BlueCross BlueShield of Texas

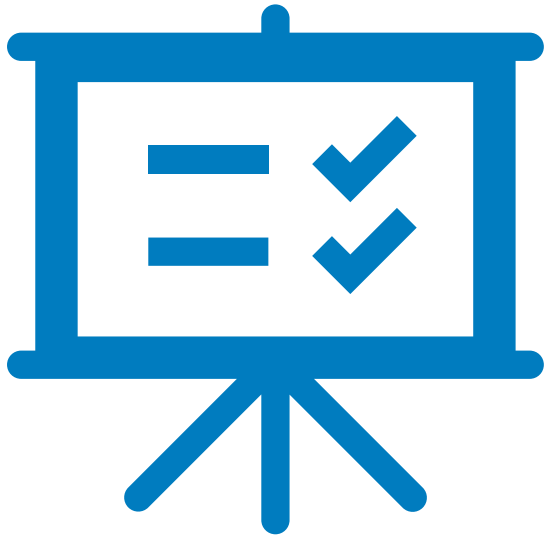


# UT CARE™ Open Access Medicare Advantage PPO Plan

Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation,
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

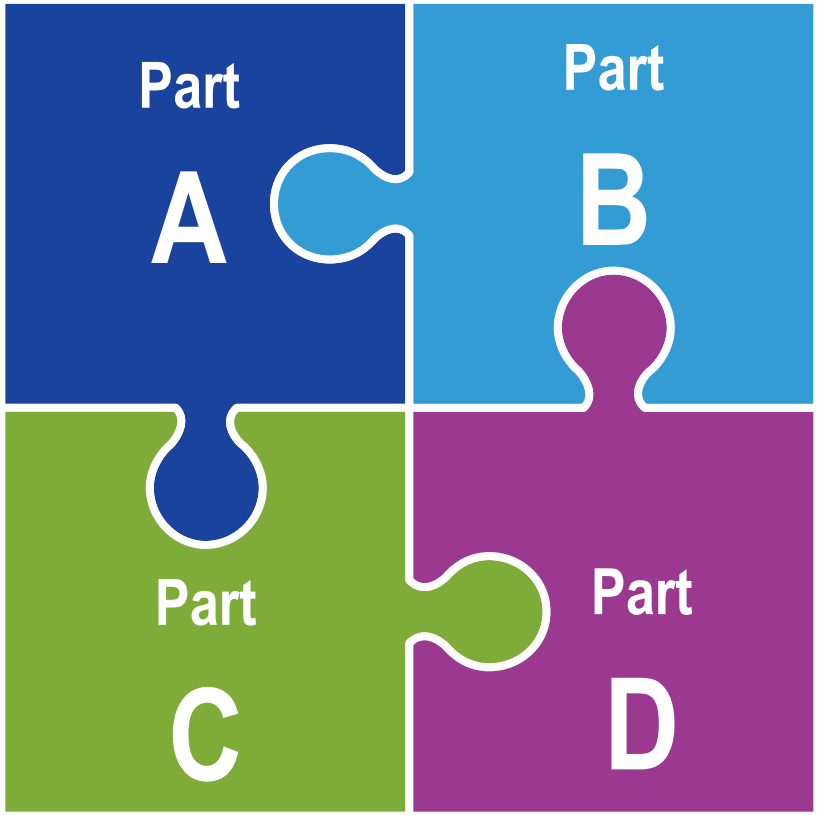
# Today's Topics

- Medicare Basics
- Benefit and Supplemental Highlights
- Visiting Your Provider
- Out of State/Country Coverage
- Blue Access for Members
- Care Coordination
- Planning for Retirement



# Medicare Basics

**Hospital Insurance**




**Medical Insurance**

**Medicare Advantage Plans**

**Prescription Drug Coverage**

**Express Scripts**

Blue Cross and Blue Shield has contracted with the Centers of Medicare and Medicaid Services (CMS) to provide all the benefits of Original Medicare (Parts A & B) plus other health and wellness benefits not covered by Original Medicare. BCBSTX is administering/managing this plan on behalf of Medicare.

BlueCross BlueShield of Texas

# UT CARE Medical Benefit Highlights

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# 2027 UT CARE™ Medicare PPO* Medical Benefits Overview

| | In-Network and Out-of-Network |
|---|---|
| Annual Medical Deductible | $0 |
| Annual Out-of-Pocket Maximum | $0 |
| **Inpatient Hospital Services** | |
| Inpatient Hospital – Acute | $0 copay |
| Inpatient Mental Health Care | $0 copay |
| **Skilled Nursing Facility** | |
| Benefit Period 1–20 days | $0 copay |
| Benefit Period 21–180 days | $0 copay<br>Members allowed 180 days |
| **Emergent and Urgent Care** | |
| Emergency Care (Worldwide)<br>Urgently Needed Services (Worldwide) | $0 copay |
| Ambulance Services (Ground & Air) | $0 copay |

# Medical Benefits Overview Continued…

| | In-Network and Out-of-Network |
|---|---|
| **Health Care Professional Services** | |
| Primary Care Physician Services | $0 copay |
| Physician Specialist Services | $0 copay |
| **Outpatient Rehabilitation Services** | |
| Cardiac Rehabilitation Services | $0 copay<br>Medicare allows a maximum of 2 one-hour sessions per day up to 36 sessions in 36 weeks. |
| Pulmonary Rehabilitation Services | $0 copay<br>Medicare allows a maximum of 36 sessions. |
| Occupational & Physical Therapy and Speech Pathology Services | $0 copay<br>Medicare allows unlimited visits when medically necessary. |
| **Outpatient Mental Health** | |
| Psychiatric & Mental Health Specialty Services | $0 copay |

# Medical Benefits Overview Continued….

| | In-Network and Out-of-Network |
|---|---|
| **Outpatient Substance Abuse Services** | |
| Outpatient Substance Abuse & Opioid Services | $0 copay |
| **Outpatient Diagnostic/Therapeutic Radiation Services** | |
| Lab Services, Diagnostic Procedures, Therapeutic Radiology, Diagnostic Radiology Services/X-Ray, Advanced Imaging (MRI, MRA, CT Scan, PET) | $0 copay |
| **Other Outpatient Services** | |
| Outpatient Hospital Services, Ambulatory Surgical Center (ASC) Services, End-Stage Renal Disease/ Dialysis Services | $0 copay |
| **DME, Prosthetics, Diabetic Supplies** | |
| Durable Medical Equipment (DME)/Medical Supplies Diabetes Supplies and Services | $0 copay |
| **Medicare Preventive Services** | |
| Medicare-covered Preventive Services | $0 copay |
| **Medicare Part B Rx Drugs** | |
| Medicare Part B Rx Drugs | 0% coinsurance |

# Medical Benefits Overview Continued…..

| | In-Network and Out-of-Network |
|---|---|
| **Supplemental Benefits (These are non-Medicare covered benefits)** | |
| **Routine Hearing Exam** | |
| Routine Hearing Exam<br>*1 routine hearing exam each year* | $0 copay |
| Hearing Aid Allowance | $2,000 allowance for both ears in-network and out-of-network every 3 years |
| **Other Supplemental Benefits** | |
| Routine Chiropractic Services | $0 copay<br>(35 visits per year) |
| Private Duty Nursing | $10,000 allowance |

# Health and Wellness Benefits

**Included in your plan, you will have access to extra health and wellness benefits:**

- MDLIVE® Virtual Visits
- 24/7 Nurseline
- Blue365 Discount Program
- Hearing Services
  - Exam: $0 copay
  - Hearing Aids: $1,000 per ear every 3 years
- SilverSneakers® Fitness Program
- Private Duty Nursing
- Learn to Live Mental Health Services
- Airrosti Joint and Muscle Care
- Wondr Health™ Weight Loss and Well-being



# Hearing Services

**Your plan includes hearing aid benefits. Greater discounts are available when using TruHearing, a provider affiliated with BCBSTX.**

### Exams

- A hearing exam/year plus necessary follow-up visits for fitting and adjustments. $0 copay.

### Hearing aids

- $1,000 per ear hearing aid allowance, once every 3 years.
- TruHearing offers discounts on prescription hearing aids.

### Over-the-Counter (OTC) Hearing Aids

- The plan hearing benefits do not apply to over-the-counter hearing aids.
- TruHearing provides discounts on OTC hearing aids



# SilverSneakers®

## What is SilverSneakers?

- SilverSneakers is a fitness and lifestyle benefit that gives you the opportunity to connect with your community, make friends and stay active.

## What does SilverSneakers include?

- Memberships to thousands of fitness locations
- Group exercise classes designed for all abilities
- SilverSneakers On-Demand® online workout videos that feature tips on fitness and nutrition, and allow you to exercise in the privacy and safety of your own home
- SilverSneakers GO® mobile app with workout programs, location finder and more



# Virtual Visits

## What are Virtual Visits?

Virtual Visits, powered by MDLIVE, allow Blue Cross Group Medicare Advantage plan members to access care for non-emergency situations by phone, mobile app or online video anytime, anywhere. Available 24/7.

You can speak to a board-certified doctor with an average wait time of less than 20 minutes, or you can schedule an appointment at a time that works best for you.

MDLIVE doctors can treat a variety of non-emergency conditions, including:

- Allergies
- Asthma
- Cold/flu
- Ear Infection
- Fever
- Headache
- Insect Bites
- Nausea
- Pink Eye
- Sinus Infection
- Rash
- And More



**Prepare for the unexpected — activate your MDLIVE account now!**

To activate your account, free of charge, you can choose what is easiest for you:

- Call MDLIVE at **1-866-954-3585**
- TTY users call **1-800-770-5531**
- Go to **www.mdlive.com/bcbstx-medicare**
- Text **BCBSTXMEDICARE** to **635-483**
- Download the MDLIVE app

**If needed, you may receive an e-prescription from Virtual Visits to your local pharmacy.**

# Virtual Visits – Behavioral Health

In addition, MDLIVE provides care for a large variety of mental health conditions and the life events that can prompt or intensify them, including:

- Loss of a loved one
- Health concerns
- Relationship issues
- Divorce or separation
- Experiencing a traumatic event
- Stress related to aging

✓ Find a therapist that's right for you and have a phone or video visit.

✓ Evening and weekend appointments are available.

✓ You may ask to see the same provider for all your behavioral health visits.



BlueCross BlueShield of Texas

# Visiting Your Provider

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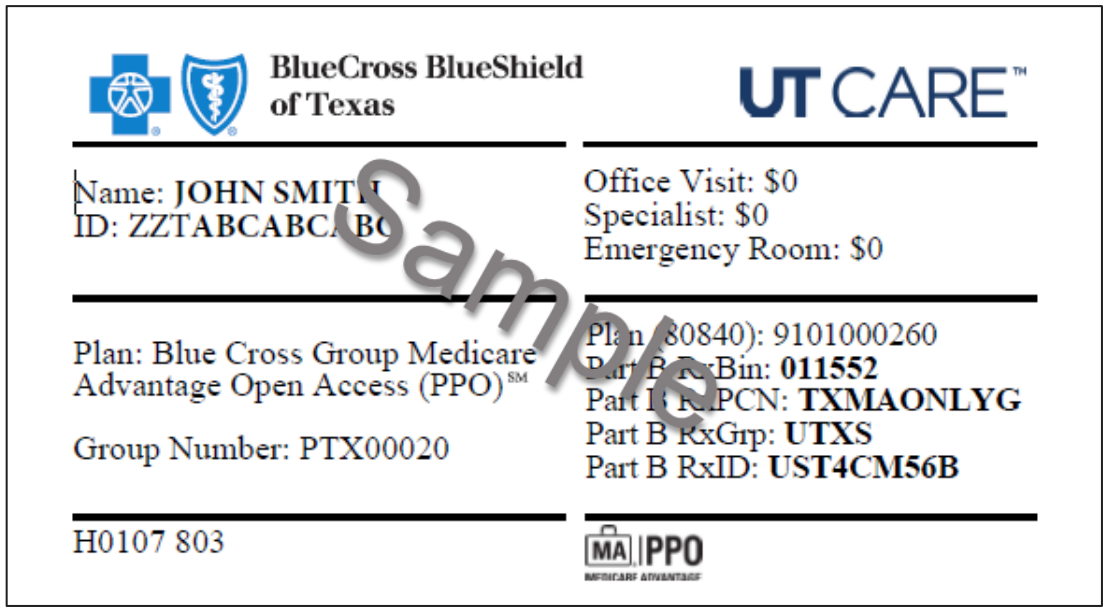
# A National Network

- Blue Cross Group Medicare Advantage Open Access (PPO) offers members access to care from any providers nationwide who accept Medicare assignment and are willing to bill us. 98% of U.S. physicians accept Medicare assignment, according to the Centers for Medicare & Medicaid Services (CMS).
- Members' coverage levels are the same inside and outside their plan service area nationwide for covered benefits.
- Referrals are not required for office visits.

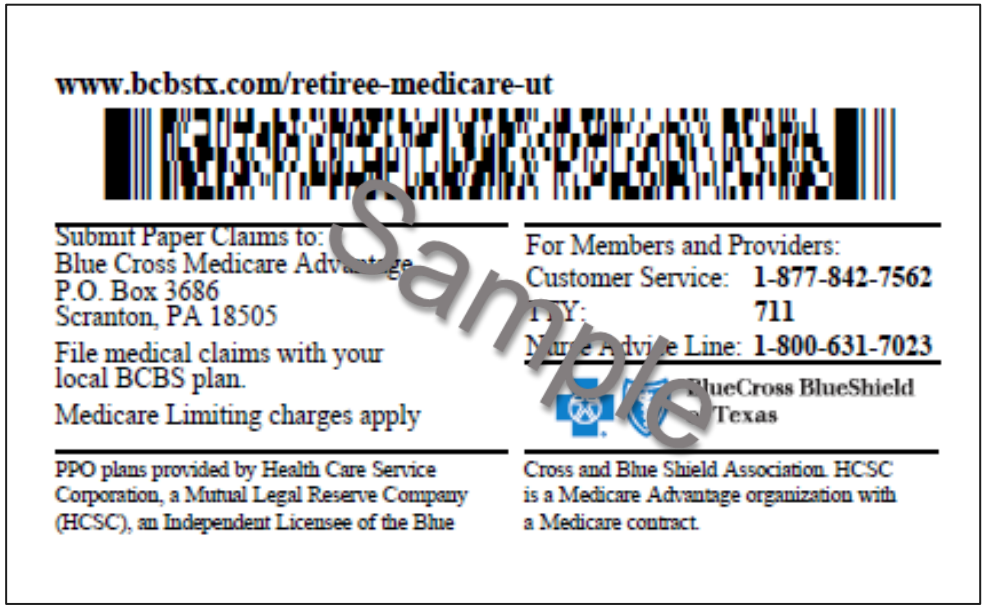


# Member ID Card

- You will only need to present your UT CARE member ID card whenever you receive a medical service or benefit covered by your plan. You do not need to show your Original Medicare card.
- Providers will send your claims directly to BCBSTX or their local BCBS.
- A group number is not necessary.




Front of ID Card




Back of ID Card

# Prior Authorizations

Prior Authorization (PA) is used when a contracted provider needs to get approval from the health plan to deliver a service. The goal is to make sure the service is best for the member, medically necessary and safe.

- **PAs are not the member's responsibility.** Contracted Providers are responsible for getting a PA. If they fail to get a PA before providing a service, the plan may not pay the claim, and the provider would have to absorb the cost of the service.

- **Members are not required to pay for the service if the provider fails to get a PA.**

- If necessary, we can engage a care coordinator to assist with any additional member support.

***Provider Interactions***

– *Providers can request a PA by calling customer service or via fax.*

– *Service delays can occur if a provider doesn't submit requested documentation and records.*

– *If services are delayed or denied, providers can request a peer-to-peer review and/or appeal.*

# Make the Most of Your UT CARE Plan

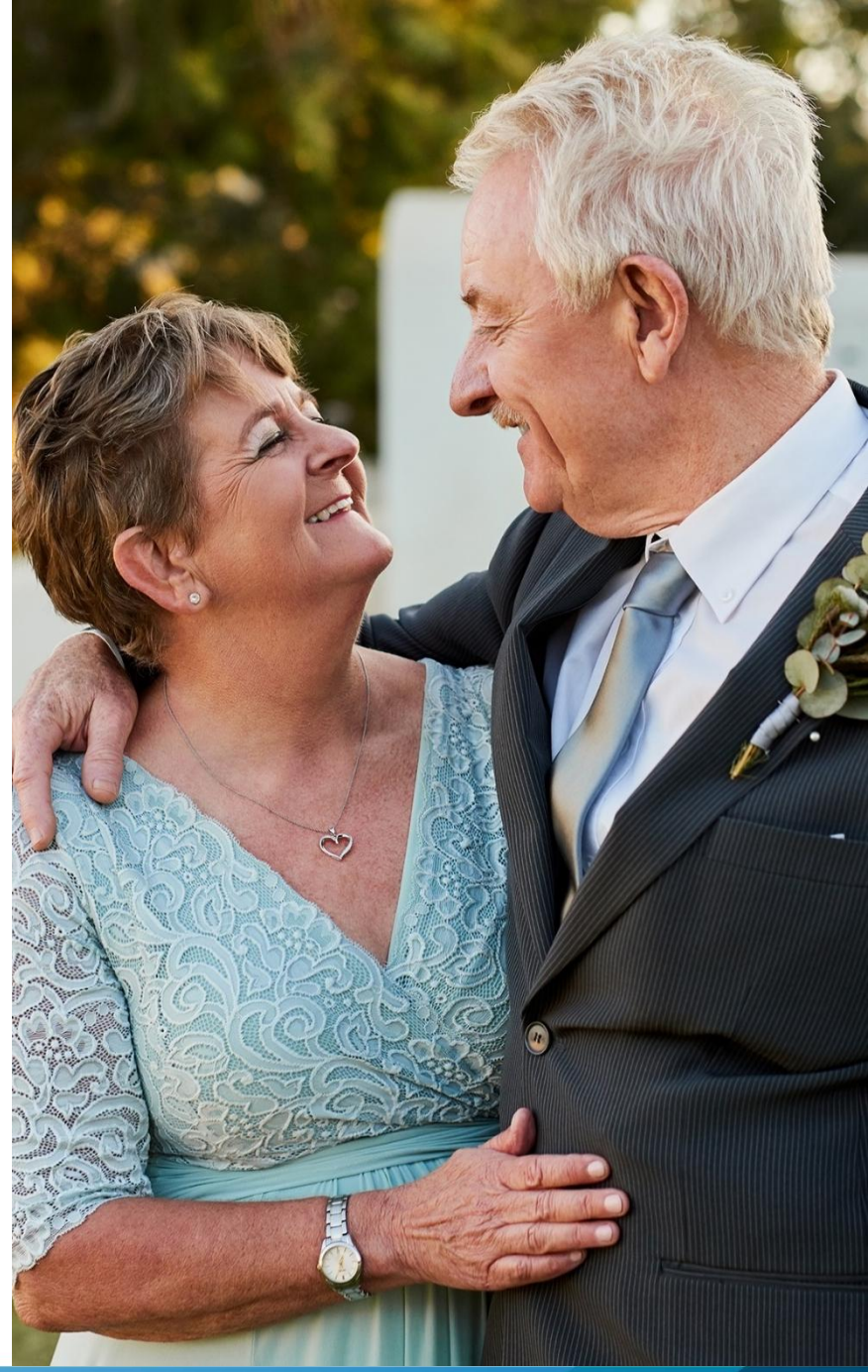
A few simple steps can make an outsized difference in staying informed and healthy:

1) **Keep Your Contact Information Current** - to receive important updates and reminders

2) **Engage a Primary Care Provider (PCP)** - members who do tend to have better health outcomes and fewer hospitalizations.

3) **Schedule Your Annual Wellness Visit & Health Screenings** - this no-cost visit focuses on prevention, screenings, and your long-term health goals.

4) **Use Telehealth Resources** - Many major medical centers across Texas offer telehealth visits so you can receive care from home.



# Plan Reminders

- A Provider Notification Letter is available on the web site—www.bcbstx.com/retiree-medicare-ut under Find Care, and upon request.
- Members' coverage levels are the same for covered benefits nationwide, inside and outside the plan service area.
- This simplifies the process for providers because they only submit claims to Blue Cross and Blue Shield instead of sending the claims to Medicare first.
- Referrals are not required for office visits.
- Prior authorization may be required for certain services from Medicare Advantage-contracted providers with BCBSTX.
- If your provider currently sees you as a patient, be sure to have them update your full member ID number when submitting claims.



BlueCross BlueShield of Texas

# Out of State and Out of Country Coverage

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# Out of State Coverage

- Because this is an Open Access PPO plan, you can see any provider who agrees to see you as a patient, accepts Medicare assignment, and agrees to bill the local Blue Cross and Blue Shield plan.

  Providers are familiar with this claims process.

- You have the same coverage in your home state or while traveling the country.



# Out of Country Coverage

- **UT CARE retirees** have the same emergency and urgent care benefits out of the country as they do within the United States.

- The Blue Cross and Blue Shield **Global Core program** gives retirees traveling outside of the United States and its territories access to **urgent and emergency** medical assistance services with a zero-dollar copay.

- You may need to pay for care at the time of service and file the claim. Claim Forms for care received abroad can be obtained at www.bcbsglobalcore.com or by calling **1-800-810-BLUE**.

- Emergency services include care needed for broken bones, heart attack/stroke, poisoning and more.

BlueCross BlueShield of Texas

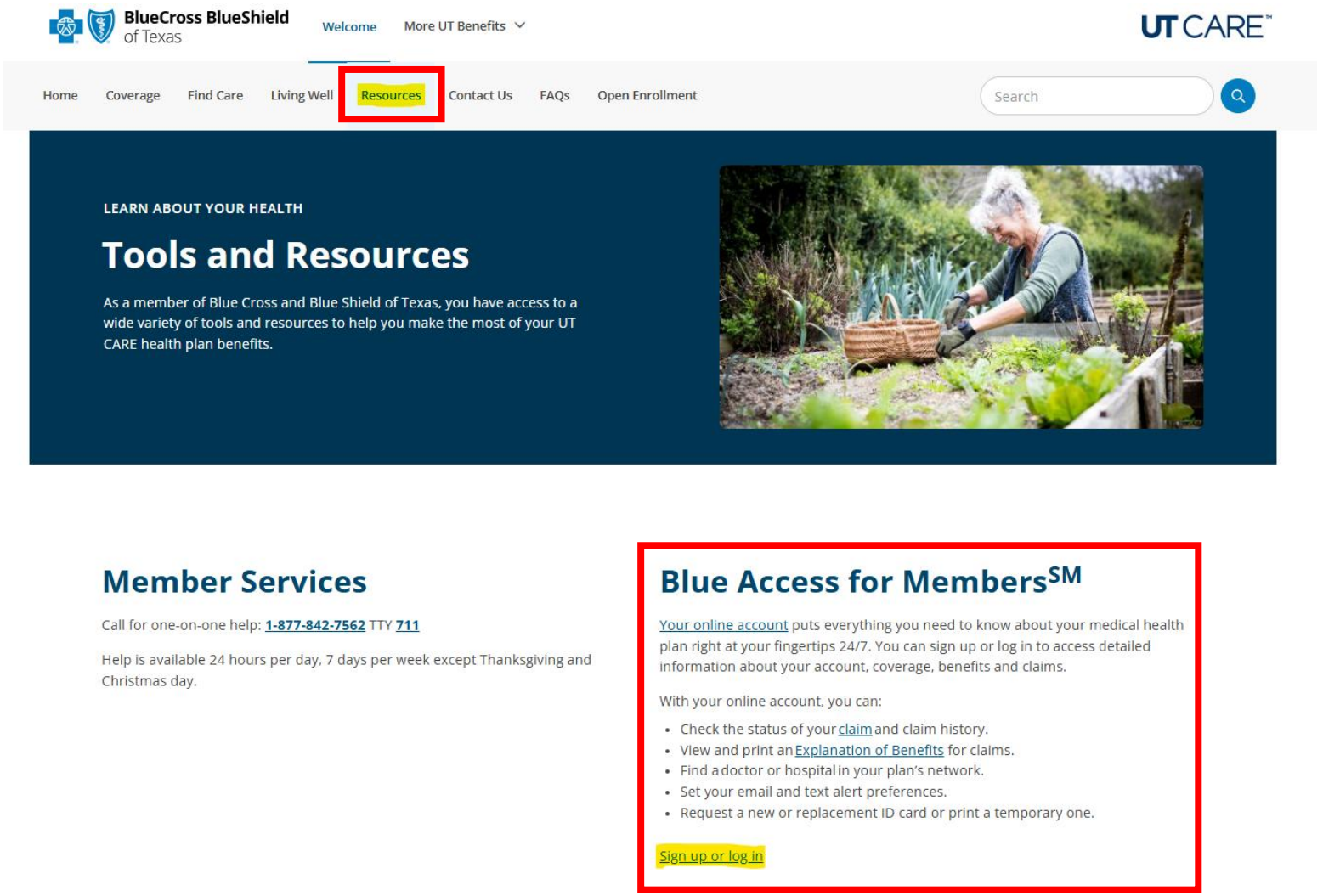
# Blue Access for Members (BAM)

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# Logging Into BAM

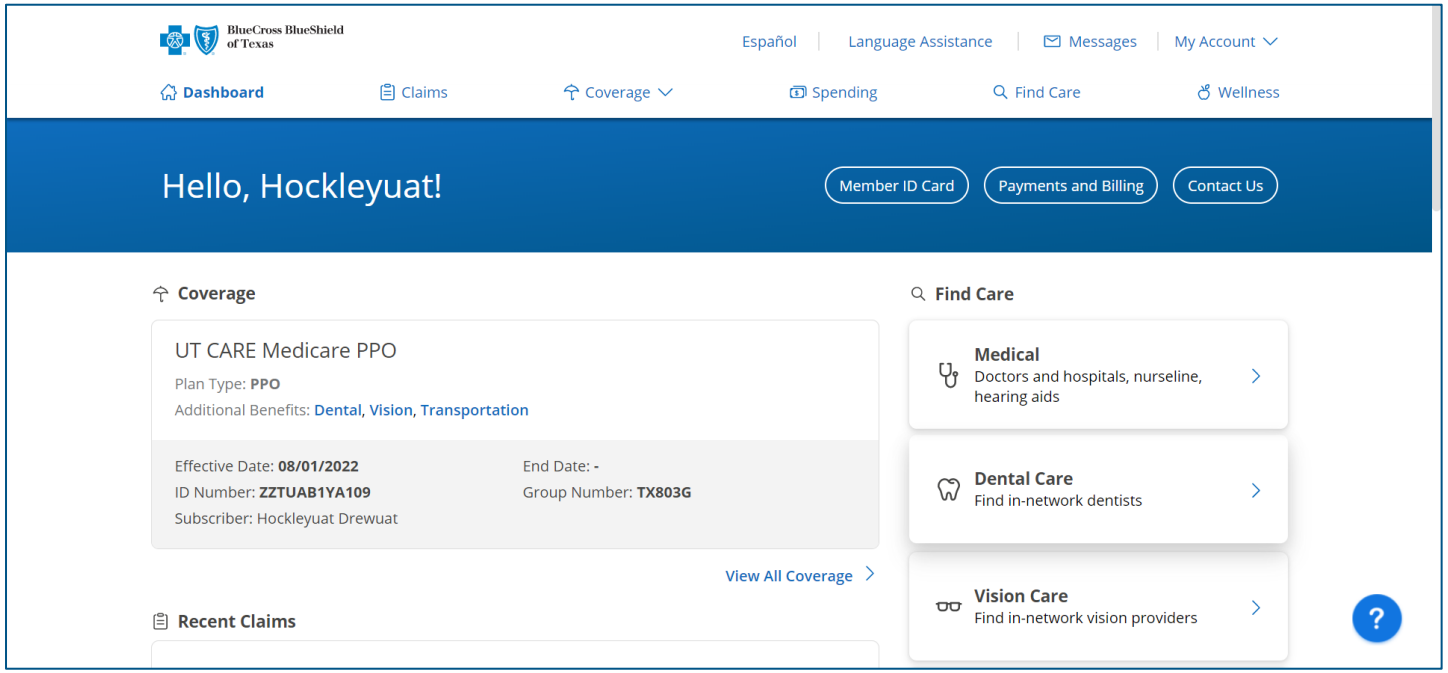
- From the UT CARE Homepage: https://www.bcbstx.com/retiree-medicare-ut

- Locate the Resources section and click “Sign up or log in”



# Dashboard/My Account

- On our Dashboard page, we currently highlight the three most recent claims as well as options to find care.
- The dashboard also has navigation links to the other areas of BAM,  including:
  - Profile and Preferences
  - Coverage
  - ID Card*
  - Forms and Documents
  - Wellness




* You can view your current identification card and download a copy to your computer or cell phone. Members also have the option to order a new ID card from here if you would like a physical replacement.

BlueCross BlueShield of Texas

# Care Coordination

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# Care Coordination Overview

**Your plan offers the ability to work with Care Coordinators* to help manage your health care needs. They can connect you with the right resources for overall care management.**

## Care Coordinators are clinicians who can help you:

- Adjust to being at home after a hospital stay
- Set up care with your doctor and other health care team members
- Better understand your health condition(s), medications and treatments
- Navigate the health care system to improve your quality of life and save money

***Care Coordinators are available to help you, but you do not have to use them to manage your care.**

# In-Home Health Assessment

Your plan includes an **In-Home Health Assessment (IHA)** by a licensed and credentialed clinician—Certified Nurse Practitioner, Physician Assistant or MD—from our trusted partner, **Signify**, at no cost to you.

**How can you make the most of your 45- to 60-minute IHA or telehealth visit?**

- Discuss health concerns and learn more about disease management programs
- Have your home checked for possible safety issues
- Take the extra time outside of a primary care provider visit to ask questions about your physical, emotional and mental health in the comfort of your home



**You receive a 1-page summary of the evaluation. With your permission, a full report of the IHE is shared with your primary care provider (PCP).**

BlueCross BlueShield of Texas

# Planning for Retirement

Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation,
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# Planning for Retirement.

- Approximately 60 days before you (subscriber, spouse, active or retiree) turn 65, you will receive a letter from BCBSTX with instructions for enrolling in Medicare, including the Social Security Administration phone number and website.

- For Medicare-eligible individuals, you must sign up for Medicare Parts A and Part B coverage and begin to pay your Part B premium.

- Once you receive your Medicare card, please call 1-877-842-7562 and provide the 11-character Medicare Beneficiary Identifier (MBI) and Medicare effective date located on your red, white, and blue Medicare card. Enrollment in UT CARE cannot proceed without the MBI number.

- You will receive your new UT CARE Member ID Card and a Welcome Kit 10-14 days after Medicare confirms your enrollment.

# UT CARE Eligibility

- UT CARE Medicare Advantage PPO Plan is for Medicare-eligible retired employees and Medicare-eligible spouses of retired employees
- Medicare-eligible dependents of retirees will have UT CARE, even if the retired employee is not yet Medicare-eligible
- Any retired employees or enrolled spouses not yet Medicare-eligible will continue their UT SELECT medical coverage

BlueCross BlueShield of Texas

# UT CARE Customer Service

Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation,
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# We’re Here to Help

- Highly trained professionals stand ready to help you find a provider, answer benefit questions, or help coordinate care.

- UT CARE Customer Service Highlights from 2025:
  - 65,000+ calls received from UT CARE members
  - 93% of calls were answered in under 30 seconds
  - 96% First Call Resolution Rate, meaning the vast majority of members had their question or issue resolved during their first interaction with Customer Service.

Our advocates are a valuable resource and are equipped to help members navigate their benefits and resolve issues quickly. Please call the number on the back of your member ID card.

# Call Us

- Call UT CARE dedicated customer service for one-on-one help with your questions. **1-877-842-7562** / TTY **711**.
  - This number is on the back of your ID card.
  - Customer Service is available 24/7.

- Neither your institution HR office nor OEB has access to your claims or coverage information, so be sure to call customer service.

- Visit the UT CARE website at **www.bcbstx.com/retiree-medicare-ut** for additional information including FAQs, presentations and a digital copy of plan materials.

BlueCross BlueShield of Texas

# Questions

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# Important Plan Information

PPO employer/union group plan provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association. HCSC is a Medicare Advantage organization with a Medicare contract. Enrollment depends on contract renewal.

UT CARE™ Medicare PPO is an open access Medicare Advantage PPO plan. On occasion, you may receive automated communications that reference plan name 'Blue Cross Group Medicare Advantage Open Access (PPO)℠ .' This plan name also refers to UT CARE Medicare PPO.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

SilverSneakers® is a wellness program owned and operated by Tivity Health, Inc., an independent company. Tivity Health and SilverSneakers® are registered trademarks or trademarks of Tivity Health, Inc., and/or its subsidiaries and/or affiliates in the USA and/or other countries.

Virtual Visits may be limited by plan. For providers licensed in New Mexico and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of <State>. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.

TruHearing® is a registered trademark of TruHearing, Inc., which is an independent company providing discounts on hearing aids.

# Important Plan Information cont.

Blue365 is a discount program only for BCBSTX members. This is NOT insurance. Some of the services offered through this program may be covered under your health plan. Employees should check their benefit booklet or call the Customer Service number on the back of their ID card for specific benefit facts. Use of Blue365 does not change monthly payments, nor do costs of the services or products count toward any maximums and/or plan deductibles. Discounts are only given through vendors that take part in this program. BCBSTX does not guarantee or make any claims or recommendations about the program's services or products. Members should consult their doctor before using these services and products. BCBSTX reserves the right to stop or change this program at any time without notice.

Hearing services are provided by American Hearing Benefits, Beltone™, HearUSA and TruHearing®. Vision services are provided by ContactsDirect®, Croakies, Davis VisionSM, EyeMed Vision Care, Glasses.com, Jonathan Paul Fitovers and LasikPlus®.

# Translation Availability

We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-877-774-8592. Someone who speaks English/Language can help you. This is a free service.

Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-877-774-8592. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

# Additional Information

Blue Cross and Blue Shield of Texas complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Blue Cross and Blue Shield of Texas does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Blue Cross and Blue Shield 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, contact Civil Rights Coordinator.

If you believe that Blue Cross and Blue Shield of Texas 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 with: Civil Rights Coordinator, Office of Civil Rights Coordinator, 300 E. Randolph St., 35th floor, Chicago, Illinois 60601, 1-855-664-7270, TTY/TDD: 1-855-661-6965, Fax: 1-855-661-6960. You can file a grievance in person or by phone, mail, fax, or email. If you need help filing a grievance, Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.