No benefit changes to your 2022 TRS-Care plan!



The past year and a half has been unpredictable. COVID-19 has disrupted our lives, and we continue to adapt to the situation.

However, some things still stay the same – like TRS-Care being the care you can count on. We're pleased to share that your premiums will not increase through 2022! Additionally, your health care benefits will also stay the same in the 2022 plan year.

TRS is able to offer the same level of benefits next year for many reasons, such as:

- TRS-Care's strong financial performance,
- Strategic medical and pharmacy benefit purchasing,
- Diligent program management, and
- Additional appropriations from the Texas Legislature.

These factors keep the program strong so we can continue to provide you with the highest value health care.

KEY FEATURES OF YOUR TRS-CARE STANDARD PLAN

Personalized: Well onTarget through Blue Cross Blue Shield of Texas (BCBSTX) offers personalized tools and resources to help you manage your health conditions and reach wellness goals.

Protected: You are protected from surprise billing, also known as balance billing, from out-of-network providers in certain situations.

Convenient: Connect with BCBSTX Personal Health Guides any day or time for questions about your health plan. You also have a 24/7 nurse line, and easy access to plan details through Blue Access for Members (BAM).

Wellness: Access one-on-one wellness coaching, nutrition programs, and over 10,000 fitness locations for as low as \$19/month.

WANT TO LEARN MORE?

While we're eager to connect with you in-person, our Annual TRS-Care Information Sessions will be held virtually this year.

Be sure to attend this year's virtual presentations to review your 2022 health care plan's benefits. You'll also get the opportunity to have your specific questions answered by TRS, Blue Cross Blue Shield of Texas and CVS Caremark representatives.

Please see the TRS-Care Information Session Invite to find a list of upcoming sessions. Then, head to <u>www.trs.texas.gov/trs-care-events</u> to register for a session that works for you. Remember, registration is on a first-come-first basis!



UNDERSTANDING HEALTH CARE TERMS

When using your TRS-Care plan, you'll see and hear a lot of health insurance words and phrases that may be confusing. Understanding what they mean can ease your stress and save you money.

Let's brush up on some of the most common terms.

Premium: This is the monthly amount you pay for health care coverage.

Deductible: This is the amount you pay annually for covered health care services before your health plan starts to pay. Keep in mind that your health plan covers certain preventive benefits at 100%, even before you meet your deductible.

Coinsurance: Coinsurance is the portion you're required to pay for services after you meet your deductible. It's often a specified percentage of the costs. For example, with TRS-Care Standard, you pay 20% of your costs after you meet the deductible.

Maximum Out-of-Pocket (MOOP): MOOP is the maximum amount you'll pay each plan year for medical costs. After reaching your MOOP, your health plan pays 100% of allowable charges for covered services.

Primary Care Provider (PCP): A PCP is the provider you choose to be your primary source for medical care. Your PCP coordinates all your medical care and treatment, including hospital admissions and referrals to specialists.

In-Network Providers: Possibly the most important factor to understand about your health plan is its network. You can save a substantial amount of money by using only in-network providers. These providers are contracted with your health plan to provide medical services and treatment at a negotiated rate. TRS-Care Standard has a broad network of BCBSTX providers across the state.

NEXT STEPS

- No action required! Keep paying your TRS-Care premiums to receive health coverage.
- Join a TRS-Care Information Session this fall to review your 2022 health plan benefits.
- Use the same medical and prescription ID cards for the 2022 plan year.
- Keeping up! Stay on top of your health by completing Annual Wellness Visits and health screenings!
- **Stay in-network!** Staying in-network means lower out-of-pocket costs for you, because providers and facilities cannot charge more than your plan's allowable amounts for covered services.
- **Plan Ahead.** Know what your plan requires. Be sure to check your benefits information to see which services require prior authorization to avoid unexpected costs.

Stay up to date on TRS-Care news by subscribing to The Pulse for TRS-Care, the TRS health care newsletter. Visit <u>www.trs.texas.gov</u> and click "Subscribe!"

For more information, please call the TRS Health and Insurance Benefits Department at 1-888-237-6762, Monday – Friday from 7 a.m. – 6 p.m.