



2023 West Texas

Benefits of Membership

CovenantHealth  SM
Advantage HMO

offered by
 Baylor Scott & White
Health Plan

Contact information at a glance

Baylor Scott & White Health Plan Customer Service
1.833.442.2405 · TTY: 711
7 AM – 8 PM
7 days a week (including major holidays)
MyBSWHealth.com

Customer Engagement
(Plan Changes/Annual Enrollment Assistance)
1.877.845.3901
8 AM – 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

Modivcare 1.866.428.0212
Modivcare.com

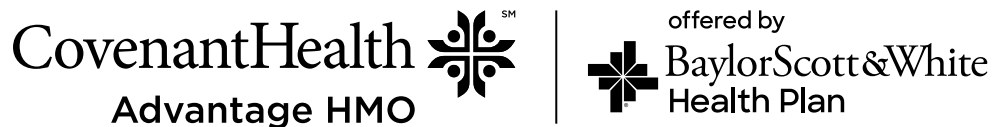
Medicare 1.800.MEDICARE (1.800.633.4227)
TTY: 1.877.486.2048
24 hours a day/7 days a week
Medicare.gov

Covenant Health Advantage HMO is offered by Baylor Scott & White Care Plan, a Medicare Advantage organization with a Medicare contract and subsidiary of Baylor Scott & White Health Plan. Enrollment in Covenant Health Advantage HMO depends on contract renewal with Medicare.

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 the **Covenant Health Advantage** network, Baylor Scott & White Health Plan is the right choice for your healthcare needs. The **Covenant Health Advantage** network consists of hundreds of physicians and clinics as well as cornerstone hospital facilities across West Texas.

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 an in-network specialist without a referral anytime.

As a Covenant Health Advantage member, you have hundreds of in-network providers to choose from in the Covenant Health network. You do not have to select a primary care physician (PCP) to direct your care. You can see an in-network specialist without a referral anytime.

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 responsible for payment of all out-of-network charges.

You can find in-network doctors, specialists, hospitals and other providers online through BSWHealthPlan.com/Medicare or by calling Customer Service.

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.

1.833.442.2405 (TTY: 711)

7 AM to 8 PM, seven days a week
(including major holidays)

**You can see an
in-network
specialist without
a referral anytime.**

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 and select Member Resources.

Where to go for care

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

Less \$

VIRTUAL CARE - \$0 COPAY

Using your mobile device or computer

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



PRIMARY CARE DOCTOR

Your best 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.



More \$

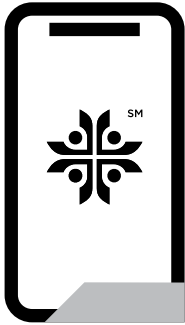
Need help finding a doctor, urgent care, walk-in clinic or emergency room near you? **Contact Customer Service by phone at 1.833.442.2405 (TTY 711). You can also visit Covenant.BSWHealthPlan.com.**



Self-service tools ensure access anywhere, anytime

Using the member portal at **Covenant.BSWHealthPlan.com**, you can access your health insurance information 24 hours a day, seven days a week.

You can:



- Find a provider
- Access a digital copy of your member ID card
- Access plan documents and benefits overview
- See a copy of your Explanation of Benefits
- View claims and payments toward your out-of-pocket maximum

Virtual care through MDLIVE

We've teamed up with MDLIVE to allow you to visit a doctor, counselor or psychiatrist by phone, tablet or computer. MDLIVE allows you to conveniently access care while staying at home. This telehealth service is provided for \$0 copay for members of the **Covenant Health Advantage HMO** plan.



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: Covenant Health Advantage HMO** 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.BSWHealthPlan.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:

- Having the option of a three-month supply
- 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. Log in to your member portal at **Covenant.BSWHealthPlan.com**. 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 2023 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 **Covenant.BSWHealthPlan.com**.

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 **Covenant.BSWHealthPlan.com**.

Dental care

Our **Covenant Health Advantage HMO** 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**.

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

Over-the-counter (OTC) allowance

Covenant Health Advantage HMO 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. Members 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: CVS, Discount Drug Mart, Dollar General, Family Dollar, HEB, Rite Aid, 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

Covenant Health Advantage HMO 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, 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

Covenant Health Advantage HMO 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.



Something for Everyone[®] with the Silver&Fit[®] program

2023 **Covenant Health Advantage HMO** plans include a fitness membership at no additional cost.



8,000+ on-demand workout videos

You can view yoga, strength, Pilates, walking, cardio, and many other workout videos on the Silver&Fit website and through the Silver&Fit mobile app.



Home fitness kits

You can pick one Home Fitness Kit per benefit year from options such as a Wearable Fitness Tracker Kit, Pilates Kit, Strength Kit, Yoga Kit and more.



Access to one of thousands of participating fitness centers

You also have access to the Premium Fitness Network including unique experiences like swimming centers, rock climbing gyms and rowing centers, each with a monthly buy-up price.



Workout videos

You can join workout classes on Facebook Live and the Silver&Fit YouTube channel.

facebook.com/SilverandFit

youtube.com/SilverandFit



Healthy aging coaching

You can address your fitness, nutrition and lifestyle goals during scheduled phone sessions with a coach.

The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). All programs and services are not available in all areas. Silver&Fit and Something for Everyone, are trademarks of ASH and used with permission herein. Kits are subject to change. Participating facilities and fitness chains may vary by location and are subject to change. Other names may be trademarks of their respective owners.

HMO Medical Plan Benefits Effective January 1, 2023

Medical Plan Benefits*	HMO**	HMO Rx
Monthly Premium	\$0	\$0
Deductible	\$0	\$0
Out-of-Pocket Maximum	\$5,900	\$6,000
Annual Physical Exam	\$0 copay	\$0 copay
Primary Care Physician (PCP) Office Visit	\$0 copay	\$0 copay
Specialty Care Physician (SCP) Office Visit	\$25 copay	\$25 copay
Telehealth Visit (PCP, SCP, Psychiatry Services)	\$0 copay	\$0 copay
Diagnostic Tests, X-rays, Lab Services (separate office visit copay may apply)	\$0-\$75 copay	\$0-\$75 copay
Advanced Diagnostic Imaging Services (MRI, MRA, SPECT, CTA, CT, PET, Nuclear Cardiology)	\$300 copay	\$300 copay
Physical/Occupational/Speech Therapy (per visit)	\$35 copay	\$35 copay
Inpatient Hospital	Days 1-6: \$325/day Days 7-90: \$0/day	Days 1-6: \$325/day Days 7-90: \$0/day
Inpatient Mental Health	Days 1-5: \$318/day Days 6-90: \$0/day	Days 1-5: \$318/day Days 6-90: \$0/day
Skilled Nursing Facility (SNF)	Days 1-20: \$0/day Days 21-100: \$196/day	Days 1-20: \$0/day Days 21-100: \$196/day
Outpatient Surgery (facility)	\$325 copay	\$325 copay
Ambulatory Surgical Center (facility)	\$250 copay	\$250 copay
Ambulance	\$265 copay	\$300 copay
Emergency Care (within the U.S.; copay waived if admitted within 24 hours)	\$90 copay	\$90 copay
Urgent Care (within the U.S.; copay waived if admitted within 24 hours)	\$50 copay	\$50 copay
Worldwide Emergency/Urgent Services (outside the U.S.)	\$0 copay \$5,000 maximum	\$0 copay \$5,000 maximum
Durable Medical Equipment (DME)	20% coinsurance	20% coinsurance
Podiatry	\$40 copay	\$40 copay
Chemotherapy Drugs	20% coinsurance	20% coinsurance
Other Part B Drugs	20% coinsurance	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).

** Covenant Health Advantage HMO (without Part D) pays \$50 toward your Part B premium. This reduction is applied to your Social Security check. Contact Social Security or go to [SSA.gov](https://www.ssa.gov) for more information. If you have Part D prescription drug coverage through another carrier, your drug coverage will end when your new Covenant Health 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 Covenant Health 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.



HMO Rx and Dental Benefits Effective January 1, 2023

Prescription Drug Benefits (applies to HMO with Part D only)	HMO Rx
Initial Coverage Amount	\$4,660
Deductible	\$0
Retail Copays During Initial Coverage Period	
Tier 1 - Preferred Generic Drugs	\$5 copay
Tier 2 - Generic Drugs	\$20 copay
Tier 3 - Preferred Brand Drugs	\$47 copay
Tier 4 - Non-Preferred Drugs	\$100 copay
Tier 5 - Specialty Drugs	30% 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
Other Generic Drugs	25% coinsurance
Brand-Name Drugs	25% coinsurance
Total Out-of-Pocket You Pay Before Catastrophic Coverage	\$7,400
Catastrophic Coverage Amounts - You Pay	The greater of 5% or \$4.15 for generic drugs (including brand drugs treated as generic) or \$10.35 for all other drugs

There is no deductible for Covenant Health Advantage for select insulins. Your out-of-pocket costs for select insulins will be \$35 for a 30-day supply during the deductible and initial coverage phase. Covenant Health Advantage also offers additional gap coverage for select insulins. During the Coverage Gap stage, your out-of-pocket costs for select insulins will also be \$35 for a 30-day supply. You pay \$0 for Part D vaccines.

Dental Benefits (for both HMO plans)	
Monthly Premium	Included
Yearly Benefit Maximum	\$2,500
Deductible	\$0
Oral Exams, Cleanings (every 6 months)	\$0
Dental X-rays (every 3 years)	\$0
Extractions and Fillings	50%
Dentures (every 5 years)	50%
Restorative Services (every 2 years)	50%

HMO Supplemental Benefits Effective January 1, 2023

Supplemental Benefits	HMO	HMO Rx
Routine Eye Exam (one per year; must use a network provider)	\$0 copay	\$0 copay
Eyewear (must use a network provider)	\$125 annual allowance toward purchase	\$125 annual allowance toward purchase
Routine Hearing Exam (one per year)	\$0 copay	\$0 copay
Hearing Aids	\$1,000 allowance toward purchase every 3 years	\$1,000 allowance toward purchase every 3 years
Fitness Membership (Home fitness programs, activity tracker, and/or gym/fitness club membership at participating Silver&Fit locations and YMCAs)	\$0 cost	\$0 cost
Over-the-Counter (OTC) Allowance (must use OTC Network card at participating retailers; no rollover)	\$30 per quarter	\$50 per quarter
In-Home Meals (14 meals per hospital discharge to home; limit 3 discharges per year)	\$0 copay	\$0 copay
Routine Transportation (up to 24 one-way trips per year, or 12 round trips up to 50 miles each way)	\$0 copay	\$0 copay

HMO Coverage Area



The counties in the West Texas HMO service area are:

Crosby, Floyd, Garza, Hale, Hockley, Lubbock, Lynn, Terry

2023 Benefits of Membership

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