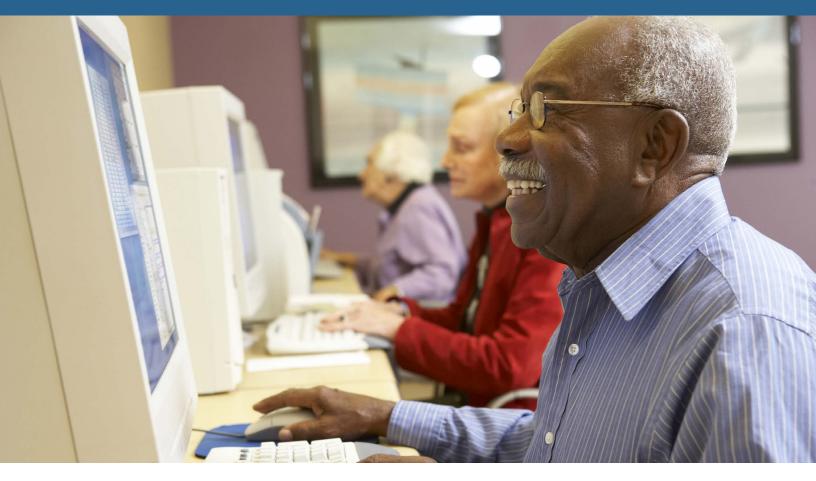


2018 TRS-Care Guide for Medicare Eligible Participants Jan. 1 - Dec. 31, 2018



This guide provides an overview of the TRS-Care eligibility requirements, enrollment, and the program benefits for Medicareeligible participants.

For a detailed description of your plan, please refer to the Humana and SilverScript Insurance Company Evidence of Coverage documents.



About this Enrollment Guide

This guide applies to the 2018 TRS-Care plan year and supersedes any prior versions.

However, each version of the TRS-Care Guide for Medicare-Eligible Participants remains in effect for the plan year for which it applies. In addition to applicable laws, TRS rules and regulations, this guide is TRS-Care's official statement about enrollment matters and supersedes any other statement or representation made concerning TRS-Care enrollment, regardless of the source of that statement or representation. TRS-Care reserves the right to amend this Guide at any time.

This document also highlights the TRS-Care medical and prescription drug plans offered to retired public school employees and includes information on the TRS-Care Medicare Advantage medical plan and TRS-Care Medicare Rx prescription drug plan. You can find much more detailed plan information in the Humana Evidence of Coverage and SilverScript Evidence of Coverage. Please be aware that TRS-Care for retirees is a completely separate program from TRS-ActiveCare for active school employees.

Please Note:

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

First and foremost, you have an initial enrollment opportunity to join the TRS-Care program upon retirement, which is your "Initial Enrollment Period."

If you decide not to enroll in the TRS-Care program at retirement, there are only two other potential opportunities for you to enroll in the TRS-Care program:

• **Special Enrollment Events.** Generally, special enrollment events may arise from an involuntary loss of comparable coverage or upon the acquisition of a new dependent through marriage, birth, adoption, or being placed for adoption. Find more information on page 9.

• At age 65. At that time, you may enroll in the TRS-Care Medicare Advantage medical plan and TRS-Care Medicare Rx prescription drug plan, so long as you purchase and maintain Medicare Part B. Find more information on page 8.

You may drop dependents and/or cancel coverage levels at any time.

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If you decide not to enroll in TRS-Care coverage during your Initial Enrollment period, you may enroll in TRS-Care when you turn 65 or if you or your eligible dependents qualify for a Special Enrollment Event (see page 9).



What's New?

1. Beginning Jan. 1, 2018, all Medicare-eligible TRS-Care participants have a single medical plan option — TRS-Care Medicare Advantage — and a single prescription drug plan option, TRS-Care Medicare Rx. These plans are the equivalent of the 2017 level 2 TRS-Care Medicare plans. TRS-Care Standard levels 1, 2 and 3 and TRS-Care Medicare Advantage level 3 are no longer available to TRS-Care participants who are eligible for Medicare.

2. Beginning Jan. 1, 2018, SilverScript Insurance Company, an affiliate of CVS Caremark, becomes the administrator for TRS-Care Medicare Rx, the sole prescription drug plan option for TRS-Care participants who are eligible for Medicare.

3. Medicare-eligible TRS-Care participants must purchase and maintain Medicare Part B in order to have TRS-Care coverage.

Who Can Enroll in TRS-Care?

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

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

Service Retirees

A service retiree must have at least 10 years of service credit in the TRS pension at the time of retirement. This service credit may include up to five years of military service credit; but it may not include any other purchased special or equivalent service credit. In addition to the "10 years of service credit" requirement, you must meet one of the following requirements at retirement:

• the sum of your age and years of service credit in the TRS pension equals or exceeds 80 (with at least 10 years of service credit), regardless of whether you had a reduction in the retirement annuity for early age (years of service credit can include all purchased service); or

• you have 30 or more years of service credit in the TRS pension (including purchased service).

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

A service retiree is not eligible to enroll in the TRS-Care program if he or she is eligible for ERS, UT System, or A&M System health benefit program coverage.

Disability Retirees

Individuals are eligible to participate in TRS-Care when they become a disability retiree under the TRS pension. Once enrolled in TRS-Care as a disability retiree, participation continues as long as the individual is a disability retiree under the TRS pension. If you are applying for health coverage because of a disability, you may be contacted to validate your Medicare Social Security Disability status.

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

A disability retiree is eligible to enroll in TRS-Care even if he or she is eligible for ERS, UT System, or A&M System health benefit program coverage.

Other Scenarios

I am already enrolled in TRS-ActiveCare

TRS-Care (for retirees) is a plan separate and distinct from TRS-ActiveCare (for working school employees). When you retire, you must submit an application form that tells TRS if you'd like to enroll yourself and your dependents in, or defer enrollment in, TRS-Care. During the Initial Enrollment period for TRS-Care, if you choose not to enroll in TRS-Care coverage, you are not required to provide the reason (e.g., other group coverage) for waiving coverage. Also, be sure to contact your school official to verify your TRS-ActiveCare termination date. A TRS retiree can be covered as a dependent of an active employee who is enrolled in TRS-ActiveCare.

Please note that if you are already age 65 or older when you retire and you decide not to enroll in TRS-Care during your Initial Enrollment period, you and one of your eligible dependents would only be able to enter TRS-Care if you or your eligible dependents have a Special Enrollment Event.

Both spouses are TRS pension retirees

If both spouses are TRS pension retirees, and each meet the TRS-Care eligibility requirements individually, it is okay for each to enroll separately in TRS-Care as individuals, which may be financially advantageous. Feel free to call 1-888-237-6762 for additional information.

Are my dependents eligible for TRS-Care?

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

- Your spouse (including a common law spouse);
- A child under the age of 26 who is
 - a natural child;
 - an adopted child, or one lawfully placed for adoption;
 - a foster child;
 - a stepchild; or

a grandchild who lives with you, depends on you for support, and who you claim for federal income tax purposes.
Children (regardless of age) who have a mental disability or physical incapacity to such an extend to be dependent on the retiree or surviving spouse for care and support, as determined by TRS.

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

How to Enroll

There are a few different circumstances where you would have the opportunity to enroll in TRS-Care: retirement, turning 65 or a Special Enrollment Event. Each opportunity requires that you return a TRS form to TRS and that you purchase and maintain Medicare Part B coverage. If you're eligible for premium-free Medicare Part A, go ahead and sign up for it. If you're not eligible for premiumn-free Medicare Part A, just make sure you get Medicare Part B. If you don't purchase and maintain Medicare Part B coverage, you risk losing all TRS-Care coverage.

Retiring

If you are retiring and you're about to be eligible for Medicare or you already are eligible, TRS will send you an enrollment packet that includes this guide and a TRS-Care application (Form TRS 700M). We'll send this once we receive and process your retirement application (Form TRS 30). If you want to enroll in TRS-Care, you should complete the TRS 700M and return it to TRS. This is called your Initial Enrollment Period. At this time, you can add your eligible dependents to TRS-Care coverage. They would be enrolled in the appropriate plan based on their Medicare status . For example, if your spouse isn't eligible for Medicare yet, he or she would be enrolled in the TRS-Care Standard plan. If you're applying for disability retirement, TRS will send you a TRS-Care enrollment packet if your disability retirement is approved. During your Initial Enrollment period for TRS-Care, if you choose not to enroll, you do not need to take any action. You only need to submit an application if you want to enroll in TRS-Care.

Turning 65

If you've never enrolled in TRS-Care before, but were eligible for the program when you retired, you have an additional opportunity to enroll yourself and your eligible dependents at age 65. TRS will send TRS retirees a postcard prior to your 65th birthday inviting you to contact us for an enrollment packet (TRS 700E0). TRS-Care retirees, including those that are currently enrolled in TRS-Care, may add their eligible dependents to their TRS-Care coverage when the retiree reaches age 65. Please note: this enrollment opportunity is not available to dependent spouses or children when they turn 65.

Special Enrollment Event

If you're already eligible for Medicare, not enrolled in TRS-Care and you experience a Special Enrollment Event, you may enroll yourself and your eligible dependents in TRS-Care. Please contact TRS to receive an enrollment packet.





When You May Enroll

Initial Enrollment Period - Retirement

If you are a service retiree and are already eligible for Medicare, your Initial Enrollment period is the later of:

(1) the period that begins on your retirement effective date and expires at the end of the last day of the month that is three consecutive calendar months, but in no event less than 90 days after your effective retirement date; or

(2) the period that begins on the last day of the month in which TRS receives your election to retire and expires at the end of the last day of the month that is three consecutive calendar months, but in no event less than 90 days, following the last day of the month in which TRS receives your election to retire.

Your application for TRS-Care (TRS Form 700M) is due no later than the last day of your Initial Enrollment period. Please see the chart Initial Enrollment Period for TRS-Care for more information.

DISABILITY RETIREES: Your Initial Enrollment period begins on the date that the TRS Medical Board approves your disability retirement, and expires at the end of the last day of the month that is three consecutive calendar months – but in no event less than 90 days – after the date that the TRS Medical Board approves your disability retirement.

Initial Enrollment Period

TRS retirement date	TRS 700M due date
September 30	December 31
October 31	January 31
November 30	February 28 (or 29)
December 31	March 31
January 31	May 1
February 28 (or 29)	May 31
March 31	June 30
April 30	July 31
May 31	August 31
June 30	September 30
July 31	October 31
August 31	November 30

Effective Date of Coverage for Retirement

If you're retiring, your coverage will take effect

• (1) the first day of the month following your retirement effective date as long as TRS receives your TRS-Care Enrollment application (Form TRS 700M) on or before your effective retirement date; or

• (2) if it's past your retirement date but still within your Initial Enrollment period, the first day of the month following the date TRS receives your Form TRS 700M. If you want your coverage to take effect the first of the month after your retirement date, TRS must receive the application before the retirement date.

The same applies for disability retirees.

During your Initial Enrollment period, you may still make changes to your coverage elections. The effective date of coverage for any new elections is the first day of the month after TRS receives the new application requesting the retirement coverage.

Deferring Coverage

During your Initial Enrollment period, you may postpone the effective date of your TRS-Care coverage to the first of any of the three months immediately following the month after your retirement date. For example, if your retirement date is May 31, the TRS-Care coverage effective date (normally June 1) may be deferred to July 1, August 1, or September 1. For a deferred effective date, you must write the coverage effective date in the space provided on the Initial Enrollment application (TRS Form 700M). If you have questions about deferring your effective date, please call 1-888-237-6762.

Turning Age 65: A New Enrollment Opportunity

If you're a retiree or surviving spouse who isn't yet 65, and you either terminated TRS-Care or didn't enroll during your Initial Enrollment opportunity, you can enroll in the TRS-Care when you turn 65. You may also add dependents at that time. Prior to your 65th birthday, TRS will send retirees a postcard with instructions on how to enroll. To enroll in TRS-Care at 65, you must request an application for TRS-Care and submit your application for coverage no later than 31 days from the end of the month in which you turn 65. Call TRS Health and Insurance Benefits at 1-888-237-6762 to request an application prior to your 65th birthday. TRS does not always have information about surviving spouses in its records. Surviving spouses are responsible for requesting and submitting their application for coverage no later than 31 days from the end of the month in which they turn 65.

Please note this enrollment opportunity is not available to dependent spouses or children when they turn 65.

TRS-Care retirees, including those that are currently enrolled in TRS-Care, may add their eligible dependents to their TRS-Care coverage when the retiree reaches age 65.

If eligible for Medicare, you must purchase and maintain Medicare coverage, including Medicare Part B coverage, to participate in the TRS-Care Medicare Advantage plan. You risk losing all TRS-Care coverage if you do not have Medicare Part B coverage when you're eligible to purchase it.

Find more information about Medicare and TRS-Care on page 10.

Keep in mind that even though you're eligible to enroll in TRS-Care, you must also take the additional step of signing up for Medicare early enough so that it takes effect the first day of your 65th birthday month. See the Medicare & TRS-Care section for detailed information.

Special Enrollment Events

Special Enrollment Events are opportunities to enroll in TRS-Care outside of your Initial Enrollment period. There are two general categories of special enrollment events:

Loss of Eligibility for Other Coverage

If a retiree or surviving spouse loses coverage

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

If you are not already enrolled in TRS-Care at the time you experience an involuntary loss of comprehensive coverage through no fault of your own, you may enroll yourself and your eligible dependents in TRS-Care within 31 days following the loss of coverage under the other comprehensive health plan. However, if you are already enrolled in TRS-Care at the time you lose other comprehensive health plan coverage, you will not be able to enroll any of your otherwise eligible dependents.

- * Among other possible events, the following actions do not qualify for a Special Enrollment Event:
- Dropping other coverage because premiums increase
- Termination of coverage for failure to pay your premiums
- Termination of coverage for cause (such as making a fraudulent claim or an intentional misrepresentation of a material fact in connection with the plan).

Should you lose coverage with another plan, it will be important to keep your notice of termination letter in order to demonstrate to TRS that the loss of coverage was for a qualifying reason.

If a spouse or other eligible dependent loses coverage

When a spouse or other eligible dependent are not enrolled in TRS-Care, and through no fault of their own, they lose comprehensive health coverage with another health plan, you may enroll your eligible dependents in TRS-Care within 31 days following the dependent's involuntary loss of the other health plan coverage. If you enroll an eligible dependent, you must also become enrolled in TRS-Care (if you are not already enrolled).

New Dependents

A retiree or surviving spouse (enrolled or otherwise eligible for TRS-Care) who acquires an eligible dependent through marriage, birth, adoption, placement for adoption, or guardianship, must notify TRS in writing within 31 days of the date s/he acquires the eligible dependent, in order for the enrollment to be valid. For example, if an otherwise eligible retiree is not currently enrolled in TRS-Care at the time s/he gets married, the retiree may enroll himself or herself, along with any eligible dependents, during a special enrollment period. However a surviving spouse may not enroll a new spouse if the surviving spouse remarries. Enrollment will take effect the first of the month after TRS-Care receives the request for enrollment in writing. Documentation is required to establish the eligibility for all new dependents. A common law marriage is not considered a special enrollment event unless there is a Declaration of Common Law Marriage filed with an authorized government agency.

Medicare & TRS-Care

What should you know?

If you previously retired and didn't enroll in TRS-Care at retirement, you have an opportunity when you reach age 65 to enroll yourself and your eligible dependents in TRS-Care. In most cases, you will also become eligible for Medicare, which works with the TRS-Care Medicare Advantage plan and TRS-Care Medicare Rx plan. Just submit an application and, upon confirmation of your eligibility for TRS-Care, TRS will enroll you once TRS verifies your Medicare status. If your dependents ARE NOT eligible for Medicare, they'll be enrolled in the TRS-Care Standard plan. If your dependents ARE eligible for Medicare, they'll be enrolled in the TRS-Care Advantage and TRS-Care Medicare Rx plans. If you're already past Medicare age and you're now retiring, you must sign up for Medicare to enroll in TRS-Care. You don't have to buy Part A if you aren't already getting it for free, but you do need to buy Medicare Part B. If you do not buy and maintain Medicare Part B, you risk losing all TRS-Care coverage.

Whether you're retiring or turning 65, you'll indicate on your enrollment form when you want your coverage to take effect. If TRS or Humana can't verify that you have Medicare Part A and Part B, you will have 21 days or until the end of the month, whichever is greater, to provide your Medicare information to Humana. If you don't provide your Medicare information within that timeframe, you won't be enrolled in TRS-Care Medicare Advantage or TRS-Care Medicare Rx.

When am I eligible for Medicare?

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

Medicare eligibility at age 65

TRS strongly urges you to enroll in Medicare as soon as you're eligible for it. You can enroll three months prior to the month you turn 65. The earlier you sign up, the sooner TRS can verify your Medicare status and enroll you in the TRS-Care Medicare Advantage plan and TRS-Care Medicare Rx plan on the first day of your birthday month. If your birthday is on the first of the month, your Medicare coverage will take effect the first of the previous month. If you don't sign up early enough to make your effective date the first day of your birthday month, you risk having a gap in TRS-Care coverage. Keep in mind, the period for enrolling in the TRS-Care program is shorter than the enrollment period for Medicare. The enrollment period for Medicare extends for three months after your 65th birthday, but you must submit an application for enrollment in the TRS-Care program no later than 31 days from the end of the month in which you turn 65. If you enroll after you turn 65, you may have a break in coverage, or you may not be able to enroll in TRS-Care.

Medicare eligibility due to End Stage Renal Disease (ESRD)

If you're eligible for Medicare due to ESRD, Medicare pays secondary to TRS-Care because federal rules require TRS-Care coverage to be primary for a certain period of time, known as the coordination period. When you are in this coordination period, you are not eligible for the TRS-Care Medicare Advantage plan, and TRS will make an alternative medical plan option available to you. You will be eligible for prescription drug coverage through the TRS-Care Medicare Rx plan while you are in the coordination period with Medicare.

Once your Medicare Part A becomes your primary coverage, TRS will enroll you in the TRS-Care Medicare Advantage plan and your TRS-Care monthly premium and your TRS-Care deductible will go down.

If you're eligible for Medicare due to ESRD, please let TRS know by phone or in writing.

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



Losing Medicare Part B

If you lose Medicare Part B because you stopped paying the premium, but you take steps to get Medicare Part B reinstated within 90 days of losing it, TRS will work with you to ensure your TRS-Care coverage isn't terminated. If you pay a portion of the amount you owe for late Part B premiums, Humana allows you a 60-day grace period to pay the full amount to Social Security. For example, if you're behind two months' worth of payments but you can only pay the first month, you have 60 days to pay the remaining one month of outstanding premiums. Your coverage will be reinstated to the date you lost it due to not paying the Medicare Part B premiums.

You'll still have the same coverage throughout this grace period. However, if you end up not paying your Medicare Part B premiums after the grace period, your TRS-Care Medicare Advantage coverage will be retroactively terminated and Humana will reprocess any claims you made in that period. You would be responsible for the portion Humana would have paid if you had Medicare. If you have Medicare Part A only, Medicare would still pay your covered hospitalization costs.

What happens if I'm trying to enroll in TRS-Care for the first time and I don't get Medicare?

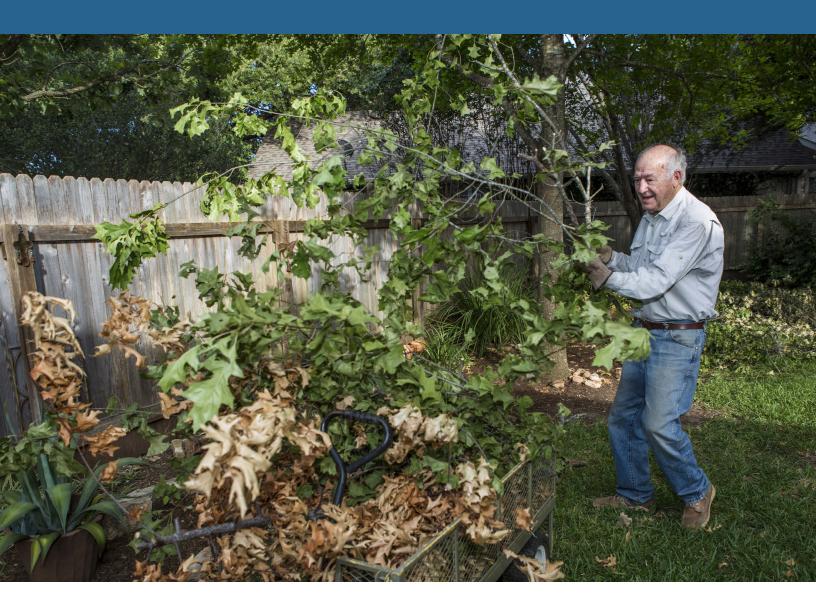
If you do not provide your Medicare information to Humana within 21 days or the end of the month in which you request your coverage to effective, you will remain enrolled in the TRS-Care alternative plan for 90 days. During this 90-day grace period, you will have higher out-of-pocket costs because the TRS-Care alternative plan has an individual deductible of \$1,300.

If you enroll in Medicare during this 90-day grace period and provide your Medicare information to Humana, you will be enrolled in the TRS-Care Medicare Advantage plan and TRS-Medicare Rx plan that takes effect on the initially requested start date or the first of the following month. If you provide missing or invalid information during the 21-day period after you submit your initial enrollment, you can enroll on the date you requested. However, if you provide it after the 21-day period, a new enrollment is required and your enrollment would take effect on the next available effective date.

So what actions do you need to take?

- If you're eligible for premium-free Medicare Part A (hospitalization), sign up for it through the Social Security Administration. You can apply online at www.ssa.gov/medicare, visit your local Social Security office, or call Social Security at 1-800-772-1213 (TTY: 1-800-325-0778).
- Purchase Medicare Part B as soon as enrollment becomes available to you.
- As soon as you enroll in Medicare, call TRS Health and Insurance Benefits at 1-888-237-6762 to provide your Medicare information. TRS can't enroll you in TRS-Care coverage without your Medicare information.
- Review the materials in the enrollment kit you receive from TRS.
- Complete and submit the application for TRS-Care no later than 31 days from the end of the month in which you turned 65.

Assuming you are eligible for TRS-Care coverage, and once TRS verifies your Medicare status, TRS will automatically enroll you in the TRS-Care Medicare Advantage and TRS-Care Medicare Rx plans. If TRS does not receive your Medicare information, TRS will not be able to enroll you, and you could be at risk of losing TRS-Care coverage altogether.



TRS-Care Medicare health plans

Medicare-eligible TRS-Care participants are eligible to enroll in the TRS-Care Medicare Advantage medical plan and TRS-Care Medicare Rx prescription drug plan. Your TRS benefits offer maximum flexibility when it comes to the doctors you see, as well as a simpler insurance experience. In addition, you can take advantage of special offers like free gym memberships through SilverSneakers and wellness programs that reward you for the positive steps you take towards better health.

Premiums¹

Tier	Premium
Retiree Only	\$135
Retiree + Spouse	\$529
Retiree + Children	\$468 ²
Retiree + Family	\$1,020 ²

'Premiums are determined by the TRS retiree's Medicare eligibility, regardless of their dependents' Medicare status.

²Premiums for retirees with disabled children (regardless of the disabled child's age) are reduced by \$200 in tiers with covered children.

The Details

TRS-Care Medicare Advantage *Medical Coverage*

TRS-Care Medicare Advantage is the sole medical option for TRS-Care participants who are eligible for Medicare. The plan covers everything that Original Medicare covers, along with extras. TRS-Care Medicare Advantage is designed to give you richer benefits at a lower cost than your current combination of Original Medicare and your TRS-Care Standard plan.

To be eligible

You must be entitled to Medicare Part A, whether it's premium-free or not, be enrolled in Medicare Part B, and live in the service area of the United States and Puerto Rico. If you're eligible for premium-free Medicare Part A, go ahead and sign up for it. If you're not eligible to get it for free, make sure you get Medicare Part B. If you don't purchase Medicare Part B, you won't have any TRS-Care coverage.

How the 2018 TRS-Care Medicare Advantage plan works				
Deductible: \$500	Maximum out-of-pocket: \$3,500	Coinsurance: You pay 5% or a copay after meeting your deductible		
Copays				
Primary care physician visit: \$5*	Urgent care: \$35	Outpatient hospital stay: \$250*		
Specialist visit: \$10*	Emergency room: \$65	Inpatient hospital stay: \$500*		
Preventive care benefits are covered at 100%				

*After you meet the deductible.

Note: If you're currently on the TRS-Care Standard plan and about to turn 65, any deductibles and out-of-pocket maximum amounts you've accumulated in the calendar year will carry over to your TRS-Care Medicare Advantage plan. For example, if you've paid \$350 towards your deductible on the TRS-Care Standard plan, that amount will count toward your \$500 medical deductible with TRS-Care Medicare Advantage.

TRS-Care Medicare Rx

Prescription coverage

SilverScript Insurance Company, an affiliate of CVS Caremark, administers the TRS-Care Medicare Rx prescription drug plan. This plan is approved by the federal Centers for Medicare & Medicaid Services (CMS). It offers more coverage than an individual Medicare Part D plan. This plan was specifically created for TRS-Care and is the only option for Medicare-eligible TRS-Care participants. Participants will not have to pay a higher TRS-Care premium to enjoy the benefits of these plans. Because the plan has been designed specifically for TRS retirees, it bridges the coverage gap or "donut hole" found in many Medicare prescription drug plans—resulting in lower prescription drug costs for our members.

Signing up for an Individual Medicare Part D (Prescription Drug) Plan

An individual Medicare Part D plan is a prescription drug plan that you purchase directly from a Medicare approved insurer. While you have the option of opting out of TRS-Care Medicare Rx, CMS prohibits people enrolled in a Medicare Advantage plan through their group retiree benefits from joining an individual Medicare prescription drug plan. The reverse is true as well—a person with group Medicare prescription drug plan cannot have an individual Medicare Advantage plan. Keep this in mind if you are considering opting out of TRS-Care Medicare Rx.

Be aware that if you do opt out of the TRS-Care Medicare Rx plan and maintain your medical coverage through the TRS-Care Medicare Advantage plan, your premium will not be reduced.

Creditable coverage means that, according to Medicare, the coverage provides equal or better coverage than an individual prescription drug plan purchased from a Medicare-approved insurer. Having creditable prescription drug coverage allows you to enroll in an individual Medicare Part D plan during future Medicare annual enrollment periods without the penalty of higher premiums. For example, if you go 63 days or longer with no prescription coverage and you choose to enroll in an individual Medicare Part D plan purchased from a Medicare-approved insurer during Medicare's annual enrollment period (Oct. 15 through Dec. 7), your Medicare Part D premium will be 1 percent higher per month for each month that you did not have Medicare Part D coverage. Medicare's annual enrollment period is not a qualifying event to add dependents and/or increase your level of coverage.

For people with limited income and resources, the Social Security Administration (SSA) can provide extra help to pay for Medicare Part D coverage. You may contact SSA at 1-800-772-1213 (TTY: 1-800-325-0778) or online at www.socialsecurity.gov.

The Details

You do not have to meet the \$500 medical deductible that applies to the TRS-Care Medicare Advantage plan before you can pay the copays for prescription drugs shown in the chart below. You pay the copays below regardless of which Medicare Part D prescription drug stage you meet, which means you will not experience the coverage gap or "donut hole."

TRS-Care Medicare Rx				
Drug Tier	31-day supply at retail pharmacies	Up to 90-day supply at Retail-Plus pharmacies and through home delivery		
Tier 1: Generic Drugs	\$5	\$15		
Tier 2: Preferred Brand Drugs	\$25	\$70		
Tier 3: Non-Preferred Drugs	\$50	\$125		

Note: Maintenance drugs are prescriptions that are taken regularly to manage a chronic or long-term condition, such as high blood pressure and diabetes. You can save by purchasing these drugs in bulk through mail delivery or Retail-Plus pharmacies. You can only purchase up to a 31-day supply of a specialty medication.

Glossary of Terms

Additional Enrollment Opportunity at Age 65

The opportunity for retirees eligible for TRS-Care to enroll in coverage for the first time and add eligible dependents. TRS retirees who are eligible and covered by TRS-Care when they reach age 65 may also add eligible dependents at this time.

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

A child that is not your grandchild, the child is unmarried, the child's primary residence is your household, you provide at least 50 percent of the child's support, neither of the child's natural parents reside in your household, you have the legal right to make decisions regarding the child's medical care, and you have full legal guardianship (documentation will be required).

Deductible

The plan deductible is the amount of covered medical expenses that you pay each plan year before TRS-Care pays for eligible, non-preventive covered medical expenses. The TRS-Care Medicare Advantage plan has a \$500 deductible and there is no deductible for the TRS-Care Medicare Rx plan. The office visit copays, precertification penalties, charges for services not covered and any payment for charges greater than the plan's allowable reimbursement do not apply to the deductible. Preventive services are still covered at 100% even if you have not met the deductible.

Coinsurance

The percentage of allowed amounts for covered medical expenses that the participant is required to pay, after the TRS-Care deductible has been met. Coinsurance is in addition to the deductible, office visit copayment (copay), charges for services not covered, precertification penalties and out-of-network charges, which are the patient's responsibility.

Deferring Coverage

To delay the effective date of TRS-Care coverage by completing the enrollment application and submitting it during your Initial Enrollment Period.

Initial Enrollment Period

The first time the retiree has the opportunity to enroll in TRS-Care at retirement. Please refer to the TRS-Care Initial Enrollment Period chart on page 6 for timeframes specific to your situation.

Out-of-Pocket Maximum

The most you are required to pay for covered medical expenses out of your own pocket in a plan year. When you reach the plan's out-of-pocket maximum, the plan pays 100 percent of any eligible expenses for the rest of the plan year. The out-of-pocket maximum includes the deductible, any medical copays (if applicable), and medical coinsurance.

Premiums

The monthly contribution made by a retiree or surviving spouse for TRS-Care coverage for himself/herself and eligible dependents.

Special Enrollment Event

An opportunity to enroll in TRS-Care at a time other than during the Initial Enrollment Period and is based on a set of criteria.

TRS-Care Enrollment Form

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



Teacher Retirement System of Texas Health & Insurance Benefits Department 1000 Red River Street Austin, Texas 78701-2698

1-888-237-6762 www.trs.texas.gov

Program Contacts

TRS-Care Medicare Advantage

Medical Coverage

Insured by Humana Toll-free: 1-800-320-9566 (TTY/TDD: 711) HumanaFirst Nurse Line: 1-800-622-9529 (TTY: 711) www.trscaremedicareadvantage.com

TRS-Care Medicare Rx

Prescription Coverage

Administered by SilverScript Insurance Company, an affiliate of CVS Caremark

Toll-free: 1-844-345-4577, option 2

info.caremark.com/trscaremedicarerx



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DISCRIMINATION IS AGAINST THE LAW

The Teacher Retirement System of Texas (TRS) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. TRS does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The Teacher Retirement System of Texas:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written 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, 78701FAX: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: <u>https://ocrportal.hhs.gov/ocr/portal/lobby.jsf</u> Complaint forms are available at <u>http://www.hhs.gov/ocr/office/file/index.html</u>
 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)



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MULTI-LANGUAGE INTERPRETER SERVICES

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-888-237-6762 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Lame al 1-888-237-6762 (TTY: 711).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-237-6762 (TTY: 711).

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-888-237-6762 (TTY:711)。

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-237-6762 (TTY: 711)번으로 전화해 주십시오.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-6766-888 (رقم هاتف الصم والبكم: 711).

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں ۔ کال کریں 6762-237-1888-1. .(TTY: 711)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-237-6762 (TTY: 711).

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-888-237-6762 (ATS : 711).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-888-237-6762 (TTY: 711) पर कॉल करें।

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با (TTY: 711) 888-237-6762-1 تماس بگیرید.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-888-237-6762 (TTY: 711).

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-888-237-6762 (TTY: 711).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-237-6762 (телетайп: 711).

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。1-888-237-6762 (TTY:711)まで、お電話にてご連絡ください。

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 1-888-237-6762 (TTY: 711).

The TRS-Care program may be changed in the future to provide coverage levels that are different from the levels described in this booklet, or the TRS-Care program may be discontinued. The cost to participants in the TRS-Care program may be changed with the approval of the TRS Board of Trustees. To the extent that any information in this Enrollment Guide is not consistent with or contradicts TRS laws and rules, the TRS laws and rules control. The TRS-Care Benefits Booklet will always control over information in this Enrollment Guide. TRS-Care reserves the right to amend the Benefits Booklet at any time. Generally, such amendments will be reflected in an updated online version of the Benefits Booklet appearing on the TRS website.