# TRS-Care Medicare Info Sessions for 2022 Benefits



## 1. TRS-Care Medicare Info Sessions for 2022 Benefits

Welcome TRS Retirees & Families! We're so glad to connect with you again for the 2021 TRS-Care Medicare Info Sessions. Every fall over the past few years, we look forward to meeting with you as we travel across Texas. While we're disappointed we can't do that this year (again!), we're glad we still have this virtual medium.

2.	Agenda	а

Today, we're here to talk about your 2022 plan	benefits and provide you an	opportunity to hear		
from TRS, UnitedHealthcare and SilverScript representatives to have your questions answered!				
Right now, we're going to hear from	at UHC, followed by	at SilverScript.		
After that, we'll hold a question & answer session where we're hear questions aloud.				
We'll also be pushing poll questions throughout the presentation and encourage you all to				
participate. It'll help keep this webinar more engaging and acts as a way for us to interact with you				
all. Alright, and with that, let's hear from	at UHC!			

## 3. 2022 TRS-Care Medicare Advantage Plan - UnitedHealthcare

4. Hello everyone and thank you for the opportunity to speak to you today about the benefits and programs available to you through the TRS-Care Medicare Advantage Plan. We are excited to have an opportunity to share with you information about your plan so let's get started.

# 5. UnitedHealthcare is here for you

I want you to know UnitedHealthcare is here for you, and we are committed to help you live your best retirement. As we go through the presentation keep in mind these 3 important themes...and we'll get into a lot more details shortly.

1<sup>st</sup> – Helping you get care when — and where — you need it

Whether it's an appointment with a doctor online, talking to a nurse 24/7, or taking care of a wellness visit, it is easy to connect you with care so you can stay on top of your health.

2<sup>nd</sup> - We offer 1-on-1 support from a dedicated TRS customer advocate team based right here in Texas to help answer your questions and will take extra time to understand all of your needs to help you navigate care. If you have questions on how to utilize any of the benefits and programs that I'll be reviewing today make sure you reach out to your dedicated advocate team at 1-866-347-9507 from 7 a.m. – 6 p.m. CT, Monday – Friday.

And one last example you'll hear a lot about is Renew by UnitedHealthcare,

Renew is a health and wellness program, available at no cost, and encourages you to take charge of your health and wellness every day by providing a wide variety of useful resources and activities. So with these 3 themes in mind, lets continue w/ the agenda:

# 6. TRS-Care Medicare Plan Benefits, Programs and Features

Let's talk about some of the TRS-Care Medicare benefits, programs and features that are included in the plan.

# 7. Your Plan Advantages

Your Medicare Advantage plan will cover all the benefits of Part A such as Inpatient hospital, skilled nursing and home health and all the benefits of Part B such as doctor office visits, outpatient care, and labs, as well as offer additional benefits and programs beyond Original Medicare. You will continue to retain all the rights and privileges of Medicare, but your benefits and claims will be processed by UnitedHealthcare®.

Many Part C plans such as the TRS-Care Medicare Advantage plan include Medicare Part D prescription drug coverage. Part D helps pay for the medications your doctor prescribes. Your prescription drug coverage will remain covered by SilverScript. You will hear more about your coverage with SilverScript later in the presentation.

# 8. Your TRS-Care Medicare Advantage PPO Overview

Your Medicare Advantage plan is considered a National PPO plan. What that means is that you will continue to to utilize doctors, clinics and hospitals across the United States and the US Territories regardless of where you live.

You will only need one ID card to access your medical benefits. You will continue to use your SilverScript ID card to access your pharmacy benefits

Your benefits are the same for in-network and out-of-network providers

There is no referral needed to see a specialist.

Out-of-network doctors don't have or need a contract with UnitedHealthcare to see you. With the TRS-Care Medicare Advantage plan, which is a Preferred Provider Organization plan (PPO), you can see any out-of-network provider that accepts Medicare and is willing to bill UnitedHealthcare.

# 9. Finding a doctor is easy

If you need help finding a doctor or a specialist, just give UnitedHealthcare a call. To see if your provider is part of the UnitedHealthcare network, go to <a href="https://www.UHCRetiree.com/TRS-CareMA">www.UHCRetiree.com/TRS-CareMA</a> and click on "Look up a provider now".

## 10. Your TRS-Care Medicare Advantage Plan Benefits

Let's review your TRS-Care Medicare Advantage Plan Benefits. For 2022 there are no changes to your benefits or rates. That means you will have the same benefits as 2021 in 2022 with an added bonus I'll mention later.

Your plan has an annual deductible of \$500 per year for in-network and out of network benefits. A deductible is the amount you pay for healthcare before your plan begins to pay for your benefits. Your deductible applies to benefits such as specialist office visits and lab services and will be calculated based on claims and the order they are received. Don't forget that this is an annual deductible so it will reset on January 1<sup>st</sup>.

Your deductible does not apply to services such as

 Physician and professional services received at a primary care physician's office or Virtual Doctor Visits, Ambulance, Emergency and Urgent care services

Your plan also has an annual out of pocket maximum of \$3,500.00 per year. This means that the most you would have to pay for covered medical expenses annually, including deductibles, copays

and coinsurance is \$3,500.00. Should you reach your annual out of pocket in any given year, the TRS-Care Medicare Advantage plan would then pay 100 percent of the Medicare-approved amount for most covered medical charges for the remainder of the year. Like the annual deductible your out of pocket maximum resets every January 1<sup>st</sup>.

I know it's a lot to take in. Remember that you can reach out to your TRS-Care Medicare Advantage dedicated advocates to help answer any questions about your benefits at 1-866-347-9507, TTY 711 7 a.m. – 6 p.m. CT, Monday – Friday.

# 11. TRS-Care Medicare Advantage Preventive Benefit Highlights

Good preventive care helps catch health issues early when they may be easier to treat. Some of the preventive services covered on your plan at a \$0 copay are

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

For more information about what is covered on the TRS-Care Medicare Advantage please refer to your plan guide or evidence of coverage available at <a href="https://www.uhcretiree.com/trs-carema">www.uhcretiree.com/trs-carema</a>

# 12. TRS-Care Medicare Advantage Benefit Highlights

As I mentioned previously, with your TRS-Care Medicare Advantage PPO plan, you will pay the same amount for in and out-of-network for care.

If we review some of your plan benefit highlights you will note that regardless if the provider is in or out of network your member cost share does not change.

A primary care office whether in or out of network will be covered at a \$5 copay

A specialist office visit whether in or out of network will be covered at a \$10 copay after the deductible

An Urgent Care visit in or out of network will be \$35

An Emergency Room visit in or out of network will be \$65

An Inpatient Hospitalization has a \$500 per stay admit copay regardless if the facility is in or out of network after the deductible

Outpatient Surgery has a \$250 copay regardless if the facility is in or out of network after the deductible

## 13. Diabetes testing & monitoring supplies

One of the benefits included with your plan is coverage for diabetic testing and monitoring supplies. These supplies such as lancets, lancing devices, glucose control solutions and meter replacement batteries are covered at a \$0 copay when you use OneTouch and ACCU-CHEK approved systems. If you are not using OneTouch or ACCU-CHEK, please check with your provider to see if one of the systems will work for you. While a temporary supply of your current brand can be requested while you work with your provider to switch to one of the approved systems, we recommend starting to work with your provider at least 30 calendar days before your supplies would run out.

## 14. UnitedHealthcare HouseCalls

UnitedHealthcare® HouseCalls is an optional service that allows you to have a yearly in-home checkup to help you stay on top of your health at a \$0 copay.

A Housecall visit typically lasts 45-60 mins, during which a health care practitioner will review your health history and current medications. They will perform a basic health screening and help you identify any health risks in your environment. They can even connect you to resources to assist with those risks.

Housecalls are designed to work in conjunction with your primary care visit. It's a great opportunity to ask questions you may not have had a chance to address with your primary care physician. The Housecalls practitioner will even help create a checklist of topics you can discuss with your PCP which allows you to experience more holistic care in your home and at your doctors office. Per 2021 CMS guidelines, HouseCalls offers virtual visits when in home may not be an option. A HouseCalls video visit uses technology to connect plan members with a health care practitioner for up to a full hour to review your health history and current medications, discuss important health screenings, identify health risks and provide health education.

CMS guidelines are subject to change for 2022

# 15. Take an active role in your health with Renew

Renew Rewards by UnitedHealthcare® is a program set up to help you unlock your unique potential and live your best life!

Renew Rewards gives you access to many resources such as Renew magazine, brain games, recipes, learning courses, fitness activities, videos and more.

Under the Renew Rewards program you may also be eligible to earn rewards by completing certain health care activities such as your annual physical or wellness visit.

## 16. Annual physical and wellness visit

You've heard mention of an annual physical and annual wellness visit during this presentation, but you might be wondering what the difference is. Your annual physical is your opportunity to have labs and test done to measure your health. Your Annual Wellness visit is your opportunity to set time aside for a conversation with your primary care physician to discuss options for preventative care and to discuss screenings and exams you may have heard about but want to know if they're right for you.

While your annual wellness visit can be scheduled for any time throughout the year, many people chose to combine their annual physical and annual wellness exam to allow for a longer visit with their doctor. There is no charge for this visit and we encourage you to schedule yours! You can get your annual wellness visit anytime during the calendar year. You do not have to wait a full 365 days for your next annual wellness visit. For example if you've had your visit in August of 2021 you are eligible to have your next visit January of 2022

Don't forget you could be eligible for a reward through Renew when completing your Annual Wellness Visit.

## 17. Virtual Visits

Virtual Visits allow you to have a live video chat with a doctor or behavioral health specialist from your smartphone, tablet or computer, anything with a camera built in and a strong internet connection. Virtual Visits are available 24 hours a day whenever you need to access care. Virtual Doctor Visits are included in the plan for a \$0 copay when you use our preferred vendors Amwell, Doctors on Demand, and Teledoc . You can speak with a provider, ask questions, receive a diagnosis, and the doctor can even prescribe medication and have it sent to your pharmacy. The Virtual Visit doesn't require a copay however you would pay your normal copay for any medication that is prescribed for you.

Virtual Behavioral Health Visits are also included in the plan and are covered at a \$10 copay when accessing this benefit through either Amwell and Doctors on Demand. You can speak with a behavioral health specialist for an initial evaluation, medication management and ongoing counseling.

# **18. Telephonic Nurse Support**

NurseLine was designed specifically to help make your health decisions simple and convenient by providing answers to your health questions any time, anywhere — 24 hours a day, 7 days a week — at no additional cost.

When you call, a registered nurse can help you:

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

You can contact the telephonic nurse support line at 1-877-365-7949 TTY 711. This number is also located on the back of your ID card

# 19. Gym and fitness membership

SilverSneakers is always a favorite added benefit on our plans.

Your SilverSneakers membership gets you a free membership to over 16,000 fitness locations across the country. You'll have access to exercise equipment, classes and more! And you can use more than one location. Just go online to <a href="silversneakers.com">silversneakers.com</a> to search for participating locations near you! If you prefer or enjoy to exercise at home, you will have access to SilverSneakers On-Demand and their GO mobile app, offering virtual classes you can participate in at any time.

To get started using your benefit, you can visit SilverSneakers.com, visit a participating location or call them at <u>1-888-423-4632</u>, TTY 711, 8 a.m. – 8 p.m. ET, Monday – Friday for more details.

## 20. UnitedHealthcare Hearing

UnitedHealthcare Hearing allows you to receive a hearing exam and provides you with a wide selection of brand name and private labeled custom programmed hearing aids at significant savings. You have a \$500 allowance to use towards the cost of hearing aids every 3 years. You must use a UnitedHealthcare Hearing provider to take advantage of this allowance.

You can choose the latest technology hearing aids from major manufacturers, including Phonak, Starkey<sup>®</sup>, Oticon, Signia, ReSound, Widex<sup>®</sup> and Unitron<sup>™</sup> and receive your hearing aids in person or via home delivery.

You will receive personalized care and follow-up support helping you to hear better and live life to the fullest!

# 21. Trusted care at home when you need it

One of my favorite benefits to talk about is the in home non-medical care provided through Carelinx.

This benefit comes at no cost to you and is available to all TRS-Care Medicare Advantage participants.

Our National Provider Carelinx has a network of over 300,000 background-checked professional caregivers. You are matched with a caregiver who meets your needs and schedule. Once matched your caregiver is able to provide services such as grocery shopping, meal preparation, light housekeeping, personal care, medication reminders and even respite care for families and caregivers.

This benefit includes 8 hours of in-home, non-medical care per month and unused hours do not roll over.

#### 22. Routine Transportation program

The Routine transportation program will help you get to health-related appointments easier at no cost to you.

If you don't have a way to get to your health care appointments, our transportation program can help. You are eligible for 24 one-way trips or 12 round trips per year up to 50 miles

This program offers transportation to approved locations that are medically-related such as doctors' appointments and pharmacy trips.

Transportations cannot be used for emergency-related situations.

Scheduling is allowed up to 30 days in advance but requires at least two business days advanced notice

# 23. Healthy at Home: New for 2022!

Remember when I mentioned that your benefits would not change for 2022 except an added bonus? Well we are proud to present your new Healthy At Home Benefits

We know that an inpatient stay can cause a lot of stress and worry. Healthy at home gives you support that goes beyond traditional medical care to successfully recover at home after an inpatient admission or a stay at a skilled nursing facility.

Your benefits include:

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

You are eligible for the benefits up to 30 days following all inpatient and skilled nursing facility discharges.

\*A new referral is required after every discharge to access your meal and transportation benefit provided through the Healthy at Home project.

# 24. Personal Emergency Response System (PERS)

With the Personal Emergency Response System, by Philips Lifeline, help is a button push away! The Personal Emergency Response System (PERS) in-home monitoring device provides fast, simple access to help 24 hours per day, 365 days per year with the simple push of a button. Members choose the product that best fits their lifestyle and receive their device at no additional cost.

#### 25. Rally Coach Programs

Rally Coaching programs provides personal coaching, online learning, and telephonic support for a variety of topics that promote whole person health. There are 3 unique programs available to you: The first one I want to talk about is Real Appeal® Real Appeal is a simple, step-by-step online program that helps make losing weight fun. The program offers tools that may help you lose weight, reduce your risk of developing serious health conditions, gain energy and achieve your long-term health goals, at no additional cost to members with a body mass index or (BMI) of 19 or higher When you enroll in Real Appeal, you receive:

- A Transformation Coach who leads weekly online group sessions
- Online tools to help you track your food, activity and weight-loss progress
- A Success Kit with food and weight scales, recipes, workout DVDs and more shipped directly to your door

The second program is Rally Wellness Coaching. Rally Wellness Coaching provides personal coaching, online learning and support for a variety of topics that promote whole-person health. Wellness Coaching offers a comprehensive solution to address your physical, mental, social and emotional needs. Wellness Coaching includes the option to select a program topic of interest, work with a coach, set an action plan and engage with online learning modules and digital tools at your own pace.

And finally we have Quit for Life. With the **Quit For Life** Tobacco Cessation Program, you will have 24/7 access to tools and resources to help you quit all types of tobacco use

#### 26. Health Products Benefit FirstLine Essentials+

You can also conveniently order over-the-counter health products with UnitedHealthcare® Health Products Benefit program with FirstLine Essentials

The program works as follows:

- You will have \$40 program credit each quarter to use to order essential health supplies from the Health Products Benefit catalog or online. You can also place an order over the phone
- There are over 500 products like vitamins, supplements, first aid items and more available to order.
- The Firstline catalog will be sent to you each quarter with instructions on how to place your order.
- The products are delivered right to your door at no charge. There is no shipping, handling or tax.
- At the end of the quarter any unused credits will roll over to the next quarter. You will receive a program statement with your account balance and a new catalog each quarter.
- This is a great program that can help you save some money and trips to the store.

# 27. Virtual Education Center

Still want to learn more? Visit the Virtual Education Center today to explore your TRS-Care Medicare Advantage.

You will learn more about the custom programs available to you and watch videos from real life UnitedHealthcare members who share their personal stories of using several of the programs. You can access the Virtual education center from any tablet, computer or smartphone by visiting www.uhc.com/trs-carema

# 28. What to expect after enrollment

Now let's take a moment to discuss what you can expect after enrollment

# 29. What to expect next

[Speaking notes for existing population (exclude from Medicare and You and 1XRO Sessions)] If you are currently enrolled with the TRS-Care Medicare Advantage \$500 deductible plan you will receive an annual notice of change but will not receive a new ID card. You can continue to utilize your same ID card for 2022.

If you are enrolled in the TRS-Care Medicare Advantage \$0 deductible plan for 2021 your plan will be changing to the \$500 deductible plan for 2022. You will receive a annual notice of change and a new ID card for 2022. Make sure you use your new ID card going forward beginning in January.

# 30. Setting up your personal TRS-Care Medicare Advantage online account

After you receive your UnitedHealthcare® member ID card, be sure to sign up for your secure online personal account at UHCRetiree.com/TRS-CareMA so that you may view claim information, view your EOB, search for providers and explore Renew by UnitedHealthcare.

## 31. TRS Advocates

Thank you so much for taking the time to hear about your TRS Care Medicare Advantage Benefits. I know you have lots of questions. For personal specific questions regarding coverages for specific codes/tests or procedures, please contact your customer advocate team. There are no prompts needed, press simply call the number on the back of your ID card and you will be connected to a dedicated TRS Medicare Advantage advocate.

They can help you with finding a provider, scheduling a healthcare appointment such as a Housecall or your annual wellness visit. They can also help you understand your benefits and claims, connect you with local resources and help you take advantage of the many exclusive TRS-Care value-added benefits

The team is composed of dedicated TRS Medicare Advantage advocates based in the Great state of Texas. They are all trained on the custom benefits that are offered to you as a TRS-Care participant. Your advocates have all the tools needed to provide comprehensive responses to answer your individual health needs and help you navigate your benefits to ensure that you're making the most of your plan.

I will now hand the presentation to XXXX with SilverScript who can tall you more about your pharmacy benefits.

# 32. 2022 TRS-Care Medicare Rx Plan - SilverScript

Hello Everyone! My name is \_\_\_\_\_ and I am one of your SilverScript Account Managers. I look forward to administering your prescription drug program for the TRS-Care Medicare Rx Advantage plan. Today I'll go over all the finer points of that plan. So with that said, lets jump right in."

#### 33. TRS-Care Medicare Rx® Benefits

So lets talk a little bit about our benefits. One thing I want you to all know about TRS's prescription plan for the retirees is that it provides a good deal richer benefit than what you would see on those individual or Market place Part D plans.

One of the aspects of that richer benefit is that you don't have to worry about the 'donut hole'. In the standard Market place plan once you accumulate a certain amount of spend on medications you will fall into that donut hole and your copays will go up. That does not happen with TRS-Care Medicare Rx plan, so that's one of the richer benefits that they offer.

There are also no large out of pocket costs for Brand or Specialty drugs, you will have flat copays. You also have access to a very broad network of pharmacies which includes all the large pharmacy chains such as Wal-Mart, Kroger, Target, HEB and others.

Another great aspect of the TRS-Care Medicare Rx benefit is a 90 day supply option thru the CVS-Caremark mail service, or what we call 'Retail Plus Pharmacies' which includes the vast majority of pharmacies in the network. The one pharmacy excluded from that 'Retail Plus Pharmacy' network is Walgreens. You will be able to fill at Walgreens but only up to a 31 day supply, no 90 day supplies at Walgreens. \*\* It is important to note that you do not need to use CVS pharmacies. That has been one of the most common questions we've had about the program: 'If SilverScript is a part of CVS Health are we required to use CVS pharmacies?' –no, you are not. We have a very broad network as I mentioned before that includes Walgreens, Wal-Mart, Kroger, Target, HEB and others

#### 34. Copays - Up to a 31-Day Supply at Retail

With that said, lets talk about our 1 month 31 day supply. Our 31 day supplies at a Retail pharmacy will look like this: The generic copay will be \$5, your preferred brand copay will be \$25, your non-preferred brand copay will be \$50, and your Specialty or high cost tier would be \$50 as well. Note that Specialty/High cost tier medications are limited to a 31 day supply and I'll give you a little more detail on that in our next slide.

# 35. Copays - Up to 90-Day Supply at Retail-Plus Pharmacies or CVS Mail Service Pharmacy

Lets talk about our 90 day supply copays. You can obtain these 90 day copays at those 'Retail Plus Pharmacies' I mentioned in the first slide, or you can get them through a CVS Mail Service Pharmacy. The generic copay will be \$15, your preferred brand copay will be \$70, and your non-preferred brand copay will be \$125.

Again, those Specialty or high cost tier drugs are limited to a 31 day supply, and the largest driver behind that is to control waste. Many times when new prescriptions are issued they're for a recent condition that's come up or they're trying a new medication. Often times these new medications can come with side effects (ex: itchy skin, headaches) and you find out that that medication is not going to work for you or your lifestyle. So what happens to the rest of that medication? It gets tossed in the trash and often times these are very expensive medications. So in order to control costs and keep premiums down we have limited that Specialty/High cost tier to a 31 days supply."

I do want to add that If you do have any unused medications you can properly and safely dispose of them at any of your local CVS Pharmacies (in fact most pharmacies —whether it's a CVS not- will accept unused medications so that they can be properly and safely disposed of).

# 36. Medicare Part D Drug Payment Stages

Now that we've talked about our copays a little bit, lets talk about the Medicare Part D Drug Payment Stages. One of the big differences between the TRS-Care Medicare Rx plan and a marketplace plan, is your exposure to these different stages of the Medicare Part D process. With TRS, in every stage of this process you're going to pay your flat predictable copay, you already know what exactly is going to come our of your pocket. Lets talk about each of those stages: Deductible, Initial Coverage Limit, Coverage Gap and Catastrophic stage.

During the Deductible stage, in a marketplace plan, you will pay the first \$480 out of your own pocket. With the TRS-Care Medicare Rx plan you do not have a deductible, so you can expect to pay your flat predictable copay in the deductible stage.

The next stage is the ICL –Initial Coverage Limit stage, which is what you enter after you've spent \$445 on medications. In a Marketplace plan you would pay 25% of the drug cost. So if you have a \$2,000 medication, 25% of that is going to be \$500. Instead, with the TRS-Care Medicare Rx plan you would pay your flat predictable copay in the ICL stage.

Same holds true in the Coverage Gap stage, once you've incurred \$4,430 in medication costs you would move into this stage —also known as the donut hole. In a Marketplace plan you would pay 25% of the drug cost. With the TRS-Care Medicare Rx plan you would pay your flat predictable copay in the GAP stage. This is part of the richer benefit that TRS offers to their members. And lastly the Catastrophic Coverage stage, you get here after you incur \$7,050 in medication out of pocket costs, and for the vast majority of people your copays are actually going to go down here. With the TRS-Care Medicare Rx plan you would continue to pay your flat predictable copay or Less in the CAT stage."

## 37. Medicare Drug Stage Example:

Next, lets talk a little bit about a real world example looking at those Medicare Part D Drug payment stages. We chose FORTEO which is a widely utilized osteoporosis medication with TRS-Care Medicare Rx plan. The cost of this medication is \$1013.00 for a 31- day supply. Here's what would happen with the Marketplace plan versus the TRS-Care Medicare Rx plan:

You can see in the Deductible stage, in a Marketplace plan you would pay your deductible and then 25% of the remaining cost of that medication totaling to \$613.25. With TRS-Care Medicare Rx it would be just a \$50 copay, saving you \$563.25

The Initial Coverage Limit & GAP stages are both the same, in a Marketplace plan you would pay 25% of that medication cost in both of those stages. Instead, with TRS, no matter what stage you're in you are going to pay \$50/fill for the drug: Forteo, saving you over 200 dollars.

Lastly during the Catastrophic stage, You can see that in a marketplace plan the cost of the medication lowers to \$50.65. With the TRS-Care Medicare Rx plan, you would never pay more than the cost of the medication, in this case \$50.65. So, you would continue to pay your flat predictable copay of \$50 during this stage and still save some change in your pocket.

You can see that having TRS-Care Medicare Rx coverage while you're in those more expensive phases can save you a significant amount of money —which adds to the value of this plan!"

# 38. Diabetic Supply Coverage

Now lets discuss a little bit about diabetic supply coverage. For diabetic supplies there's really 2 sides to it: Part B as in 'Boy' and Part D as in 'Dog'. Certain elements of diabetic supplies process accordingly either on Medicare Part B or Part D.

Meters, Lancets & Test Strips will fall under Part-B. You will want to present your UHC Card at the pharmacy when filling these supplies to process these correctly under your Part-B medical coverage. Needles, Syringes or anything used to administer insulin will fall under your Part-D coverage. If you fill a 90 day supply thru SilverScript you will not have a copay. However, if you fill a prescription for less than 90 days you are going to be responsible for a copay. So make sure when you get the prescription from your Doctor that you get a 90 day supply for those needles and syringes so you can receive that \$0 copay thru SilverScript."

# 39. Communications from TRS-Care Medicare Rx®

"One of the more important parts of joining this plan is all the communications! This time of the year we get a lot of communications from different providers and their plans. We want to make sure you know what's coming and that you know what's important and what to pay attention to. So there are really two parties you may fall into. Are you going to be turning 65, becoming Medicare eligible and joining us soon OR are you already with us and just here for a refresher? If you are turning 65 soon and joining us for the first time, you will be receiving a Turning 65 Packet from TRS about 90 days before your 65th birthday month. That will contain your Summary of Benefits (a high level overview of what the plan is all about). You will also receive a Confirmation of Enrollment from SilverScript 30 days before you enroll into the plan which will contain your critical ID Card. Please make sure that anything you are receiving from SilverScript or TRS, you are opening it and reading it thoroughly. You will also receive a Welcome Season Kit 30 days before enrollment. This will contain your Evidence of Coverage, which covers every single detail of the plan, it will also have your drug list —otherwise known as the formulary, and the pharmacy directory which tells you the 27 closest pharmacies to your house based on your zip code.\*\*Please make sure you keep all of these documentations for your records.

If you are already with us and here for that refresher, please keep an eye out for these mailings: the Annual Notice of Change; you will get this toward the end of October, this will give you details on any changes to the plan between 2020 and 2021. Fortunately for everyone here, we are not making any plan design changes for the 2021 plan year. You will also get an Evidence of Coverage which will give you the full explanation of your plan.

Lastly, you will receive an Explanation of Benefits (EOB) on a monthly basis. Please note that for any month that you fill a prescription you will get an EOB the following month. The EOB will tell you things like: what you paid, what TRS paid, what Part D drug payment stage you are currently in — which TRS members don't have to worry about, and it provides a summary of your month's prescription activity. If you do not fill a prescription within a month then you will not get a statement/EOB. So please keep an eye of for these EOBs a month after you fill a prescription. Before I move onto my last slide, I want to point out for those of you who are joining us soon, that you can only have ONE Part D plan at a time. If you have Part D coverage when you join TRS-Care Medicare Rx, you will be disenrolled from the other plan.

# 40. Thank You!

As we wrap up this presentation, I want to leave you with two really great features we have for you. First, is our Caremark.com site, a one stop shop for all of your prescription management needs. You can print documents, expedite shipping, check your drug cost, and find a pharmacy in your area. Second, is our Customer Care Team standing by 24 hrs/day, 7 days/week and can be reached at 844-345-4577, press option #2. They are a dedicated team of customer care representatives based in San Antonio and they know your plan. Please reach out to them if you have anything that you need help with regarding your TRS Care Medicare Rx plan.

Now, we will transition back over to TRS to wrap up this presentation and lead us into a question and answer session. Thank you everyone for listening & we appreciate your time! Alright, thank you UnitedHealthcare and SilverScript for going over that detailed presentation and reviewing the 2022 TRS-Care Medicare plan benefits