FirstCare™ HEALTH PLANS

Plan Summary 2019-2020

TRS ActiveCare Teacher Retirement System of Texas

Medical Plan Year Deductible	**$950 Individual; $2,850 Family**
Out-of-Pocket Maximum *(includes medical & drug deductibles, copayments & coinsurance)*	**$7,450 Individual; $14,900 Family**
Annual Maximum	**Unlimited**
Primary Care Provider (PCP) Office Visit • Includes routine lab/X-ray services, injectables, and supplies • Other services provided in a physician's office are subject to additional deductible and copayments/coinsurance	$20 copayment
PCP Office Visit—Dependents, through age 19	$0 copayment
Specialist Office Visit • Includes routine lab/X-ray services • Other services provided in a physician's office are subject to additional deductible and copayments/coinsurance	$70 copayment
Preventive Care Well-woman exam, immunizations, physicals, mammograms, colorectal cancer screening	No copayment
Surgical Procedures Performed in the Physician's Office	25% coinsurance[1]
Urgent Care	$50 copayment
Emergency Room	$500 copayment[1]
Ambulance Air/Ground	25% coinsurance[1]
Inpatient Services Facility charges, physician services, surgical procedures, pre-admission testing, operating/recovery room, newborn delivery and nursery, ICU/coronary care units, laboratory tests/X-rays, rehabilitation facility, behavioral health (mental health/chemical dependency)	25% coinsurance[1]
Outpatient Services Facility charges, physician services, surgical procedures, observation unit	25% coinsurance[1]
MRI, CT Scan, PET Scan (Facility/Physician)	$250 copayment[1]
Diagnostic Tests Sleep study; Stress test; EKG; Ultrasound; Cardiac imaging; Genetic testing; Non-preventive Colonoscopy (Facility/Physician)	25% coinsurance[1]
Home Health Care *Limited to 60 visits per plan year*	25% coinsurance[1]
Hospice Care	25% coinsurance[1]
Skilled Nursing Facility *Limited to 30 days per plan year*	25% coinsurance[1]
Accidental Dental Care	25% coinsurance[1]
Durable Medical Equipment	25% coinsurance[1]
All Other Covered Services	25% coinsurance[1]

Prescription Drug Plan Year Deductible	**$150 Per Individual**
Participating Retail Pharmacy (Standard drugs/30-day supply)	
ACA Preventive	$0 copayment
Preferred Generic	$5 copayment
Preferred Brand	30% coinsurance[2]
Non-preferred Brand/Non-preferred Generics	50% coinsurance[2]
Specialty Medications	
Tier 1 and 2	15% coinsurance[2]
Tier 3	25% coinsurance[2]
Maintenance (up to 90-day supply at BSW pharmacies, in-network retail, and mail order for maintenance eligible drugs)	
ACA Preventive	$0 copayment
Preferred Generic	$12.50 copayment
Preferred Brand	30% coinsurance[2]
Non-preferred Brand/Non-preferred Generics	50% coinsurance[2]

[1] *Subject to medical deductible*
[2] *Subject to prescription drug deductible*

Enrollment Period: July 1 – August 23, 2019

As of January 1, 2019, Scott and White Health Plan, part of Baylor Scott & White Health, acquired FirstCare Health Plans. Scott and White Health Plan and FirstCare Health Plans are pleased to offer health benefits once again to the Teacher Retirement System of Texas. While both plans are part of the Baylor Scott & White family, for the 2019-2020 school year they will continue to operate under the names you've trusted for years.

2019-2020 FirstCare Benefit Highlights and Features

- 100% preventive care coverage
- Access to FirstCare Virtual Care—*powered by MDLIVE—for a $0 copay for general health services and a $20 copay for behavioral health services*
- Low deductible option
- No copay for PCP visits for dependents, age 19 and under
- Maximum out-of-pocket includes medical and prescription drug deductibles, copays and coinsurance
- No referrals for in-network physicians
- Worldwide emergency care
- Comprehensive network of quality physicians
- Local offices; Texas-based customer service
- *Nurse24™* 24-hour nurse line
- *Expecting the Best™* maternity program
- Dedicated website for TRS members

Gross Monthly Cost for Coverage

(Effective September 1, 2019 - August 31, 2020)

Coverage Category	Total Cost*
Employee only	$ 560.50
Employee and spouse	$ 1,416.52
Employee and child(ren)	$ 892.16
Employee and family	$ 1,454.80

**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.*

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For a detailed description of FirstCare's TRS benefits, evidence of coverage, provider directory or drug coverage list, visit FirstCare.com/TRS.