



TRS-ActiveCare®

TEACHER RETIREMENT SYSTEM OF TEXAS



Welcome

Health Coverage For You and Your Family
2011-2012 Plan Year, Effective September 1, 2011

Agenda

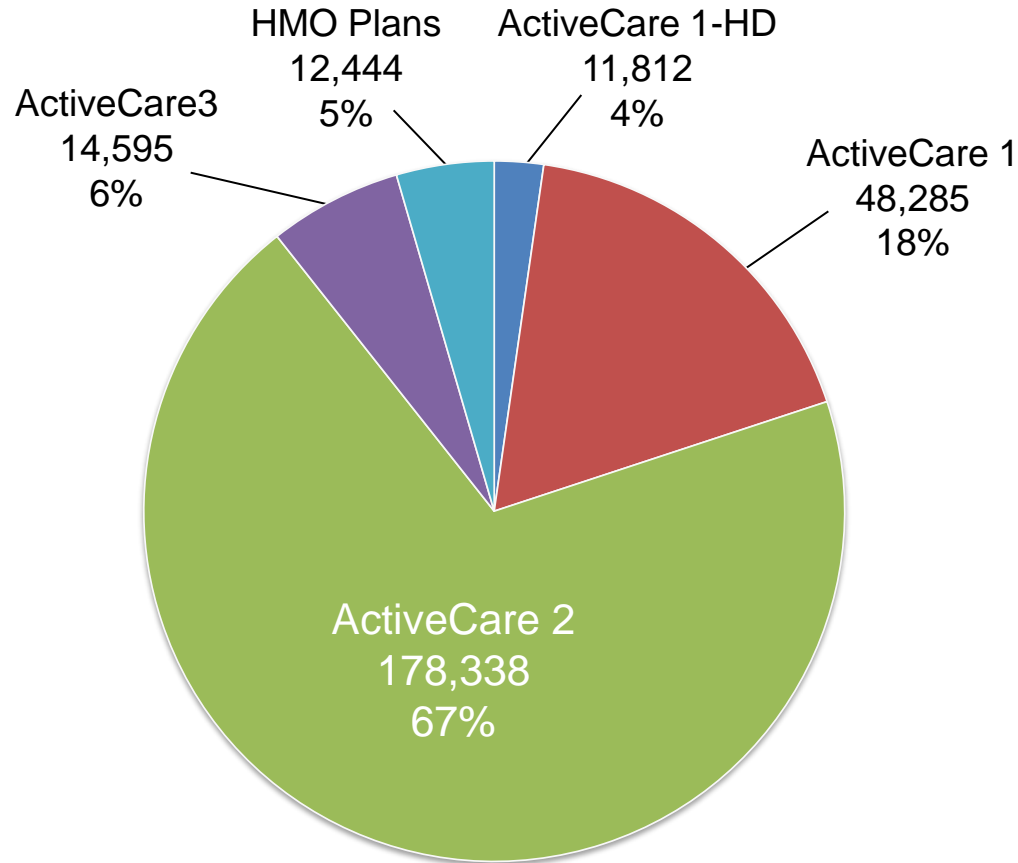
- TRS-ActiveCare Program Highlights
 - Enrollment Summary
 - Facts and Figures
- 2011-2012 Health Plan Options
 - ActiveCare 1-HD, 1, 2 and 3 PPO Plans
- How to Enroll
 - Who is Eligible to Enroll
 - Cost of Coverage
 - Enrollment Support

What is TRS-ActiveCare?

- Established and signed into law in 2001 (Chapter 1579, Texas Insurance Code)
 - Blue Cross and Blue Shield of Texas selected to administer the program in January 2002 and 2008
 - Medco selected as PBM in January 2002 and 2008
 - Program effective date was September 1, 2002
 - HMO options added in 2003
- A statewide health care benefits program for employees of school districts, charter schools, regional educational service centers and other educational districts
- Law authorizes funding levels to help employees pay for coverage

1,115 districts/entities participate in TRS-ActiveCare (89% of eligible entities)

Enrollment Summary (Employees by Plan, Feb. 2011)



FirstCare Health Plans 3%

Scott & White Health Plan 1.8%

Valley Baptist Health Plans 0.2%

265,474 Employees • 445,969 Members (Employees and Dependents)



TRS-ActiveCare[®]
TEACHER RETIREMENT SYSTEM OF TEXAS



PPO Plan Overview

ActiveCare 1-HD, 1, 2 and 3 Plans
2011-2012 Plan Year



BlueCross BlueShield of Texas
*Experience. Wellness. Everywhere.*SM

PPO Network for ActiveCare 1-HD, 1, 2 and 3

Network

Statewide (**all 254 counties**)

No need to:

- Select a Primary Care Physician
- Obtain referrals for specialist care

Receive **highest level** of benefits:

- Pay less for care
- No balance billing

No claim forms

- Provider files claim for you

The allowable amount for non-contracting providers is limited to 50% of billed charges

Always verify provider network status

Non-Network:

- You **pay more** of the cost of out-of-network benefits
 - Higher deductibles, coinsurance
- You may need to file your own claim
- You could be balance **billed** for amounts over allowed amount



PPO Plan Overview (Network Level of Benefits)

Services	ActiveCare 1-HD	ActiveCare 1	ActiveCare 2	ActiveCare 3
Deductible (individual/family)	\$2,400/\$2,400	\$1,200/\$3,000	\$750/\$2,250	\$300/\$900
Out-of-Pocket Maximum (individual/family; does not include deductibles)	\$3,000/\$5,000	\$2,000/\$6,000	\$2,000/\$6,000	\$1,000 per individual
Coinsurance (Plan pays/ participant pays)	80% / 20%	80% / 20%	80% / 20%	80% / 20%
Office Visit Copay	20% after deductible		\$30 for primary \$50 for specialist	\$20 for primary \$30 for specialist

New for 2011-2012: ActiveCare 2 deductible increased and ActiveCare 3 now has a deductible for in-network care

Primary means care provided by **family practitioners, internists, OB/GYNs** and **pediatricians**.

All other physicians are specialists.

PPO Plan Overview (Network Level of Benefits)

Services	ActiveCare 1-HD	ActiveCare 1	ActiveCare 2	ActiveCare 3
Current Benefit				
Preventive Care	\$0 copay up to \$500 per person, per plan year Remaining charges subject to deductible and coinsurance		\$30 for primary \$50 for specialist	\$20 for primary \$30 for specialist
New Benefit for 2011-2012				
Preventive Care	Plan pays 100% when using network providers			

- Refer to Plan Highlights on the website or see Enrollment Guide for a list of covered services when using network providers
- Covered services under this benefit must be billed by the provider as “preventive care”

PPO Plan Overview (Network Level of Benefits)

New Benefits for 2011-2012

Services	ActiveCare 1-HD	ActiveCare 1	ActiveCare 2	ActiveCare 3
High-tech Radiology (CT scan, MRI, nuclear medicine)	20% after deductible		\$100 copay per service, plus 20% after deductible	\$100 copay per service, plus 20% after deductible
Inpatient Hospital	20% after deductible		\$150 copay per day, plus 20% after deductible (\$750 max copay per admission; \$2,250 max/year)	\$150 copay per day, plus 20% after deductible (\$750 max copay per admission; \$2,250 max/year)
Emergency Room	20% after deductible		\$150 copay, plus 20% after deductible (copay waived if admitted)	\$150 copay, plus 20% after deductible (copay waived if admitted)
Outpatient Surgery	20% after deductible		\$150 copay per visit, plus 20% after deductible	\$150 copay per visit, plus 20% after deductible

EPISD Offers Tax Reduction Benefits

TRS does not offer the Premium Conversion/Section 125, Health Savings Accounts HSA or the Flexible Spending Account (Dependent Care or Medical Care) FSA

however

EPISD as your employer offers various tax reduction benefits through payroll deduction to include:

- Section 125 Premium Conversion – allows you to pay for health, dental and vision premiums from your paycheck before taxes
- Flexible Spending Account
 - Medical
 - Dependent Care
- Health Savings Account (HSA)

Flexible Benefit Plans

Section 125 – Premium Conversion

Is an IRS approved way for employees to pay health insurance & some voluntary benefit plan premiums, out of pocket medical expenses and eligible child or dependent care costs with pre-taxed dollars.

This is a benefit that can only be offered by your employer through payroll deduction.

In effect by participating; employees can increase their take-home pay by reducing their taxable income.

Example: Section 125 – Premium Conversion

Statement	Not Participating	Participating
Total Monthly Income	\$1,263.38	\$1,263.38
TRS	80.86	\$ 80.86
Medical Premiums		\$ 165.00
Dental Premiums		\$ 14.39
Vision Premiums		\$ 6.98
Adjusted Gross Income	\$1,182.52	\$ 996.15
Federal Taxes	\$ 295.63	\$ 249.04
Net Income	\$ 886.89	\$ 747.11
Medical Insurance Premiums	\$ 165.00	
Group Life Insurance Premiums	\$ 5.41	\$ 5.41
Dental Premiums	\$ 14.39	
Vision Premiums	\$ 6.98	
Spendable Income	\$ 695.11	\$ 741.70
Savings by participating in the Section 125 is <u>\$46.59</u>		

Flexible Spending Account (FSA)

- Medical Care Account – for eligible medical expenses (To include health plan deductibles, co-pays medical and Rx, co-insurance, vision care expenses and dental care expenses).

You may pledge any amount **up to \$5,000** per plan year for any eligible medical related expenses that has been incurred but that will not be paid or reimbursed through a group or individual health care plan. 2011 - 2012 Plan Year ends August 31, 2012. Deductions will begin on the September 15, 2011 paycheck.

- Dependent Care Account -Dependent Care expense must be work related, for your eligible dependent (defined by the IRS) who is under the age of 13 and/or for the care of a dependent or spouse who is physically or mentally incapable of self-care.

FLEXIBLE SPENDING ACCOUNTS

**It is important that you budget carefully when taking advantage of either the [Medical Reimbursement](#) and/or the [Dependent Care Account](#).

The same tax law that permits this benefit also specifies that any money that is left in your account at the end of the plan year must be forfeited.

Important Notes about the FSA - Medical

- It is important to note that the date of the service for eligible expenses must be incurred within the plan year (09/01 to 8/31). EPISD has adopted the “Grace Period” that allows an additional 75 grace days to incur eligible expense (September 1, 2011 through November 14, 2012).
NOT THE DATE OF PAYMENT, controls the reimbursement.
- *Claims **incurred** during a Flexible Benefit Plan Year may be filed up to 90 days after the end of the plan year. For 2011-2012, the deadline is November 30, 2012*

The Flexible Benefit Plan grace period only extends to the Medical Reimbursement Account.

Flexible Spending Accounts

Dependent Care Account

- Pay for dependent care expenses with pre-tax dollars.
- Dependent must be:
 - Children under the age of 13
 - Care of dependent, spouse, or elderly parent who is physically or mentally incapable of self-care
- Qualified dependent care expenses must be work related

Examples include:

Child-care center or adult day care center

Baby-sitter, caretaker, or after school care

*The maximum amount you can contribute to your DCA is:
\$2,500 - if filing an Individual Federal Income Tax Return
\$5,000 - if married. The minimum pledge amount is \$240*

www.irs.gov/publications/p502/index.html

TaxSaver Plan – FSA Administrator

Administrator for EPISD Flexible Spending Account

<http://www.taxesaverplan.com/>

- Helpful Information
- News & Updates – IRS Information
- Tax Calculator
- Listing of Eligible Expenses
- Frequently Asked Questions and Answer

Health Savings Account (HSA)

- **What is an HSA?**

- Special account owned by an individual and used to pay out-of-pocket expenses (such as deductibles) or to grow as savings
- Portable, meaning the HSA funds always belong to the individual

- **Who is eligible?**

Per IRS rules, any adult can contribute to an HSA if he/she:

- Has coverage under an HSA-qualified high deductible health plan
- Has no other first-dollar medical coverage
- Is not enrolled in Medicare
- Cannot be claimed as a dependent on someone else's tax return

- **Does TRS offer an HSA?**

- No! But ActiveCare 1-HD qualifies as an HDHP for all coverage categories and ActiveCare 1 qualifies for employee-only coverage
- Employees are not required to have an HSA to enroll in these plans but by enrolling, you save on income taxes and have savings set aside to pay the high deductible and out of pocket expenses.

JPM Chase – Financial Custodian for HSA

JP Morgan Chase is the Financial Custodian
for the Health Savings Account (HSA)

- On-line enrollment (**Now AVAILABLE**)
- Payroll Deduction before Tax
- Streamlined Debit Card (Integrated with TRS-AC plans through BCBS and Medco Rx)
- EPISD pays monthly maintenance fee
- Other fees may apply

Health Savings Account

- If you are contributing to a FSA Medical, you cannot contribute to an HSA until the “**Grace Period**” has run out. Contributions to an HSA can be made at any time of the year as long as you meet the eligibility criteria.
- Enrollment links can be found on the EPISD Employee Benefits Website at : www.episdbenefits.org
- Click on the HSA tab.

Blue Distinction Centers for Bariatric Surgery

Important:

Bariatric surgery procedures for weight loss, such as lap band and gastric bypass, must be performed at one of the Blue Distinction Centers for Bariatric Surgery or the procedure will **not** be covered by TRS-ActiveCare

- List of Blue Distinction Centers for Bariatric Surgery is subject to change without notice
- Refer to the Doctors and Hospitals section of the website, www.bcbstx.com/trs or call Customer Service for most current list

Benefit Change for Bariatric Surgery

Benefit	Services Performed by Blue Distinction Center for Bariatric Surgery Providers
Bariatric Surgery Copay <i>(per person, per procedure, plus 20% after deductible for surgeon charges)</i>	<p style="text-align: center;">\$5,000</p> <p style="text-align: center;">(Does not apply to plan year deductible or to out-of-pocket maximum)</p>
Facility Charges	<p style="text-align: center;">Inpatient</p> <p style="text-align: center;">\$150 copay per day, plus 20% after deductible (\$750 maximum copay per admission; \$2,250 maximum per plan year)</p> <p style="text-align: center;">Outpatient</p> <p style="text-align: center;">\$150 copay per procedure, plus 20% after deductible</p>
Other Covered Services <i>(assistant surgeon, anesthesia, other professional services, etc.)</i>	<p style="text-align: center;">20% after deductible</p>

The bariatric surgery copay benefit applies to lap band and gastric bypass procedures performed **on or after September 1, 2011**, including those with **predeterminations and preauthorizations** issued for bariatric surgery **prior to** September 1, 2011.

Condition Management

If you have a chronic condition, we offer support.



- **Support** from Blue Care Advisors—clinical professionals who can help you manage chronic health conditions such as: **asthma, diabetes, coronary artery disease, congestive heart failure, chronic obstructive pulmonary disorder and other health conditions**
- Understanding and following your physician's orders
- Review medications, side effects, compliance, refills and current services
- Establish goals with you and caregivers, scheduling follow-ups as appropriate

1-800-462-3275

Tobacco Cessation and Weight Management

Self-Paced Approach

- Online program and resources available in the **Personal Health Manager**
- Secure e-mail outreach to keep members on track

Lifestyle Management Support

- Counseling and coaching with licensed Wellness Coaches
- 24/7 Nurseline
- Referrals when appropriate

1-800-462-3275



Special Beginnings®

Special Beginnings helps expectant mothers and their babies get off to a healthy start by providing prenatal and postnatal health education and guidance at no additional cost

Once enrolled in the program, plan participants receive:

- **Pregnancy risk assessment** and ongoing communication/monitoring
- **Educational material** covering pregnancy and infant care topics
- **Frequent, personal contact** with program staff from early pregnancy through six weeks after delivery
- **Access to an online resource** with maternity tools, articles and information
- **Assistance in managing high-risk conditions** such as gestational diabetes and preeclampsia



Program components are available in English and Spanish

888-421-7781

24/7 Nurseline

Advice anytime.

Round-the-clock health and the wellness advice from licensed professionals



24/7



Advice isn't just needed from 9 to 5.

24/7 Nurseline is here to help.

- Nurses provide health advice and information about **high fevers, earaches, cuts and bruises and more**
- Audio health library on topics such as **kicking the smoking habit** and **ways to get a good night's rest**

1-800-581-0368

Available in English and Spanish

Personal Health Manager (PHM)

Your **online** wellness experience begins with the Personal Health Manager

Features include:

- Lifestyle Management tools:
 - **Weight Management**
 - **Tobacco Cessation**
 - **Fitness and Nutrition Plans**
 - **Stress Reduction**
- Health Risk Assessment
- “For Your Health” features
- Blue PointsSM Rewards
- “Ask-A” feature – health and wellness questions via secure e-mail
- Online health encyclopedia
- Interactive symptom checker



Health Risk Assessment – Easy To Use

1

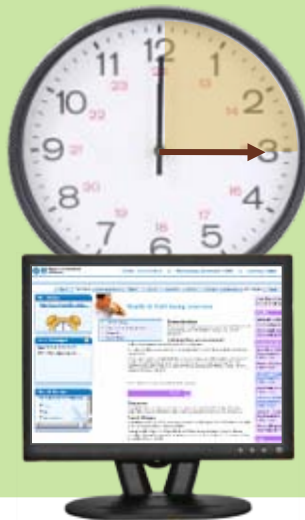
Choose your assessment topic:

- Health & well-being*
- Sleep
- Stress management
- Nutrition
- Fitness & physical activity
- Back & joint health

**We recommend completing the Health & Well-being assessment first.*

2

Complete the assessment in as little as 10 to 15 minutes



3

Receive Personalized report and next steps:

- Report provides member with summary of health risks and areas where they could improve
- Recommended 'next steps' and suggestions to make positive changes to your lifestyle.





TRS-ActiveCare®

TEACHER RETIREMENT SYSTEM OF TEXAS



medco®

Prescription Drugs

ActiveCare 1-HD, 1, 2 & 3

2011-2012 Plan Year

Your Medco Prescription Drug Plan



- Medco administers your prescription drug plans on behalf of TRS
 - ActiveCare 1-HD, 1, 2, and 3 plans
- Benefit includes both a retail and mail component
- Medco has its own mail-order pharmacy – **Medco By Mail** – where specialist pharmacists focus on compliance and lower cost options for the patient, and the automated filling system ensures the prescription is filled accurately.* Medco only buys medication from the most reputable suppliers

•Medco's mail-order pharmacies fill about 2 million prescriptions per week through a highly automated process that is 99.9997% accurate and is 23 times more accurate than a retail pharmacy

"Dispensing Error Rate in a Highly Automated Mail-Service Pharmacy Practice"; Nov. 2007, *Pharmacology*, a peer-reviewed journal of the American College of Clinical Pharmacy

Prescription Drug Benefits - Network Level

Features	ActiveCare1-HD	ActiveCare 1	ActiveCare 2	ActiveCare 3
Drug Deductible (per person, per plan year)	Subject to plan year deductible		\$100	\$75
Retail Short-Term (up to 30-day supply) Generic/Preferred Brand/Non-Preferred Brand	20% coinsurance after deductible		\$15 \$35* \$60*	\$15 \$35* \$60*
Retail Maintenance (after second fill, up to 30-day supply) Generic/Preferred Brand/Non-Preferred Brand			\$20 \$45* \$75*	\$20 \$45* \$75*
Medco by Mail (up to 90-day supply) Generic/Preferred Brand/Non-Preferred Brand			\$45 \$105* \$180*	\$45 \$105* \$180*

New for 2011-2012: The prescription drug deductible and copays for **ActiveCare 2** and **ActiveCare 3** have increased

* If you obtain a brand-name drug when a generic equivalent is available, you are responsible for the generic copayment plus the cost difference between the brand-name drug and the generic drug. Chart illustrates benefits when network pharmacies are used. Non-network benefits are also available; see Enrollment Guide for more information.

New for 2011-2012

Features	ActiveCare1-HD	ActiveCare 1	ActiveCare 2	ActiveCare 3
Specialty Medications (retail or mail)	20% after plan year deductible		\$200 per fill	\$200 per fill

Specialty medications: Used to treat **complex conditions**, such as cancer, growth hormone deficiency, hemophilia, hepatitis C, immune deficiency, multiple sclerosis, and rheumatoid arthritis

The right care at the right time

Specialization and member engagement are critical components to controlling health care costs and driving quality clinical outcomes:

- Specialist pharmacist
- Personalized medicine offering
- Closing gaps in care
- My Rx Choices[®]
- Research-driven protocols
- Other available resources

Personalized Medicine

- What is it?
 - A science that examines the inherited variations in genes that dictate drug response (whether a drug will be effective or safe)
 - Personalizing drug therapy based on each patient's genetic variability
- In 2009, TRS began providing this service to TRS-ActiveCare patients if both the doctor and patient wish to take the test
- How patients metabolize drugs can have significant impacts on both medication choice and dosage
- Testing consists of a cheek swab...what do you have to lose?

Types of Gaps in Care Online Alerts

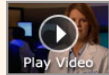
Adherence

Immediate action required: Order medication



Our records indicate that your refill for [Januvia 50mg](#) is 14 days late and that you may be running low on your blood sugar medication.

Why is this important?



Taking Januvia as prescribed by your doctor will help you to keep your blood sugar under control. Keeping your blood sugar u . . . [read more](#)

Suggested specialist pharmacist resources:*

- ★ [Know Your Diabetes ABCs. \(A1C, Blood Pressure, and Cholesterol\)](#)
Provided by National Institute of Diabetes and Digestive and Kidney Diseases
- [Blood Glucose Control](#)
Provided by American Diabetes Association
- [Understanding Medicines: Pills for Diabetes: At a Glance](#)
Provided by Liberty Medical Supply, Inc., a Medco Health Solutions, Inc. company
- [Oral Medication](#)
Provided by American Diabetes Association

Select one of these options to address this alert:

- I would like to order my medication now
- I am not ready to order now; send me an e-mail reminder
- I am no longer taking this medication ([what happens next?](#))
- I'm getting this medication somewhere else
- Other ([what happens next?](#))

CONTINUE

Need help with this alert?

Contact a Medco Specialist Pharmacist now

Need to talk to your doctor?

Print information you can share with your doctor

Omission

Action required: Talk to your doctor



Most individuals with diabetes over the age of 40 who have additional risk factors of heart disease benefit from a type of cholesterol medication called a statin. Our records indicate you are not taking one of these medicines. Please check with your diabetes doctor to see if you should be taking a statin medication.

Why is this important?



Medications known as statins have been shown to reduce the risk of heart disease, stroke, and death in patients with diabete . . . [read more](#)

Suggested specialist pharmacist resources:*

- ★ [Know Your Diabetes ABCs. \(A1C, Blood Pressure, and Cholesterol\)](#)
Provided by National Institute of Diabetes and Digestive and Kidney Diseases
- [All About Cholesterol](#)
Provided by American Diabetes Association

Select one of these options to address this alert:

- I would like to print this and speak to my doctor
- I am getting a statin from somewhere else
- I am not currently taking a statin

CONTINUE

Need help with this alert?

Contact a Medco Specialist Pharmacist now

On track

Keep up the good work!



Our records indicate you are on track with:

- [Blood pressure medication](#)
- [Monitoring your blood sugar](#)
- [Taking an ACE or ARB medication](#)

Close-up: Sample alert message

Information about the alert and why it's important


Ability for patients to self-close gaps as appropriate

IMMEDIATE ACTION REQUIRED:

The alert message is displayed in a white box with a red vertical bar on the left side. The red bar contains a white exclamation mark icon. The main content of the alert is as follows:

Our records indicate that your refill for [Januvia 5mg](#) is 14 days late and you may be running low on your blood sugar medication.

Why is this important?

 Taking Januvia as prescribed by your doctor will help you to keep your blood sugar under control. Keeping your blood sugar u... [read more](#)

Tools and Resources:


- [Blood Glucose Control](#) - American Diabetes Association
- [Diabetes Medication Pills](#) - Liberty Medical

To address this alert, select one of these options:


- I would like to order my medication now
- I am not ready to order now; send me an e-mail reminder
- I am no longer taking this medication
- I'm getting this medication somewhere else
- Other

CONTINUE

Need help with this alert?

-  [Contact a specialist pharmacist now](#)

Need to talk to your doctor?

-  [Print information you can share with your doctor](#)

Video clips relevant to each alert

Links to additional resources

Access to e-mail Medco pharmacists

Printable information to take to the doctor

- Lower your cost for prescriptions with My Rx Choices[®]
 - Features include:
 - Personal assessment of cost-saving opportunities based on *your* prescription plan and the medications you use
 - Print a kit to help your doctor better understand the economic impact of different medication alternatives
 - Alternative medications are based upon greatest cost savings to you presented in order, starting with the highest value
 - Brand-to-generic and retail-to-mail comparisons are shown
- Simply visit www.medco.com/save. You'll need to take a moment to register before using this service. You can also call 1-866-355-5999
- You have to shop your benefit. Prices can vary at different retail pharmacies

Generic Dispensing is Important...

My Rx Choices[®]

Approximately 6,000 web hits per month

Generics Rx Advantage

The next generation of generic copay waiver program

Savings

For every 1% of increase generic usage, TRS and its members could save millions of dollars

Retail Network Pharmacies in El Paso

- Sav-on Pharmacy
 - Wal-Mart Pharmacy
 - Walgreens Pharmacy
 - Costco Pharmacy
 - Kmart Pharmacy
 - Sams Pharmacy
 - Bank One Pharmacy
 - Good Sheppard Pharmacy
 - Alameda Thrifty Pharmacy
 - University Medical Center Pharmacy
 - Tops Pharmacy
 - Freeway United Pharmacy
 - Med-First Pharmacy
 - U and T Pharmacy
 - Advant-Edge Pharmacy
 - Coleman Pharmacy
- NOTE: This is just a partial list of network pharmacies for more information go to TRS-ActiveCare link and click on TRS-AC Options then on the Find a local participating pharmacy.**

Retail Network Pharmacies in Las Cruces

- Wal-Mart Pharmacy
- Walgreens Pharmacy
- Kmart Pharmacy
- Rede Pharmacy
- Sav-On Pharmacy
- Archer Health Center Pharmacy
- El Paseo Pharmacy

NOTE: This list is not all inclusive.

Information Resources

- TRS Website – www.trs.state.tx.us/trs-activecare
 - Pharmacy Benefit Highlights
 - List of maintenance medications
 - FAQs
 - Download forms
- Medco Member Website – www.medco.com
 - Prior authorization list
 - Formulary information
 - Locate a participating pharmacy
 - Health and wellness information
 - My Rx Choices® / Price a Medication
 - Online ordering
 - Order Medco By Mail refills
 - Download forms
 - Medco widget
- Customer Service [1-866-355-5999](tel:1-866-355-5999)
- Benefits Booklet





TRS-ActiveCare[®]

TEACHER RETIREMENT SYSTEM OF TEXAS



How to Enroll

2011-2012 Plan Year

Who is Eligible to Enroll?

To be eligible for TRS-ActiveCare coverage, you must:

- Be employed by a participating district/entity **and**
 - Be an active, contributing TRS member **or**
 - Be employed 10 or more regularly scheduled hours each week



Health care coverage for public school employees and their families

Employees NOT Eligible to Enroll

- State of Texas employees or retirees
- Higher education employees or retirees
- TRS retirees, receiving or who declined coverage under TRS-Care

These individuals are not eligible to enroll for TRS-ActiveCare coverage as employees, but they can be covered as a **dependent** of an eligible employee.

Eligible Dependents

- Spouse (including a common law spouse)
- Children (married or unmarried) under age 26
 - Natural child
 - Adopted child
 - Stepchild
 - Foster child
 - Child under the employee's legal guardianship
- Other eligible dependents listed in Enrollment Guide
 - Other child (unmarried) in parent-child relationship
 - Grandchildren (under age 26)
 - Disabled children (of any age)



Special Eligibility Situations

- If employee and spouse both work for a participating district/entity:
 - A spouse may be covered as an employee or as a dependent of an employee
 - Only one parent can cover dependent children
- A child (under age 26) employed by a district/entity and a contributing TRS member cannot be covered as a dependent
 - The child must be covered as an employee
 - If the child is not a contributing TRS member, the child may be covered as a dependent

Special Eligibility (cont'd)

Can children whose coverage recently ended because they turned 25 come back on the plan?

Yes. Employees must submit an *Enrollment Application and Change Form* to add the dependent child to the plan during one of *three* time periods:

- April 19 – May 9, 2011
- August 1 – August 30, 2011
- September 1 – September 30, 2011 (only for individuals 25+)

**Effective date of coverage will be September 1, 2011
Preexisting condition exclusions may apply**

Two Steps to Enroll



Enrollment Guide
2011-2012 Health Plans

1 Choose your health plan

2 Enroll Online and complete any other required forms (Declination Certification Form)



Enrollment

- Enrollment Periods for 2011-2012 Plan Year:

EPISD's Timelines

- April 19 - May 9 (Spring Enrollment)
- August 1 - August 31 (Summer Enrollment) New Hires and Change of Status
- No preexisting condition exclusion applies **except** for those who previously declined coverage (may be reduced by prior creditable coverage)
- **Passive enrollment – If no plan or coverage changes, then enrollment is not required**
- Premium adjusted to reflect any rate change, for coverage effective September 1 – Premiums are deducted a month in advance of coverage. (ex: August premiums pay for September coverage)

Who needs to enroll online?

- New hires
- Employees who previously declined or will decline coverage for self or any eligible dependents
- Employees who are:
 - Selecting a different TRS-ActiveCare plan option
 - Adding or dropping dependents
 - Choosing to cancel and/or decline coverage
 - Enrolling for TRS-ActiveCare coverage with a different participating district/entity
 - Changing name or address or correcting date of birth or Social Security number

You must submit a form to **decline** TRS-ActiveCare coverage for yourself and/or your dependents **in writing each year**

You should choose your plan carefully – You may not change plans during a plan year unless a special enrollment event occurs

Who needs to enroll online? (cont'd)

Enrolling for the first time:

- New Hires must enroll before the later of:
 - The end of the plan enrollment period
 - 31 calendar days after the employee's actively-at-work date
 - 31 calendar days after a special enrollment event (manual forms are required to be completed)
- New hires may choose their effective date of coverage
 - Actively-at-work date, or
 - First of the month following their actively-at-work date

Full premium for the month will be due if choosing actively-at-work date; premiums are not pro-rated

Preexisting Condition Exclusions

- Preexisting condition exclusions **will not apply**:
 - To any individual **under the age of 19**
 - To employees that initially enroll when the district/entity begins participating in TRS-ActiveCare
 - To new hires who enroll within 31 days after their actively-at-work date

Exception: If you have been covered at any time since 2002, pre-x may apply if you are hired by another participating district/entity (or rehired by same district/entity) **unless** gap in coverage is 63 or more consecutive days and you have proof of prior creditable coverage

- A 12-month pre-x waiting period may apply to employees or dependents enrolling in the ActiveCare PPO plans due to:
 - A special enrollment event
 - A transfer to another participating district/entity (or rehire by the same participating district/entity), if the employee or any covered dependent has any remaining preexisting waiting period or a gap in coverage of 63 or more consecutive days
- Pre-x waiting period may be reduced by creditable coverage

Declining Coverage

TRS requires an **Online Declination** each year from any employee declining coverage. **In addition, a Declination Certification Form must be completed each year.**

- Form must be on file for you to enroll later in the plan year due to loss of coverage
 - If the form is on file, the employee may be enrolled but must submit a certificate of creditable coverage to reduce or eliminate any pre-x waiting period
 - If the certificate of creditable coverage reveals a gap in coverage exceeding 63 days, coverage preceding the gap will not be counted toward the pre-x waiting period
 - **If the form is not available**, the employee's request to add coverage **will be denied**

**A certificate of creditable coverage will no longer be accepted
in lieu of a declination form**

Making Changes/Special Enrollment Events

- Effective September 1, 2011, TRS will no longer opt out of HIPAA (TRS-ActiveCare is currently exempt)
- Enrollees **may make plan changes** during the plan year due to a special enrollment event
- Individuals who **voluntarily drop coverage** during the plan year **may now re-enroll during the plan year due to a special enrollment event**

Special enrollment event/family status change: Marriage, divorce (resulting in a loss of coverage), birth, adoption or placement for adoption, or if an individual with other health insurance coverage involuntarily loses that coverage

Common law marriage: Not considered a special enrollment event unless there is a Declaration of Common Law Marriage filed with an authorized government agency

Newborns

- Covered first 31 days if employee has coverage
- Must add newborn within 60 days after the date of birth or up to one year after the date of birth if:
 - Employee has “employee and family” or “employee and child(ren)” coverage at the time of birth **and** at the time of enrollment
- Not necessary to wait for newborn’s Social Security number
 - Submit application without SSN to enroll
 - Re-submit another form after SSN is issued





TRS-ActiveCare[®]

TEACHER RETIREMENT SYSTEM OF TEXAS



Cost for Health Coverage

2011-2012 Plan Year

Cost of Coverage

Funding to Help Offset the Cost of TRS-ActiveCare Coverage

District/Entity (minimum)	\$150
State of Texas	\$75
Total Per Month	\$225

Funding applies to active, contributing TRS members

Cost charts illustrate the monthly gross premiums

Monthly Cost for Coverage

- See page 27 of Enrollment Guide

NOTE: The monthly cost of coverage as listed in the Enrollment Guide does not reflect EPISD's contribution strategy. Visit www.episdbenefits.org

- \$225 in district/entity and state funds to help pay for coverage



Monthly Cost for Coverage

www.tns.state.tx.us/trs-active-care

Gross Monthly Cost • 2011–2012 Plan Year Effective September 1, 2011 through August 31, 2012				
PPO Plans	ActiveCare 1-HD	ActiveCare 1	ActiveCare 2	ActiveCare 3
Coverage Category	Total Cost*	Total Cost*	Total Cost*	Total Cost*
Employee Only	\$287.00	\$325.00	\$434.00	\$584.00
Employee and Spouse	\$703.00	\$741.00	\$987.00	\$1,328.00
Employee and Child(ren)	\$448.00	\$519.00	\$690.00	\$931.00
Employee and Family	\$920.00	\$817.00	\$1,085.00	\$1,461.00

HMO Plans	FirstCare Health Plans	Scott & White Health Plan	Valley Baptist Health Plans
Coverage Category	Total Cost*	Total Cost*	Total Cost*
Employee Only	\$368.78	\$388.80	\$375.96
Employee and Spouse	\$927.48	\$934.90	\$913.86
Employee and Child(ren)	\$586.34	\$623.90	\$590.36
Employee and Family	\$936.68	\$968.90	\$932.40

*District and state funds are provided each month to active contributing TRS members to use toward the cost of TRS-ActiveCare coverage. State funding is subject to appropriation by the Texas Legislature. Please contact your Benefits Administrator to determine your net monthly cost for your coverage.

ActiveCare 1-HD vs. ActiveCare 1: The cost of "employee and family" coverage for ActiveCare 1-HD is correct as shown. "Employee and family" coverage is more expensive for ActiveCare 1-HD than ActiveCare 1 because the deductible and out-of-pocket maximum amounts for family are less and the plan may begin paying benefits sooner. For ActiveCare 1, "employee and family" coverage is less expensive than ActiveCare 1-HD because the deductible and out-of-pocket maximum amounts for family are greater, and it will take longer to accumulate the medical and prescription drug expenses to satisfy these amounts.

Note: New hires may choose their actively-at-work date (the date they start to work) or the first of the month following their actively-at-work date as their effective date of coverage. If choosing the actively-at-work date, the full premium for the month will be due; premiums are not prorated.

Cost of Coverage – Does not reflect EPISD's contribution towards cost of coverage (Cont'd)

PPO Plans	ActiveCare 1-HD	ActiveCare 1
Coverage Category	Total Cost	Total Cost
Employee Only	\$287	\$325
Employee and Spouse	\$703	\$741
Employee and Child(ren)	\$448	\$519
Employee and Family	\$920	\$817
Family Deductible	\$2,400	\$3,000
Family Out-of-Pocket Maximum	\$7,400	\$9,000

Employee and family coverage for ActiveCare 1-HD is more expensive than ActiveCare 1 because the deductible and out-of-pocket maximum amounts for family are less, and the plan may begin paying 100% benefits sooner

Monthly Cost for Coverage

- Please refer to the 2010-2011 TRS-ActiveCare Plan Highlights and the EPISD Monthly /Semi-Monthly Rates
 - Monthly District Contribution as follows for regularly scheduled TRS members:
 - At least 30 or more hours a week = \$300
 - At least 10 but less than 30 hours a week = \$225
 - Transportation employees working at least 20 but less than 30 hours a week = \$262
- ~~~~~
- Employees working at least 10 hours a week but less than 20 who are not TRS members = \$130

Application to Split Premium

- Married couples working for **different** participating entities may “pool” funds
- Optional
- Requires an *Application to Split Premium* form to be completed by both employees and employers
- Form available online



Please print in blue or black ink.

Group Number 085000 www.trrs.state.tx.us/trrs-activecare Toll-Free Customer Service 1.866.365.5999

Application to Split Premium

This form is to be completed by both husband and wife who wish to split the cost of employee and spouse or employee and family coverage while being employed by different districts/entities participating in TRS-ActiveCare.

The employee identified in Section 1 is required to select a plan under TRS-ActiveCare. The employee's spouse, identified in Section 3, is required to decline (waive) TRS-ActiveCare coverage. The employing district/entity for EACH person must also complete Sections 2 or 4, as appropriate.

The cost for TRS-ActiveCare coverage will be split between the two employers. Each employer will be billed 50 percent of the total cost of the TRS-ActiveCare plan selected by the employee in Section 1.

The entity employing the spouse who declined coverage will consider the employee as covered under a group health plan for funding purposes.

SECTION 1 — TO BE COMPLETED BY EMPLOYEE that has elected employee and spouse or employee and family coverage

Employee Last Name	First Name	Middle Initial	Social Security Number
I have elected employee and spouse or employee and family coverage, and I elect to split the cost of coverage 50/50 with my spouse.			
Employee Signature			Date

SECTION 2 — TO BE COMPLETED BY EMPLOYER of the employee in Section 1

District/Entity Name	TRS Reporting Number
I confirm this employee is an active employee enrolled for TRS-ActiveCare coverage. I understand that the cost of this employee's coverage will be split 50/50 between our district/entity and the participating district/entity of the employee's spouse.	
Employer Verification Signature	Effective Date
Date	

SECTION 3 — TO BE COMPLETED BY EMPLOYEE that will be declining coverage

Employee Last Name	First Name	Middle Initial	Social Security Number
I elect to split the cost of coverage 50/50 with my spouse. I have declined TRS-ActiveCare coverage under my participating district/entity and will be covered as a dependent of my spouse as listed in Section 1.			
Employee Signature			Date

SECTION 4 — TO BE COMPLETED BY EMPLOYER of the employee in Section 3

District/Entity Name	TRS Reporting Number
I confirm this employee is an active employee who has declined TRS-ActiveCare coverage. I understand that 50 percent of the cost of coverage elected by this employee's spouse will be billed to our district/entity.	
Employer Verification Signature	Date

SECTION 5 — TO BE COMPLETED BY EMPLOYER of the employee in Section 3 to TERMINATE SPLIT PREMIUM

District/Entity Name	TRS Reporting Number
Please terminate the split premium funding arrangement for this employee.	
Employer Verification Signature	Effective Date
Date	

Submit to: Blue Cross and Blue Shield of Texas, P. O. Box 660400, Dallas, TX 75266-0400

9709.577.0099

Can Changes in Coverage Be Made After Your Application Has Been Submitted?

- Changes can be made up to the end of your enrollment period
- Plan choices will remain in effect through **August 31, 2012** unless there's a special enrollment event such as:
 - Marriage or divorce
 - Birth, adoption or placement for adoption of a child
 - A child reaches age 26
 - Loss of coverage
- **Changes must be made within 31 days after the event date (special rules apply to newborns)**
- New Enrollment Forms must be submitted for any change

Newborns

- Covered first 31 days if employee has coverage
- Must add newborn within 60 days after the date of birth or up to one year after the date of birth if:
 - Employee has “employee and family” or “employee and child(ren)” coverage at the time of birth **and** at the time of enrollment
- Not necessary to wait for newborn’s Social Security number
 - Submit application without SSN to enroll
 - Re-submit another form after SSN is issued

ID Cards Will Be Mailed to Your Home

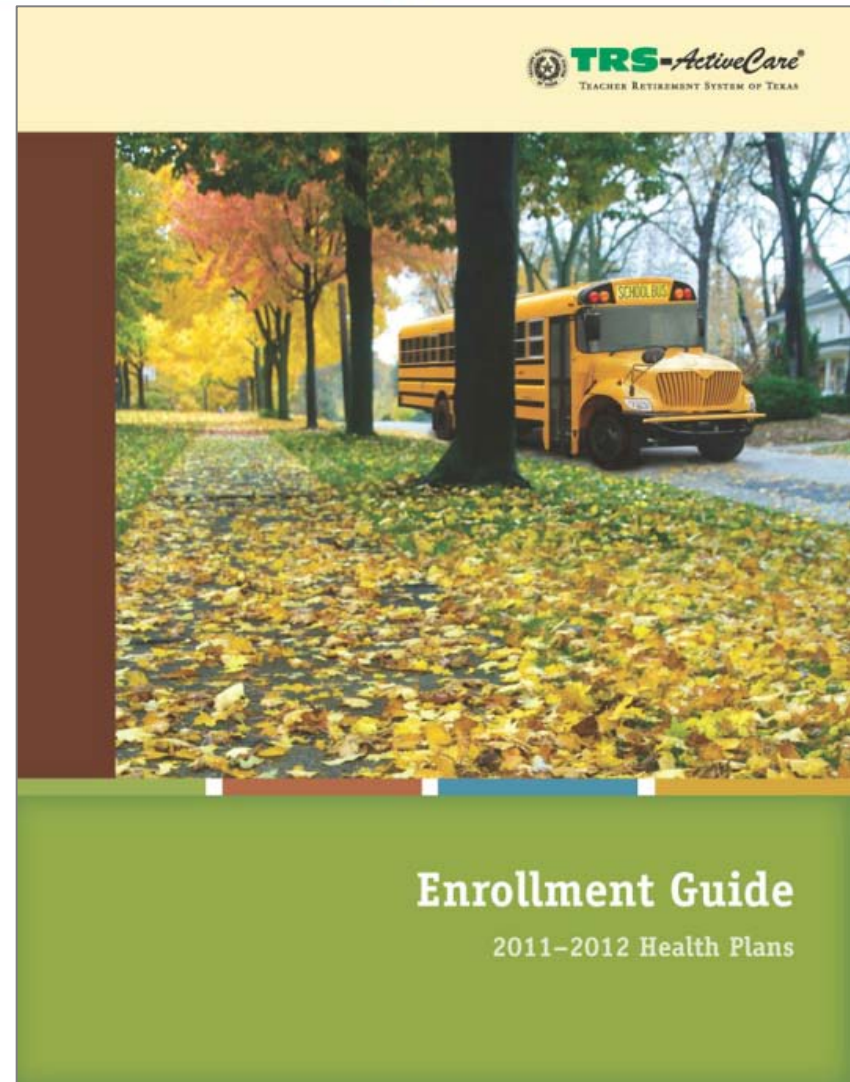
- Enroll by May 9 to receive ID card by September 1
- ActiveCare 2 and 3
 - All ActiveCare 2 and ActiveCare 3 enrollees, including existing plan participants, will receive new ID cards
 - **Separate cards for medical and prescription drugs**
 - Blue Cross and Blue Shield of Texas
 - Medco

Enrollment Support

Available Online

- Enrollment guide (English and Spanish)
- Downloadable forms (split premium, claim form, declination certification form, etc.)
- Provider locator
- Frequently asked questions

www.trs.state.tx.us/trs-activecare



Home

Coverage

Wellness

Doctors and Hospitals

For Benefits Administrators

Forms and Resources

Contact Us

Welcome to TRS-ActiveCare

The statewide health care coverage program for public education employees



User ID:

Password:

[Log In](#) [Forgot User ID?](#) [Forgot Password?](#)

Blue Access for Members

Not registered?

[Learn how to register](#)
[Take a tour](#)



News and Updates: [2011-2012 Plan Highlights](#)

TRS-ActiveCare Enrollment

- ▶ [Review enrollment guides and benefit booklets](#)
- ▶ [Fill out an enrollment application and change it online and print it for your Benefits Administrator](#)
- ▶ [View the enrollment videos](#)

Enrollment Info

Coverage

As an TRS-ActiveCare employee, you have access to a variety of benefits and wellness programs.

- ▶ [Plan information](#)
- ▶ [Wellness programs](#)

Find a Doctor or Hospital

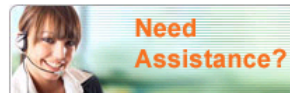
Search for a doctor, hospital or other health care provider

- ▶ [Find a doctor or hospital in Texas](#)
- ▶ [Find a doctor or hospital outside of Texas](#)

For Benefits Administrators

Access tools and resources for use by Benefits Administrators only.

- ▶ [Learn more](#)
- ▶ [Register for Enrollment and Maintenance Training](#)



If you have any questions about your benefits, contact customer service at **866-355-5999**
Monday – Friday
8 a.m. – 8 p.m. CT

[Additional contact information](#)

www.bcbstx.com/trs

Blue Access[®] for Members

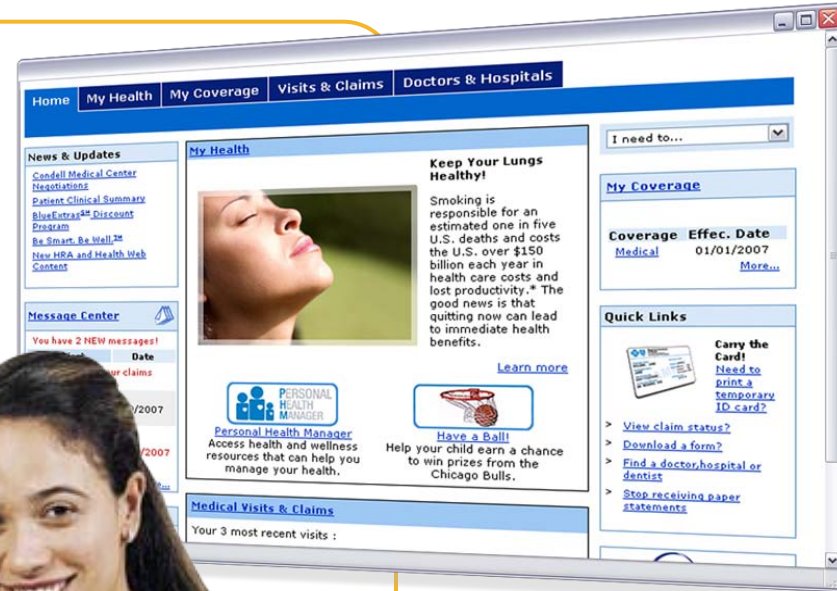


Online member management tool

- Check claim status, view claim summaries and print EOBs (Explanations of Benefits)

EOBs are available online; must log in and elect to receive paper copies

- Order additional ID cards, and print temporary ID
- Monthly health articles
- Links to health information and wellness tools and resources, including the Personal Health Manager



Send secure e-mail messages to BCBS Customer Advocates available Monday thru Friday, 7 a.m. to 10 p.m. (CT)



"Live Chat"
Log In to
Blue Access
for Members

Blue Access[®] Mobile brings convenient, secure access to your mobile phone (m.bcbstx.com)

From your mobile phone Web browser:

- Locate a network doctor, hospital or urgent care facility
- Log in to **Blue Access for Members** to view coverage details, access ID cards, check claims status and view health and wellness information



Get the Provider Finder[®] App (Free!) for your iPhone or Android: bcbstx.com

What if I Have Questions?

Personalized Service

- Call TRS-ActiveCare customer service for:
 - Claim questions/status
 - Network provider information
 - Membership and eligibility
 - Medical coverage questions
 - Inquiries (telephone and e-mail)
 - ID card requests
 - Transition of care information
 - Help with online tools!



Customer Service
1-866-355-5999



TRS-ActiveCare[®]

TEACHER RETIREMENT SYSTEM OF TEXAS



Questions
Thank you for attending



TRS-ActiveCare®
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TRS-ActiveCare is administered by 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. Blue Cross and Blue Shield of Texas provides claims payment services only and does not assume any financial risk or obligation with respect to claims. Prescription drug benefits for ActiveCare 1-HD, 1, 2 and 3 plans are administered by Medco Health Solutions, Inc. HMO plans provided by: SHA, L.L.C. dba FirstCare Health Plans, Scott and White Health Plan, and Valley Baptist Insurance Company dba Valley Baptist Health Plans.