS-ActiveCare Select Whole Health Network Plan – Check Drug Cost. 
5. **Fill short-term prescriptions at a CVS Caremark pharmacy.** If you use a pharmacy that does not belong to the CVS Caremark network, you'll generally pay more.
6. **Fill maintenance medication prescriptions at a CVS Caremark Retail-Plus Pharmacy or use the mail-order service.** You can save with a 90-day supply of your medication.

A GOOD FIT

Health and wellness resources make your TRS-ActiveCare Select Whole Health Plan a perfect fit for your life and your goals.



No-cost programs and services make it possible

Your TRS-ActiveCare Select Whole Health Plan includes resources to fit a variety of health and wellness needs and goals.



Create a Healthier You, with:

The Navigate Wellness Live Healthy Challenge, an eight-week challenge sponsored by TRS-ActiveCare and Aetna. Set goals, work as a team or as an individual, and track your progress to win prizes.

Learn more: Go to www.trsactivecare.aetna.com and click Live Healthy America.

Simple Steps To A Healthier Life®, an online wellness program that helps you reach goals such as losing weight, quitting tobacco, eating healthier and more – at your own pace. Start by taking the health assessment to create your health profile and identify needs. Then choose “journeys” that break down your goals into steps you can take each day to live healthy.

Get started: Link to your secure member website from the TRS Health app or at www.trsactivecare.aetna.com and select Stay Healthy>Complete your Assessment.



Get One-on-One Coaching and Support, with:

Aetna Health Connections™, for help to manage one or more chronic conditions. The program supports more than 30 conditions, including asthma, high blood pressure, diabetes, heart disease and others. When you join, you’ll work with registered nurses and other health care professionals who can help you stay on track with your treatment and medication regimen and make healthy lifestyle changes.

Get started: Link to your secure member website from the TRS Health app or at www.trsactivecare.aetna.com and select Stay Healthy>Health Programs.



The Aetna Care Advocate Team (CAT), a group of trained nurses who can guide you through the health care system. Learn more about medical conditions, know what medical terms mean, understand procedures and treatments. CAT can also help coordinate services if you or a family member needs complex care.


Call CAT: 1-800-222-9205



Get Your Baby Off to a Healthy Start, with:

The Aetna Maternity Program, providing information and support for expecting moms and their babies. When you join, you'll be in touch with an obstetrically trained nurse who can answer questions, send information and address concerns as you prepare to welcome your new baby. The program also features:

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

Get started: Call **1-800-272-3531**. Or link to your member website from the TRS Health app or at www.tractivecareetna.com and select Stay Healthy>Health Programs. 

The Maternity Support Center, support that spans the pregnancy journey. Now there's a great online resource if you are pregnant, a new mom or just thinking about it. With all the pregnancy articles and advice out there, you can take comfort in one source for health and benefits information. You can find:

- Coverage details
- Pre-pregnancy checklists
- Baby-care tips

Plus videos, breastfeeding support, postpartum resource and more.

Get started: Link to your secure member website from the TRS Health app or at www.tractivecareetna.com and select Stay Healthy>Maternity Support Center. 

Get baby started with TRS-ActiveCare Select Whole Health

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.



YOUR PLAN, YOUR WAY



It's easy to manage your benefits, costs and health wherever and whenever you like.

The TRS Health app puts everything you need in one place. Use Teladoc, contact the Aetna Concierge, manage your prescriptions, find an in-network doctor, access wellness resources, show your ID card, look up benefit contacts and more.

Download the app from the app store on your mobile device, then click "Create Account" and follow the directions **to get started**.



Welcome TRS-ActiveCare Plan Participants!

This website provides an overview of the TRS-ActiveCare plans. You can learn how the plans work. Try out helpful tools. Get up-to-date, personal plan information.

If you need help, we're always just a phone call away. Call TRS-ActiveCare Customer Service at 1-800-222-9205 and speak to an Aetna Health Concierge.

Bulletin Board

ON THE ROAD TO ANNUAL ENROLLMENT

NAVIGATING YOUR 2019-20 BENEFITS

Enrollment Period: July 1 to Aug. 23, 2019

Secure Member Website
Register on Aetna Navigator

Find a Doctor or Facility

ALEX Your benefits counselor

Obtain a Temporary ID Card

Live Healthy America

Teladoc
Talk to a Doctor 24/7
Call 1-855-835-2362

Having a Baby?

Your Secure Member Website, Navigator, is your benefits and wellness home base. Once you register, you can log in any time to:

- Confirm covered family members
- View and print your ID card
- Find in-network providers
- Check on a claim
- View plan benefits highlights
- Research costs
- Take the health assessment
- Get started with Aetna member discounts

If you have questions or need help, you can click "Contact us" at the top of any page to email Aetna Member Services.

Register with your member website at www.tractivecare.aetna.com. Click "Register on Aetna Navigator" then click "Register" next to "First-time users." Follow the prompts to fill in the information requested, then click "Continue" to create your login.

TRS-ACTIVECARE SELECT WHOLE HEALTH PLAN HIGHLIGHTS

An overview of plan benefits and costs



Type of Service	In-Network (you pay)	Out-of-Network (you pay)
Deductible (per plan year)	\$1,200 individual \$3,600 family	Not applicable; no coverage for out-of-network services
Out-of-Pocket Maximum (per plan year; includes medical deductible/any medical copays/coinsurance/any prescription drug deductible and applicable copays/coinsurance)	\$7,900 individual \$15,800 family	Not applicable; no coverage for out-of-network services
Doctor Office Visits	\$30 copay for primary \$70 copay for specialist	Not covered
Preventive Care (see the Benefits Booklet at www.trselectivecareetna.com for a list of preventive services)	Plan pays 100% (deductible waived)	Not covered
TRS Virtual Health Services (see page 6 for more details)	Physician Services Plan pays 100% (deductible waived) Mental Health Services \$70 copay for specialist	Physician Services Not applicable Mental Health Services Not applicable
Diagnostic Lab	20% after deductible (Kelsey Select — plan pays 100%)	Not covered
High-Tech Radiology (CT scan, MRI, nuclear medicine)	\$100 copay per service plus 20% after deductible	Not covered
Inpatient Hospital (facility charges)	\$150 copay per day plus 20% after deductible (\$750 maximum copay per admission; preauthorization required)	Not covered
Inpatient Hospital (physician/surgeon fees)	20% after deductible	Not covered
Outpatient Surgery	\$150 copay per visit plus 20% after deductible	Not covered
Bariatric Surgery (physician charges; only covered if performed at an Institutes of Quality® facility)	Not covered	Not covered
Ambulance (true emergency use)	20% after deductible	Same as network
Emergency Room (true emergency use)	\$250 copay per visit plus 20% after deductible (copay waived if admitted)	Same as network
Freestanding Emergency Room (true emergency use)	\$500 copay per visit plus 20% after deductible	Same as network

Type of Service	In-Network (you pay)	Out-of-Network (you pay)
Urgent Care	\$50 copay per visit	Not covered
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 \$30 copay Routine Prenatal Care Plan pays 100% (deductible waived) Delivery/Postnatal Care 20% after deductible	Prenatal/Delivery/Postnatal Care Not covered
Mental Health/Behavioral Health/Substance Abuse Disorders (telemedicine mental health services are available – see page 18 for consultation fees)	Outpatient Services \$70 copay for specialist Inpatient Services \$150 copay per day plus 20% after deductible (\$750 maximum copay per admission; preauthorization required)	Outpatient Services Not covered Inpatient Services Not covered
Prescription Drugs Drug deductible (per plan year)	\$0 generic; \$200 brand	Same as network
Retail Short Term (up to 31-day supply) Tier 1 – Generic Tier 2 – Preferred Brand Tier 3 – Non-Preferred Brand	\$15 copay 25% coinsurance (min. \$40 ¹ ; max. \$80) ² 50% coinsurance ²	You will be reimbursed the amount that would have been charged by a network pharmacy, less the required deductible and coinsurance
Extended-Day Supply at Mail Order or Retail-Plus Pharmacy Location (60- to 90-day supply) ³ Tier 1 – Generic Tier 2 – Preferred Brand Tier 3 – Non-Preferred Brand	\$45 copay 25% coinsurance (min. \$105 ¹ ; max. \$210) ² 50% coinsurance ²	Not applicable
Specialty Drugs (up to 31-day supply)	20% coinsurance per fill	Not applicable
Short-Term Supply of a Maintenance Medication at Retail Location (up to 31-day supply) The second time a participant fills a short-term supply of a maintenance medication at a retail pharmacy, they will pay a convenience fee. They will be charged the copays and coinsurance in the row below the second time they fill a short-term supply of a maintenance medication. Participants can avoid paying the convenience fee by filling a larger day supply of a maintenance medication through mail order or at a Retail-Plus location.		
Tier 1 – Generic Tier 2 – Preferred Brand Tier 3 – Non-Preferred Brand	\$30 copay 25% coinsurance (min. \$60 ¹ ; max. \$120) ² 50% coinsurance ²	You will be reimbursed the amount that would have been charged by a network pharmacy, less the required deductible and coinsurance

¹If the cost of the drug is less than the minimum, you will pay the cost of the drug.

²If a participant obtains a brand-name drug when a generic equivalent is available, they are responsible for the generic copay plus the cost difference between the brand-name drug and the generic drug.

³Participants can fill 32- to 90-day supply through mail order.

CONTACTS FOR HELP AND INFORMATION



CONTACT/RESOURCE	TELEPHONE/WEB	DESCRIPTION
TRS-ActiveCare Customer Service	1-800-222-9205 711 (TTY)	For answers and information about your TRS-ActiveCare plan benefits, providers, ID cards and other plan-related needs
Aetna Navigator® (secure member website)	www.trsactivecare.aetna.com	Tools, information and other online resources to help you manage your benefits, health and health care
Aetna Health Concierge	1-800-222-9205	Personal help with your plan's benefits and services
Aetna Care Advocate Team (CAT)	1-800-222-9205	Expert help to navigate health care and the health care system
CVS Caremark	1-800-222-9205 (select option 2) www.caremark.com/trsactivecare	Prescription drug benefits and services
CVS CaremarkConnect	1-800-237-2767	Call to enroll in the benefits and services of CVS Caremark Specialty pharmacy
TRS Virtual Health	1-855-TELADOC (1-855-835-2362) www.teladoc.com/trsactivecare	Virtual consultations with board-certified doctors
24-Hour Nurse Information Line	1-800-556-1555	Answers, advice and information from registered nurses on health care questions, problems and needs
Aetna Maternity Program	1-800-272-3531	One-on-one support for a healthier pregnancy, healthier baby



NOTICES



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, TX 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, 1-800-537-7697 (TDD)**

ATTENTION: If you speak English, language assistance services, free of charge, are available to you.

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 दः 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 તમારા માટે ઉ પલ ધ છ.

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。

ປັດລຸນາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ.

TEACHER RETIREMENT SYSTEM OF TEXAS NOTICE OF PRIVACY PRACTICES

The Teacher Retirement System of Texas (TRS) administers your health benefits plan and your pension plan pursuant to federal and Texas law. This notice is required by the Privacy Regulations adopted pursuant to the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) as amended by the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH).

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review this notice carefully. This notice also sets out TRS' legal obligations concerning your health information. Additionally, this notice describes your rights to control your health information.

Federal law requires TRS to maintain and protect the privacy of your health information. Your protected health information is individually identifiable health information, including genetic information and demographic information, collected from you or created or received by TRS that relates to:

- your past, present or future physical or mental health or condition;
- the health care you receive; or
- the past, present or future payment for the provision of health care for you.

Unsecured protected health information is protected health information that is not secured through the use of a technology or methodology that renders the protected health information unusable, unreadable or indecipherable.

The effective date of this notice was April 14, 2003 and has been revised effective June 10, 2017.

Texas law already makes your member information, including your protected health information, confidential. Therefore, following the original implementation of this notice and the implementation of this notice as revised, TRS did not and is not changing the way that it protects your information. On April 14, 2003, the new rights and other terms in this notice, as originally drafted, automatically applied. Likewise, as subsequently revised, the rights and other terms of this notice continue to automatically apply. You do not need to do anything to get privacy protection for your health information.

Federal law requires that TRS provide you with this notice about its privacy practices and its legal duties regarding your protected health information. This notice explains how, when, and why TRS uses and discloses your protected health information. By law, TRS must follow the privacy practices that are described in the most current privacy notice.

TRS reserves the right to change its privacy practices and the terms of this notice at any time. Changes will be effective for all of your protected health information that TRS maintains. If TRS

makes an important change that affects what is in this notice, TRS will mail you a new notice within 60 days of the change. This notice is on the TRS website, and TRS will post any new notice on its website at www.trs.texas.gov.

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).

- **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 following noted below.** This notice does not contain all of 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.
 - **For treatment.** TRS is not a medical provider and does not directly participate in decisions about what kind of health treatment you should receive. 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.
 - **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 received, and why you received those services. The second example is that TRS could use or disclose your protected health information to collect your premium payments.
 - **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 in order 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 received. Another example of health care operations is TRS using and sharing this information to manage its business and perform its administrative activities.

- 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 are entitled to a disability retirement. TRS may disclose your protected health information:
 - To a federal or state criminal law enforcement agency that asks for the information for a law enforcement purpose;
 - 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;
 - To the Texas Attorney General to collect child support or to ensure health care coverage for your child;
 - In response to a subpoena if the TRS Executive Director determines that you will have a reasonable opportunity to contest the subpoena;
 - 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;
 - 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, (ii) other government regulatory programs, and (iv) compliance with civil rights laws;
 - To a public health authority for the purpose of preventing or controlling disease; and
 - If required by other federal, state, or local law.
- 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.
- 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. For example, several companies assist TRS with the TRS-Care and TRS-ActiveCare programs: Aetna, Humana, CVS/caremark, Express Scripts and Gabriel, Roeder, Smith & Company. 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.
- Executor or administrator. TRS may disclose your protected health information to the executor or administrator of your estate.
- 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.
- 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.
- 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.
- 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.
- 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.

- **Inmates.** If you are 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.
- **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.
- **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.
- **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 are 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 personal 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.

If you are not able to communicate your preference to TRS, for example because you are unconscious, TRS may share your protected health information if TRS believes it is in your best interest to do so.

Certain Disclosures That TRS is Required to Make.

The following is a description of disclosures that TRS is required by law to make:

- **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 request 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 request 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 following is a description of your rights with respect to your protected health information:

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

You can ask that TRS 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 are enrolled in TRS-ActiveCare, you may request a restriction by writing to: Aetna Legal Support Services, 151 Farmington Avenue, W121, Hartford, CT 06156-9998. 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 are enrolled in TRS-Care, you may request a restriction by writing to: Aetna Legal Support Services, 151 Farmington Avenue, W121, Hartford, CT 06156-9998. 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 to 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 make this request 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 an email address, TRS will not send protected health information by email unless it is possible for the protected health information to be encrypted.

- **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:

- Receive 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 are 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.

- **The Right to Get a List of TRS' Uses and Disclosures of Your Protected Health Information.**

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 healthcare 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 received 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.

- **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 why 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 do not 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 as a result of 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:

Privacy Officer
Teacher Retirement System of Texas
1000 Red River Street
Austin, Texas 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 Street, Suite 1169
Dallas, Texas 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, Texas, 78711-2548
(800) 806-2092

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

More information

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

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

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

NOTES

NOTES

This guide provides an overview of the tools and resources available under the TRS-ActiveCare Select Whole Health Plan. For a detailed description of your program, see your TRS-ActiveCare Benefits Booklet. The Benefits Booklet is available online at www.trselectivecareetna.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.