

2024 Benefits of Membership

CENTRAL TEXAS

/// THE POWER TO LIVE BETTER



Contact information at a glance

Baylor Scott & White
Health Plan

Customer Service
1.866.334.3141 • TTY: 711

Oct. 1 - March 31: 7 days a week,
8 AM to 8 PM. Closed on major holidays.

April 1 - Sept. 30: Monday-Friday,
8 AM to 5 PM. Closed on major holidays.

Customer Engagement
(Plan Changes/Annual Enrollment Assistance)
1.877.845.3901

8 AM to 5 PM • Monday-Friday
Email: HPCustomerEngagement@BSWHealth.org

MetLife Dental

1.855.676.9337
MetLife.com

OptumRx
(mail order prescriptions)

1.844.230.9357

Silver&Fit®
(fitness benefit)

1.877.427.4788 • TTY: 711
SilverandFit.com

OTC Card
(over-the-counter)

1.866.334.3141 • TTY: 711
Baylor Scott & White Health Plan Customer Service

Modivcare (transportation
benefit for HMO-POS plans)

1.866.428.0212
Modivcare.com

Medicare

1.800.MEDICARE (1.800.633.4227)
TTY: 1.877.486.2048
24 hours a day/7 days a week
Medicare.gov

Baylor Scott & White Health Plan offers BSW SeniorCare Advantage HMO-POS plans as a Medicare Advantage (MA) organization through a contract with Medicare. Baylor Scott & White Care Plan offers Covenant Health Advantage HMO plans as an MA organization through a contract with Medicare. Baylor Scott & White Insurance Company offers BSW SeniorCare Advantage PPO plans as an MA organization through a contract with Medicare. Enrollment in one of these plans depends on the health plan's contract renewal with Medicare.

Other pharmacies, physicians and providers are available in our network.

We are glad to have you as a member

These days, many health plans compete for your membership, and we're glad you chose Baylor Scott & White Health Plan. With affordable copays, no referrals required to see a specialist, and access to renowned Baylor Scott & White Health system providers and hospitals throughout Central and North Texas, you can be confident Baylor Scott & White Health Plan is the right choice for your healthcare needs.

This guide provides contact information you may need throughout your journey with us, and shares helpful tips on how to manage your benefits and your healthcare experience.

How your plan works

You do not have to select a primary care physician (PCP) to direct your care. You can see a specialist without a referral anytime.

You can find in-network doctors, specialists, hospitals and other providers online through [BSWHealthPlan.com/FindProvider](https://www.bswhealthplan.com/FindProvider) or by calling Customer Service.

PPO: Except for urgent and emergency care, you will pay more out-of-pocket when you visit out-of-network providers, because your out-of-network healthcare services are subject to a higher deductible and coinsurance percentage. Refer to your plan's Evidence of Coverage at [BSWHealthPlan.com/Medicare](https://www.bswhealthplan.com/Medicare) for details.

Out-of-network/non-contracted providers are under no obligation to treat members, except in emergency situations. Please call Customer Service or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

HMO-POS: Except for urgent and emergency care, you must get your care and services from in-network providers. If you choose to get non-emergency or non-urgent services out-of-network, you will be personally responsible for payment of all out-of-network charges.

Ready to help:

Call a customer advocate for answers to benefits questions, claims inquiries, and assistance in locating providers and using online tools and resources.

1.866.334.3141 (TTY: 711)

You can see a specialist without a referral.*

Preventive care is covered at 100%

Preventive services are covered at 100% (no copay) when you use in-network providers for services such as:

- Annual wellness visits
- Cancer screenings
- Immunizations

For a complete list of covered preventive services, refer to your plan's Evidence of Coverage at [BSWHealthPlan.com/Medicare](https://www.bswhealthplan.com/Medicare).

*HMO-POS members may only see in-network specialists without a referral.

Where to go for care

Choosing the right option for your condition can save you time and money.



VIRTUAL CARE - \$0 COPAY*

Using your mobile device or computer

For conditions like acne, allergies, bladder infection, cold, flu, pink eye, quitting tobacco, sinus infection, stomach problems or yeast infections.



PRIMARY CARE DOCTOR

Another choice for care when it's not an emergency

For conditions like asthma, diabetes management, earache, high blood pressure, headaches, preventive health, sprains, etc.



WALK-IN CLINICS

Same-day appointments when your doctor is not available; includes select primary care clinics and some pharmacy locations

For conditions like asthma, bladder infection, ear or sinus pain, flu, sore throat or sprains.



URGENT CARE

Needs immediate attention but is not life-threatening, or an appointment is not available with your doctor

For conditions like back pain, bladder infection, earache, minor burns, minor eye injuries, minor cuts that may need stitches, sore throat or sprains.



EMERGENCY ROOM

Any condition you believe to be life-threatening

For conditions like chest pain, deep cuts or wounds, difficulty breathing, poisoning, overdoses and suicidal behavior, abdominal pain, coughing or vomiting blood, severe burns, severe head injuries, sudden loss of balance, vision change, facial droop, arm or leg weakness.

Less \$

More \$

Need help finding a doctor, urgent care, walk-in clinic or emergency room near you? Contact Customer Service by phone at **1.866.334.3141** (TTY 711). You can also visit our website at [BSWHealthPlan.com/FindProvider](https://www.bswhealthplan.com/FindProvider).

Virtual care with MyBSWHealth

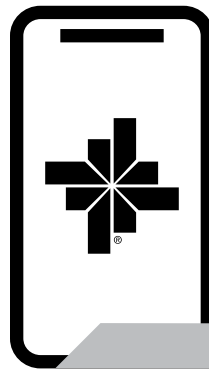
With MyBSWHealth, you can receive care from the comfort of your home or anywhere in Texas and have a prescription called in to the network pharmacy of your choice. Virtual care visits are available for a \$0 copay; prescription drug copays will apply.

- Conduct an eVisit (online questionnaire) for common medical conditions and get care fast **OR**
- Schedule a same-day Video Visit with a provider, face-to-face.

Virtual care is available 24 hours a day, seven days a week.

Self-service tools ensure access anywhere, anytime

Using the MyBSWHealth app, you can access your healthcare and health insurance information in one secure portal, 24 hours a day, seven days a week.



You can:

- Find a provider
- Schedule appointments and access virtual care
- Message your BSWH provider
- Access a digital copy of your member ID card
- View test results
- Review and pay bills
- Reorder and manage prescriptions at BSWH pharmacies (refer to page 5 for additional prescription drug options through OptumRx)
- View claims and payments toward your out-of-pocket maximum



Visit [MyBSWHealth.com](https://www.myswhealth.com) OR
download the MyBSWHealth app



Affordable prescriptions

If your plan includes prescription drug benefits, simply present your member ID card at a network pharmacy when you need to fill a prescription. Mail order service is also available. Mail order copays for Tier 1 and Tier 2 prescription drugs are available for a \$0 copay. Tier 3 and Tier 4 prescription drugs are available for two copays rather than three for a 90-day supply.

For your health and safety, some prescription drugs may have additional requirements or limits on coverage, including:

- **Prior Authorization:** BSW SeniorCare Advantage requires you or your physician to get prior authorization for certain drugs. This means you will need to get approval from the health plan before you fill your prescriptions.
- **Quantity Limits:** Coverage may be limited to how much medication you can get during a specified period of time, typically based on a 30-day period.
- **Step Therapy:** This process applies to certain conditions and encourages you to try less costly but equally effective drugs before the plan covers another drug.

Our mail order prescription tools

At [BSWHealthPlan.com/Medicare](https://www.myswhealth.com/medicare), you can locate network pharmacies, or log in to the member portal to:

- Compare medication prices at different pharmacies
- Find drug prices and lower-cost alternatives
- Manage medication reminders
- View real-time benefits and claims history

Getting your prescription medications delivered to your home is reliable, simple and cost-efficient. You'll benefit from:

- Three-month supplies of your medications with the option of automatic refills
- Free standard shipping
- Telephone access to pharmacists 24 hours a day, 7 days a week
- Helpful reminders to take or refill your medications

Signing up for mail order delivery can be done in one of three simple ways:

1. Ask your doctor to send an electronic prescription to OptumRx Home Delivery.
2. Visit [MyBSWHealth.com](https://www.myswhealth.com) and log in to your member portal. From there, you can fill new prescriptions, transfer others to home delivery and more.
3. Call OptumRx at **1.844.230.9357**.

Vision care

Regular eye exams may do more than help maintain your vision. They may also help detect other serious health issues such as diabetes or high blood pressure.* Our plans provide coverage for a routine annual exam, plus an annual allowance toward the purchase of contacts, frames and lenses. *You must use a network vision provider.* Find a provider at [BSWHealthPlan.com/FindProvider](https://www.bswhealthplan.com/FindProvider).

Hearing care

As part of our commitment to helping with our members' overall quality of life, we offer essential hearing services that are not covered by Original Medicare, including a routine hearing exam and an allowance every three years toward the purchase of hearing aids. Refer to the Evidence of Coverage for details. Find a provider at [BSWHealthPlan.com/FindProvider](https://www.bswhealthplan.com/FindProvider).

Dental care

Baylor Scott & White Health Plan's plans include dental benefits through MetLife for no additional premium. Coverage includes things like exams, cleanings, X-rays, extractions and fillings, restorative services and even dentures. Refer to the Evidence of Coverage for complete details, including limitations and exclusions.

MetLife's Preferred Dentist Program is a dental PPO plan. You can visit any licensed dentist – in or out of the MetLife **PDP Plus** network – and receive benefits. However, if you use an out-of-network provider, your share of the costs for your covered services may be higher. Find a participating dentist at [MetLife.com](https://www.MetLife.com).

Dental insurance policies are underwritten by Metropolitan Life Insurance Company, 200 Park Avenue, New York, NY 10166.

*American Academy of Ophthalmology, "20 Surprising Health Problems an Eye Exam Can Catch," by Reena Mukamal, April 29, 2022, American Academy of Ophthalmology, [aao.org](https://www.aao.org)

Have you taken your Health Assessment?

As a valued member of Baylor Scott & White Health Plan, we care about your health and well-being. Whether it's helping you manage a chronic condition like diabetes, encouraging you to take advantage of your Silver&Fit membership or equipping you with the tools necessary to take control of your health, we are here to give you the resources you need to feel your best.

To help us determine your overall wellness and any health-related needs you may have, go to [BSWHealthPlan.com/HRA](https://www.bswhealthplan.com/HRA) and complete a brief online questionnaire. When you're finished, you will be presented with simple and actionable lifestyle and health choices along with online health coaching that will help you achieve your personal health goals.

**Complete your Health Assessment at
[BSWHealthPlan.com/HRA](https://www.bswhealthplan.com/HRA).**

Silver&Fit Something for Everyone[®]

2024 BSW SeniorCare Advantage HMO-POS and PPO plans include a fitness membership at no additional cost.



National Network of Fitness Centers

Join a participating fitness center or select YMCA, many with exercise classes for older adults. You also have access to Premium locations, including fitness centers, studios, and unique fitness experiences, for a buy-up price.*



On-Demand Workout Videos

Visit the Silver&Fit website to find workout videos for all fitness levels.



Workout Plans

Answer a few online questions about your fitness level and goals to get workouts to help you start or continue an exercise routine.



Well-Being Club

Learn new skills and focus on well-being by:

- Connecting with others
- Enjoying live virtual classes and events on the Silver&Fit website
- Viewing exclusive articles and videos



Healthy Aging Coaching

Get support with your fitness, nutrition, and lifestyle goals during scheduled phone, video, or chat sessions with a trained coach.



Home Fitness Kits

Pick your favorite kit (one per benefit year):**

- Fitbit[®] or Garmin[®] Wearable Fitness Tracker
- Walking/Trekking
- Pilates
- Beginner, Intermediate, or Advanced Strength
- Beginner or Advanced Swim
- Beginner or Intermediate/Advanced Yoga



FitnessCoach[®] Virtual Personal Fitness Training

Challenge yourself with up to 8 live virtual sessions per benefit year with a certified personal fitness trainer. Each session costs \$30.

Go to SilverandFit.com to get started today! For questions, Silver&Fit toll-free at **1.877.427.4788** (TTY/TDD: 711), Monday through Friday, 7 a.m. to 8 p.m. Central time.

*Fees vary by Premium location. Please refer to the fitness center search on the Silver&Fit website.

**Home Fitness Kit promotional codes cannot be used in combination with any other promotions on third-party vendor websites. Once selected, kits cannot be exchanged.

The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). Please talk with your doctor before starting or changing your exercise routine. All programs and services are not available in all areas. Persons shown are not Silver&Fit members. Silver&Fit, Something for Everyone, FitnessCoach, and the Silver&Fit logo are federally registered trademarks of ASH. Limitations, member fees, and restrictions may apply. Other names and logos may be trademarks of their respective owners. Kits are subject to change. Fitness center participation may vary by location and is subject to change.

Over-the-counter (OTC) allowance

Most BSW SeniorCare Advantage plans feature a quarterly purchase allowance (based on calendar quarter) from participating retailers to purchase eligible over-the-counter items, such as bandages, cold and allergy medicines, pain relievers, and more. The BSW SeniorCare Advantage **PPO Platinum plan does not include** an over-the-counter allowance. Members with plans that include OTC will receive a mailing for the OTC Network with a card and instructions for setting up an account to view available items and for making purchases. Participating retailers include: Albertsons, CVS, Discount Drug Mart, Dollar General, Family Dollar, HEB, Kroger, Walmart, Walgreens and other independent pharmacy locations.

Note: CVS Pharmacies at Target do not accept OTC Network cards. Unused amounts do not roll over from quarter to quarter or to next year.

In-home meals benefit (HMO-POS plans only)

BSW SeniorCare Advantage **HMO-POS** plans include a meal benefit to ease your recovery when you return home from the hospital.

- 14 meals per hospital discharge to home; limit 3 discharges per year.
- Upon being discharged from the hospital, **HMO-POS** members receive home-delivered meals at no additional cost. GA Foods will contact you to arrange delivery.
- All meals are low in salt, sugar, fat and cholesterol, and are suitable for diabetics and those with cardiac conditions.

Routine transportation (HMO-POS plans only)

BSW SeniorCare Advantage **HMO-POS** plans include routine transportation to approved locations such as medical appointments, physical therapy visits, labs, grocery stores and drug stores.

To get started, schedule an appointment by contacting Modivcare at **1.866.428.0212**. There is no additional cost for this service. It includes up to 24 one-way trips per year, OR 12 round trips up to 50 miles each way.

The Modivcare App makes it easy to book a ride for your doctor visit when and where you like, right from your smartphone or tablet. Just search for the Modivcare App on Google Play[®] or the Apple App Store[®], and download it to book and manage trips.

Care management

If you're interested in personal assistance related to a disease or chronic condition, our nurse care managers can provide you with free and confidential guidance over the phone. Support includes:

- Information to help you better understand and manage your condition or disease;
- Personalized answers to your health or medication questions;
- Facilitating multiple services such as homecare, medical supplies or medical equipment; and
- Advice on how to live safely at home.

To hear more about these or other care management services, please call **1.866.334.3141** (TTY: 711).

Disease management

Disease Management empowers you to manage your chronic condition and help prevent complications. We work with your healthcare providers to identify chronic conditions quickly and treat them effectively. We can also identify self-care activities that help you manage your condition at home. Together, we'll work to slow down the progression of your disease and help you stay healthy.

Complex case management

If you have chronic conditions or complex care needs, our nurse case managers will work with you, your family and your physician to create and manage your care plan. Case managers advocate for you and can help you navigate the healthcare system and arrange the services you need. They can also answer questions and help you understand your condition and care plan. If you are also enrolled in a Disease Management program, your case manager will coordinate that program with your Complex Case Management plan. There is no additional cost to you for this voluntary program. It's all part of our goal to help you get the best possible results and the greatest value from your health plan.

Access the program by calling 1.866.334.3141.

Additional care programs

Members also have access to care programs that offer support for kidney disease and other chronic conditions, at no additional cost.

Kidney health program

Members diagnosed with kidney disease may be eligible for a specialized kidney program. This program is included in all BSW SeniorCare Advantage plans and includes many benefits such as:

- Personalized approach to managing different medications and diet plans
- Help with monitoring your daily vitals

In-home acute care

Members with multiple chronic conditions may be eligible for care being extended into the home through in-home medical visits by doctors and other providers.

- Routine and urgent house calls, and 24/7 phone support
- Prescribing and reviewing medications
- In-home labs and interventions
- Behavioral health, nutrition and social work support

We're glad to have you as part of the Baylor Scott & White Health Plan family. We look forward to serving you in 2024.

Medical Plan Benefits Effective January 1, 2024

Medical Plan Benefits	HMO-POS Select	HMO-POS Preferred	HMO-POS Premium	HMO-POS Select Rx Assist	PPO Basic ³ (In-Network Costs)	PPO Platinum ⁴ (In-Network Costs)
Monthly Premium (See Part B premium note below) With Part D prescription drug coverage Without Part D prescription drug coverage. ¹	\$0 \$0	\$135 \$83	\$243 \$199	\$0* Not available	\$0 Not available	\$132 Not available
Part B premium reduction (For plans without Part D) ²	\$50	\$50	\$50	Not available	Not available	Not available
Deductible	\$0	\$0	\$0	\$0	\$0	\$0
Out-of-Pocket Maximum with Part D Out-of-Pocket Maximum without Part D	\$5,800 \$5,900	\$4,600 \$4,500	\$4,800 \$4,500	\$5,800 Not available	\$6,800 Not available	\$4,600 Not available
Annual Physical Exam	\$0 copay	\$0 copay	\$0 copay	\$0 copay	Not available	Not available
Primary Care Physician (PCP) Office Visit	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Specialty Care Physician (SCP) Office Visit	\$25 copay	\$25 copay	\$0 copay	\$25 copay	\$40 copay	\$20 copay
Telehealth Visit (PCP, SCP, Psychiatry Services)	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Diagnostic Tests, X-rays, Lab Services (separate office visit copay may apply)	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Advanced Diagnostic Imaging Services (MRI, MRA, SPECT, CTA, CT, PET, Nuclear Cardiology)	\$75-\$300 copay	\$0-\$15 copay	\$0 copay	\$75-\$300 copay	\$75-\$300 copay	\$20-\$200 copay
Physical/Occupational/Speech Therapy (per visit)	\$35 copay	\$25 copay	\$10 copay	\$35 copay	\$35 copay	\$25 copay
Inpatient Hospital	Day 1-6: \$325/day per stay Day 7-90: \$0/day per stay	\$700/stay	\$100/stay	Day 1-6: \$325/day per stay Day 7-90: \$0/day per stay	Day 1-6: \$325/day per stay Day 7-90: \$0/day per stay	Day 1-5: \$250/day per stay Day 6-90: \$0/day per stay
Inpatient Mental Health	Day 1-5: \$318/day per stay Day 6-90: \$0/day per stay	\$700/stay	\$100/stay	Day 1-5: \$318/day per stay Day 6-90: \$0/day per stay	Day 1-5: \$318/day per stay Day 6-90: \$0/day per stay	Day 1-5: \$250/day per stay Day 6-90: \$0/day per stay
Skilled Nursing Facility (SNF)	Day 1-20: \$0/day Day 21-100: \$200/day	Day 1-20: \$0/day Day 21-100: \$50/day	Day 1-20: \$0/day Day 21-100: \$15/day	Day 1-20: \$0/day Day 21-100: \$200/day	Day 1-20: \$0/day Day 21-100: \$196/day	Day 1-20: \$0/day Day 21-100: \$50/day
Outpatient Surgery (facility)	\$325 copay	\$15 copay	\$0 copay	\$325 copay	\$350 copay	\$100 copay
Ambulatory Surgical Center (facility)	\$250 copay	\$100 copay	\$0 copay	\$250 copay	\$275 copay	\$75 copay
Ambulance with Part D Ambulance without Part D	\$300 copay \$265 copay	\$75 copay \$75 copay	\$40 copay \$40 copay	\$300 copay Not available	\$325 copay Not available	\$75 copay Not available
Emergency Care (within the U.S.; copay waived if admitted within 24 hours)	\$100 copay	\$100 copay	\$90 copay	\$90 copay	\$90 copay	\$90 copay
Urgent Care (within the U.S.; copay waived if admitted within 24 hours)	\$50 copay	\$40 copay	\$40 copay	\$50 copay	\$50 copay	\$50 copay
Worldwide Emergency/Urgent Services (outside the U.S.)	\$0 copay \$5,000 maximum	\$0 copay \$5,000 maximum	\$0 copay \$5,000 maximum	\$0 copay \$5,000 maximum	\$0 copay \$5,000 maximum	\$0 copay \$5,000 maximum
Durable Medical Equipment (DME)	20% coinsurance	20% coinsurance	\$0 copay	20% coinsurance	20% coinsurance	20% coinsurance
Podiatry	\$40 copay	\$15 copay	\$0 copay	\$40 copay	\$45 copay	\$45 copay
Chemotherapy Drugs	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance
Other Part B Drugs	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance	0%-20% coinsurance

This is not a complete description of benefits. Please refer to the plan's Evidence of Coverage at [BSWHealthPlan.com/Medicare](https://www.bswhealthplan.com/Medicare).

¹If you have Part D prescription drug coverage through another carrier, your drug coverage will end when your new BSW SeniorCare Advantage plan starts. Medicare Advantage plans do not allow members to have medical coverage and prescription drug coverage through two different Medicare Advantage plans. (Stand-alone prescription drug plans (PDPs) are considered Medicare Advantage plans.) If you enroll in a BSW SeniorCare Advantage medical plan without prescription drug coverage, you may owe a late enrollment penalty if you try to sign up for prescription drug coverage later.

²Certain plans without Part D prescription drug coverage pay toward your Part B premium. This reduction is applied on your Social Security check. For more information, go to ssa.gov.

³To help maximize BSW SeniorCare Advantage PPO benefits, use in-network providers for care; out-of-network cost-sharing for the Basic PPO is 35%. There is a \$10,000 out-of-pocket maximum for services received out-of-network.

⁴To help maximize BSW SeniorCare Advantage PPO benefits, use in-network providers for care; out-of-network cost-sharing for the Platinum PPO is 30%. There is an \$8,950 out-of-pocket maximum for services received out-of-network.

Extra Help, also known as a Low Income Subsidy, is a Medicare program that helps people with limited incomes pay for Medicare drug coverage (Part D) premiums, deductibles, coinsurance and other costs. It also relieves those who qualify from having to pay a Part D late enrollment penalty. In the Select Rx Assist plan, if you qualify for Extra Help, your monthly premium is \$0 and your covered prescription drugs are \$0. If you don't qualify, you'll pay a \$28.40 monthly premium and 25% of the cost of covered drugs after a \$545 deductible.

Find out if you qualify for Extra Help:

Medicare.gov/basics/costs/help/drug-costs; or Social Security Administration at ssa.gov/medicare/part-d-extra-help

Rx and Dental Benefits Effective January 1, 2024

Prescription Drug Benefits (applies to plans <i>with</i> Part D only)	HMO-POS Select Rx	HMO-POS Preferred Rx	HMO-POS Premium Rx	HMO-POS Select Rx Assist	PPO Basic	PPO Platinum
Deductible	\$0	\$0	\$0	\$0*	\$250 (Applies to Tiers 3-5)	\$50 (Applies to Tiers 3-5)
Initial Coverage Amount	\$5,030	\$5,030	\$5,030	\$5,030*	\$5,030	\$5,030
Retail Copays During Initial Coverage Period (30-day supply)	Preferred/Standard Pharmacy					
Tier 1 – Preferred Generic Drugs	\$0/\$10 copay	\$0/\$8 copay	\$0/\$7 copay	\$0* copay	\$0/\$5 copay	\$0/\$5 copay
Tier 2 – Generic Drugs	\$13/\$20 copay	\$8/\$15 copay	\$5/\$12 copay	\$0* copay	\$7/\$14 copay	\$5/\$12 copay
Tier 3 – Preferred Brand Drugs	\$47/\$47 copay	\$45/\$45 copay	\$45/\$45 copay	\$0* copay	\$47/\$47 copay	\$45/\$45 copay
Tier 4 – Non-Preferred Drugs	\$100/\$100 copay	\$95/\$95 copay	\$95/\$95 copay	\$0* copay	\$99/\$99 copay	\$95/\$95 copay
Tier 5 – Specialty Drugs	33% coinsurance	33% coinsurance	33% coinsurance	\$0* copay	29% coinsurance	32% coinsurance
Mail Order Copays	Tiers 1 – 2 are \$0 copay; Tiers 3 – 4 are 2 copays for a 90-day supply					
After Initial Coverage Amount - You Pay						
Preferred Generic Drugs	25% coinsurance	25% coinsurance	25% coinsurance	\$0* copay	25% coinsurance	25% coinsurance
Other Generic Drugs	25% coinsurance	25% coinsurance	25% coinsurance	\$0* copay	25% coinsurance	25% coinsurance
Brand-Name Drugs	25% coinsurance	25% coinsurance	25% coinsurance	\$0* copay	25% coinsurance	25% coinsurance
Total Out-of-Pocket You Pay Before Catastrophic Coverage	\$8,000	\$8,000	\$8,000	\$8,000*	\$8,000	\$8,000
Catastrophic Coverage Amounts - You Pay	\$0 copay	\$0 copay	\$0 copay	\$0* copay	\$0 copay	\$0 copay

Even if you haven't paid your deductible, you won't pay more than \$35 for a one-month supply of each covered insulin product regardless of the cost-sharing tier and no cost for most adult Part D vaccines.

Dental Benefits (for all plans)	
Monthly Premium	Included
Yearly Benefit Maximum	\$3,500
Deductible	\$0
Oral Exams - One every 6 months	\$0
Cleanings - One every 6 months (Exception: 3 times per year for PPO Basic)	\$0
Dental X-rays (One full mouth X-ray every 60 months. One bite-wing X-ray every 12 months.)	\$0
Extractions	\$0
Fillings (One filling every 24 months covered at 100%. 50% coinsurance for additional fillings.)	\$0
Dentures (every 5 years)	\$0
Restorative Services	0%-50%

HMO-POS Select Rx Assist \$0 premium and prescriptions

*Extra Help, also known as a Low Income Subsidy, is a Medicare program that helps people with limited incomes pay for Medicare drug coverage (Part D) premiums, deductibles, coinsurance and other costs. It also relieves those who qualify from having to pay a Part D late enrollment penalty.

In the Select Rx Assist plan, if you qualify for Extra Help,* your monthly premium is \$0 and your covered prescription drugs are \$0.

If you don't qualify, you'll pay a \$28.40 monthly premium and 25% of the cost of covered drugs after a \$545 deductible.

Find out if you qualify:

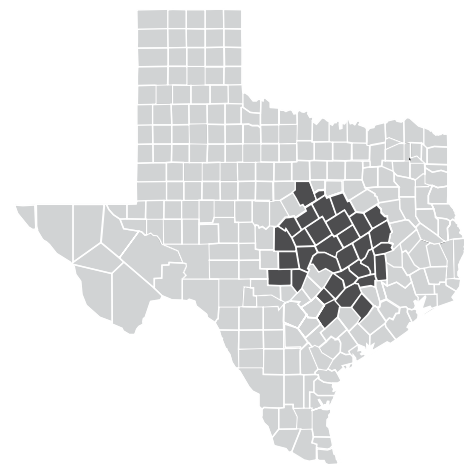
[Medicare.gov/basics/costs/help/drug-costs](https://www.medicare.gov/basics/costs/help/drug-costs); OR

Social Security Administration at [ssa.gov/medicare/part-d-extra-help](https://www.ssa.gov/medicare/part-d-extra-help)

Supplemental Benefits Effective January 1, 2024

Supplemental Benefits	HMO-POS Select	HMO-POS Preferred	HMO-POS Premium	HMO-POS Select Rx Assist	PPO Basic	PPO Platinum
Routine Eye Exam (one per year; must use a network provider)	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Eyewear (annually; must use network provider) With Part D prescription drug coverage Without Part D prescription drug coverage.	\$150 allowance \$125 allowance	\$125 allowance \$125 allowance	\$125 allowance \$125 allowance	\$150 allowance Not available	\$150 allowance Not available	\$150 allowance Not available
Routine Hearing Exam (one per year)	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Hearing Aids (every 3 years) With Part D prescription drug coverage Without Part D prescription drug coverage	\$1,500 allowance \$1,000 allowance	\$1,000 allowance \$1,000 allowance	\$1,000 allowance \$1,000 allowance	\$1,500 allowance Not available	\$1,000 allowance Not available	\$1,500 allowance Not available
Fitness Membership (Home fitness programs, activity tracker, and/or gym/fitness club membership at participating Silver&Fit locations and YMCAs)	\$0	\$0	\$0	\$0	\$0	\$0
Over-the-Counter (OTC) Allowance (must use OTC Network card at participating retailers; no rollover) With Part D prescription drug coverage Without Part D prescription drug coverage	\$50 per quarter \$30 per quarter	\$30 per quarter \$30 per quarter	\$30 per quarter \$30 per quarter	\$50 per quarter Not available	\$30 per quarter Not available	Not available Not available
In-Home Meals (14 meals per hospital discharge to home; limit 3 discharges per year)	\$0 copay	\$0 copay	\$0 copay	\$0 copay	Not available	Not available
Routine Transportation (up to 24 one-way trips per year, or 12 round trips up to 50 miles each way)	\$0 copay	\$0 copay	\$0 copay	\$0 copay	Not available	Not available

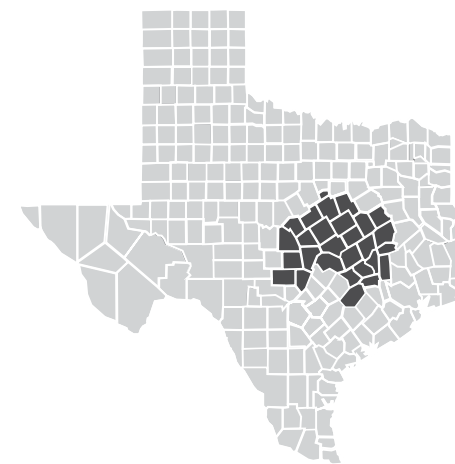
HMO-POS Coverage Area



The counties in the Central Texas HMO-POS service area are:

Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Colorado, Coryell, Erath, Falls, Fayette, Freestone, Gillespie, Gonzales, Grimes, Hamilton, Hill, Lampasas, Lee, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Somervell, Washington, Williamson

PPO Coverage Area



The counties in the Central Texas PPO service area are:

Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Coryell, Falls, Fayette, Freestone, Gillespie, Grimes, Hamilton, Hill, Lampasas, Lee, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Somervell, Washington, Williamson

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Important BSW SeniorCare Advantage Information

2024 Benefits of Membership