

2024 TRS-CARE: Care You Can Count On

PLAN HIGHLIGHTS FOR PARTICIPANTS WITH MEDICARE



2024 TRS-CARE: Care You Can Count On

PLAN HIGHLIGHTS FOR PARTICIPANTS WITHOUT MEDICARE



TRS-Care Medicare Advantage and **TRS-Care Medicare Rx** are for TRS-Care participants with Medicare. Your plan year runs from Jan. 1 to Dec. 31.

2024 TRS-Care Medicare Advantage Medical Plan

UnitedHealthcare administers your 2024 TRS-Care Medicare Advantage medical plan. Deductibles and maximum out-of-pocket costs (MOOPs) reset every Jan. 1. Costs per person are below.

Plan Details		
Deductible	You pay \$400* every year for covered health care services before your health plan starts to pay.	
Coinsurance	You pay 5% or only a copay after you meet your annual deductible.	
Maximum out of pocket (MOOP)	The maximum amount you pay each plan year for medical costs is \$3,500.	
Services with a Copay	Your deductible does not apply to these services: <ul style="list-style-type: none">Primary Care Provider sick visit: \$5Urgent care: \$35Emergency room: \$65	Your deductible does apply to these services: <ul style="list-style-type: none">Specialist visit: \$10Inpatient hospital stay: \$500Outpatient procedure or service: \$250
Preventive Care	Preventive care benefits are covered at 100%.	
Virtual Medical Visits	\$0 copay for virtual medical visits through AmWell, Doctor on Demand and Teladoc \$5 copay for other providers who offer virtual medical visits	
Mental (Behavioral) Health Visits	\$10 copay for in office mental (behavioral) health visits	

*If you're a TRS-Care participant turning 65 in 2024, and you send your Medicare Beneficiary ID number before the first day of your birth month, you'll have no deductible for the rest of the year.

Your Medicare Eligibility

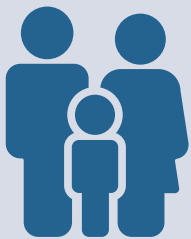
You're eligible for Medicare at age 65 or if you had Social Security Disability benefits for a specific amount of time. Do not delay, and enroll at ssa.gov/medicare three months before you turn 65. You must buy and maintain Medicare Part B to be eligible for TRS-Care Medicare Advantage benefits.

2024 TRS-Care Medicare Rx Prescription Drug Plan

Express Scripts administers your 2024 TRS-Care Medicare Rx prescription drug plan.

Prescriptions	Retail Copays	Copays for a 90-Day Supply
Generic (Tier 1)	\$5	\$15
Preferred Brand (Tier 2)	\$25	\$70
Non-Preferred Brand (Tier 3)	\$50	\$125 ¹

¹ Specialty drugs are limited to a 31-day supply.

2024 Monthly Premiums ²	
	Retiree only \$135
	Retiree + spouse \$529
	Retiree + child(ren) ³ \$468
	Retiree + family ³ \$1,020

² Costs shown are for most Medicare retirees in 2024. The TRS retiree's Medicare eligibility determines the premium, regardless of their dependents' Medicare status.

³ TRS reduces premiums for retirees with disabled children (regardless of the disabled child's age) by \$200 in tiers with covered children.

TRS-Care Standard provides health coverage for participants without Medicare. Your plan year is from Jan. 1 to Dec. 31. Deductibles and maximum out-of-pocket amounts (MOOPs) reset every Jan. 1.

2024 TRS-Care Standard Medical Plan

Blue Cross Blue Shield of Texas (BCBSTX) administers your 2024 TRS-Care Standard medical plan. All copays in this table count toward your MOOP, including TRS Virtual Health and insulin.

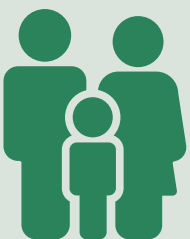
Plan Details	
Deductible	In-Network: \$1,600 individual plan; \$3,200 family plan Out-of-Network: \$3,200 individual plan; \$6,400 family plan
Coinsurance	In-Network: You pay 20% after you meet your deductible Out-of-Network: You pay 40% after you meet your deductible
Maximum out of pocket (MOOP)	In-Network: \$5,650 individual plan; \$11,300 family plan Out-of-Network: \$11,300 individual plan; \$22,600 family plan
TRS Virtual Health	RediMD: \$30 copay per visit, which applies to your deductible Teladoc: \$42 copay per visit, which applies to your deductible When you meet your deductible, the plan pays 80% and you pay 20%.
TRS Virtual Health (Mental Health)	Initial psychiatry session: \$185 copay, which applies to your deductible On-going psychiatry session: \$95 copay, which applies to your deductible Psychologist, licensed clinical social worker, counselor, or therapist session: \$85 copay, which applies to your deductible When you meet your deductible, the plan pays 80% and you pay 20%.
Generic drug coverage	No cost for certain medications that prevent chronic conditions
Insulin Copay	\$25 copay for 31-day supply and \$75 copay for 60- to 90-day supply
SaveOnSP	\$0 copays on specialty drugs covered under the SaveOnSP drug list after you meet your deductible

2024 TRS-Care Standard Prescription Drug Plan

Express Scripts administers your 2024 TRS-Care Standard prescription drug plan.

- You pay the full cost of your medical and prescription costs until you or your family reach the deductible. The plan then starts to pay coinsurance.
- Once you meet your deductible, the plan pays 80% of eligible in-network expenses.
- Once you or your family reach your maximum out of pocket (MOOP), your plan pays 100% of expenses for the rest of the plan year.
- One person's expenses will not exceed the individual MOOP, even if they're on the family plan.
- Out-of-pocket expenses for the whole family will not exceed the family limit.

2024 TRS-Care Standard Monthly Premiums⁴

	Retiree only	\$200
	Retiree + spouse	\$689
	Retiree + child(ren)	\$408
	Retiree + family	\$999

⁴ Costs shown are for most retirees without Medicare in 2024. If you're planning to retire due to a disability, you'll pay the premium listed here.

What You Need to Know About Your 2024 TRS-Care Health Benefits

Revised Aug. 5, 2024

The TRS retiree’s Medicare status determines TRS-Care premiums.

FREQUENTLY ASKED QUESTIONS

Will I have a deductible when I turn 65?

Current TRS-Care Standard participants transitioning to TRS-Care Medicare Advantage: If you’re currently in TRS-Care Standard and enroll timely in Medicare in 2024, you won’t pay a deductible through Dec. 31, 2024—if TRS has your Medicare Part A and/or Part B information before the first day of your birth month. Make sure to start your Medicare enrollment process 90 days before your 65th birthday—or if you’re over 65, start 90 days before your planned retirement date. Be sure to enroll in premium-free Medicare Part A.

New to TRS-Care and eligible for Medicare: If you’re new to TRS-Care and will have TRS-Care Medicare Advantage coverage, you’ll have an individual \$400 deductible through Dec. 31, 2024. Your deductible starts over on Jan. 1, 2025.

What happens to our coverage if I turn 65 before my spouse?

If you’re the retiree and you turn 65 before your covered spouse, you’ll enroll in TRS-Care Medicare Advantage and your spouse will stay on TRS-Care Standard. You’ll pay \$529 in monthly premiums for yourself and your spouse.

What happens to our coverage if my spouse turns 65 before I do?

If you’re the retiree and your covered spouse turns 65 and gets Medicare before you do, TRS will enroll your spouse in TRS-Care Medicare Advantage. You’ll pay a \$689 monthly premium for yourself and your spouse, and you’ll continue to get TRS-Care Standard coverage until you, the retiree, enroll in Medicare.

Do I have to pay a separate Medicare premium?

Yes. Participants with Medicare also pay a premium for Medicare Part B directly to Medicare. TRS doesn’t pay this premium on your behalf or deduct it from your TRS retirement check.

Medicare deducts your Part B premium from your monthly federal benefit. You must buy and maintain Medicare Part B to be eligible for TRS-Care Medicare Advantage. **Failure to buy and maintain Medicare Part B will result in total loss of TRS-Care.**

The cost of your Medicare premium depends on your income. If you have questions about how much you’ll pay for your Medicare benefits, call Social Security at 1-800-772-1213. TTY users can call 1-800-325-0778.

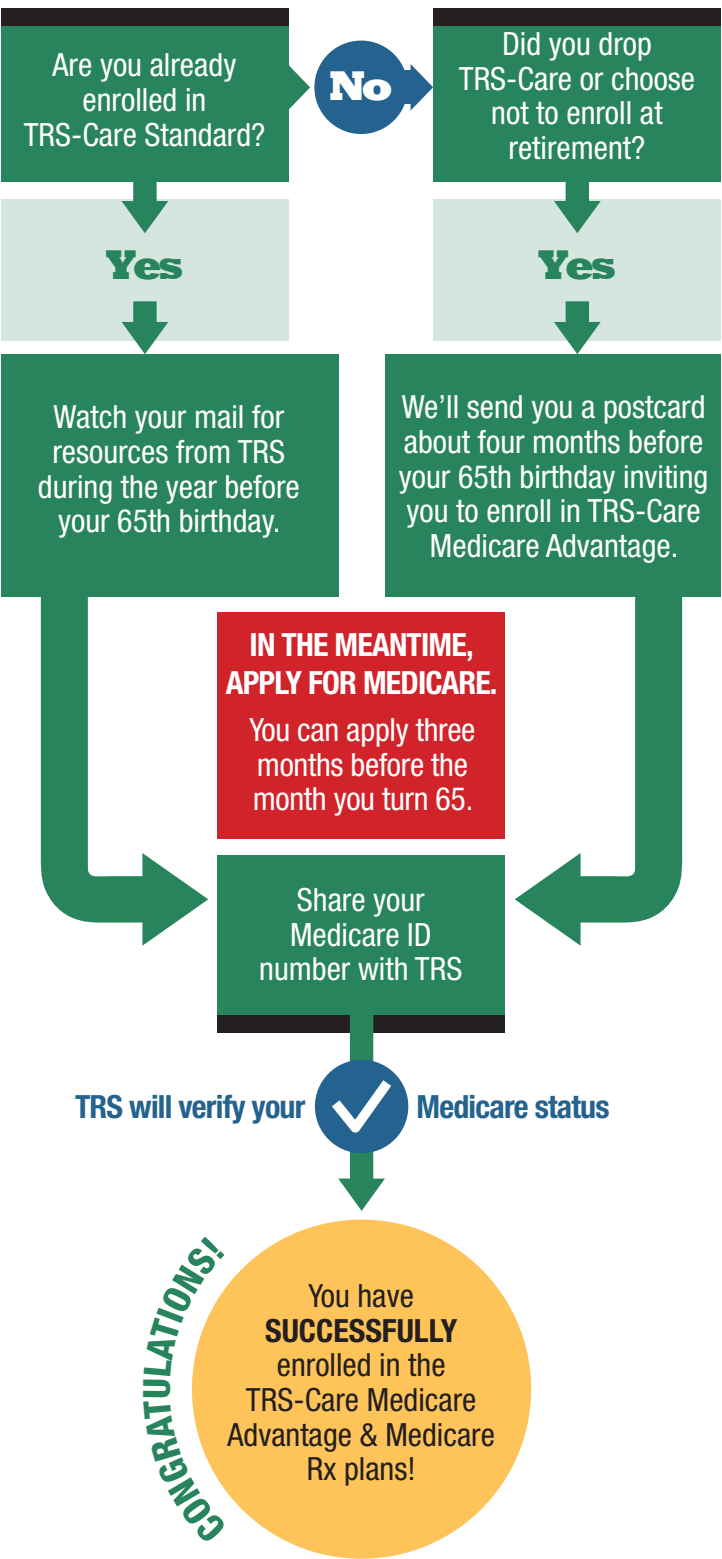
Do I have to pay a separate premium for the TRS-Care Medicare Rx plan?

No. You don’t have to pay another premium for drug coverage. Your TRS-Care Medicare Advantage premium includes pharmacy coverage.

Does TRS-Care Medicare Advantage replace my original Medicare coverage?

Yes. TRS-Care Medicare Advantage combines your Medicare coverage with enhanced TRS-Care coverage. When you see your doctor, you present only your TRS-Care medical and Rx ID cards. Keep your Medicare ID card in a safe place.

WHAT HAPPENS TO MY HEALTH CARE PLAN WHEN I TURN 65?



Compare Medicare Plans and Choose Carefully

While TRS-Care Medicare Advantage premiums may cost more than other Medicare Advantage plans on the market, **TRS-Care benefits likely offer a total lower out-of-pocket cost with extra benefits.** From freedom in the doctors you see, more coverage for prescription drugs, and no surprise billing, TRS-Care is available only for TRS retirees.

If you’re considering other health plan options, be sure to compare all TRS-Care benefits with other plans, especially prescription coverage. Consider the extra benefits TRS-Care offers. Visit <https://www.trs.texas.gov/Pages/healthcare-compare-trs-care-medicare.aspx> to learn more.

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

TRS-Care retirees eligible for Medicare may enroll in TRS-ActiveCare if they return to work for a TRS-covered employer and work 10 or more hours per week.

If you keep TRS-Care Medicare Advantage and enroll in TRS-ActiveCare, you must pay three premiums:

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

TRS recommends that you (the retiree) contact Medicare to let them know when you return to work. Visit <https://www.trs.texas.gov/TRS%20Documents/update-april-2023.pdf> to learn more.

What happens if I cancel TRS-Care and then change my mind?

Call TRS Health at 1-888-237-6762. If you cancel TRS-Care and either get married or involuntarily lose other comprehensive health care coverage, you may be able to reenroll in TRS-Care under a special enrollment event. You must be eligible for TRS-Care and be able to show you that you lost health coverage through no fault of your own.

Loss of disability, specified disease, vision, dental or other coverage that is not full health coverage does not cause a special enrollment event.