

WELCOME

Annual Notice of Change 2025



Disclaimers

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.

You must continue to pay your Medicare Part B premium.

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

This is not a complete description of benefits. Call 1.866.334.3141 (PPO) or 833.442.2405 (HMO) for more information. TTY users may call 711.

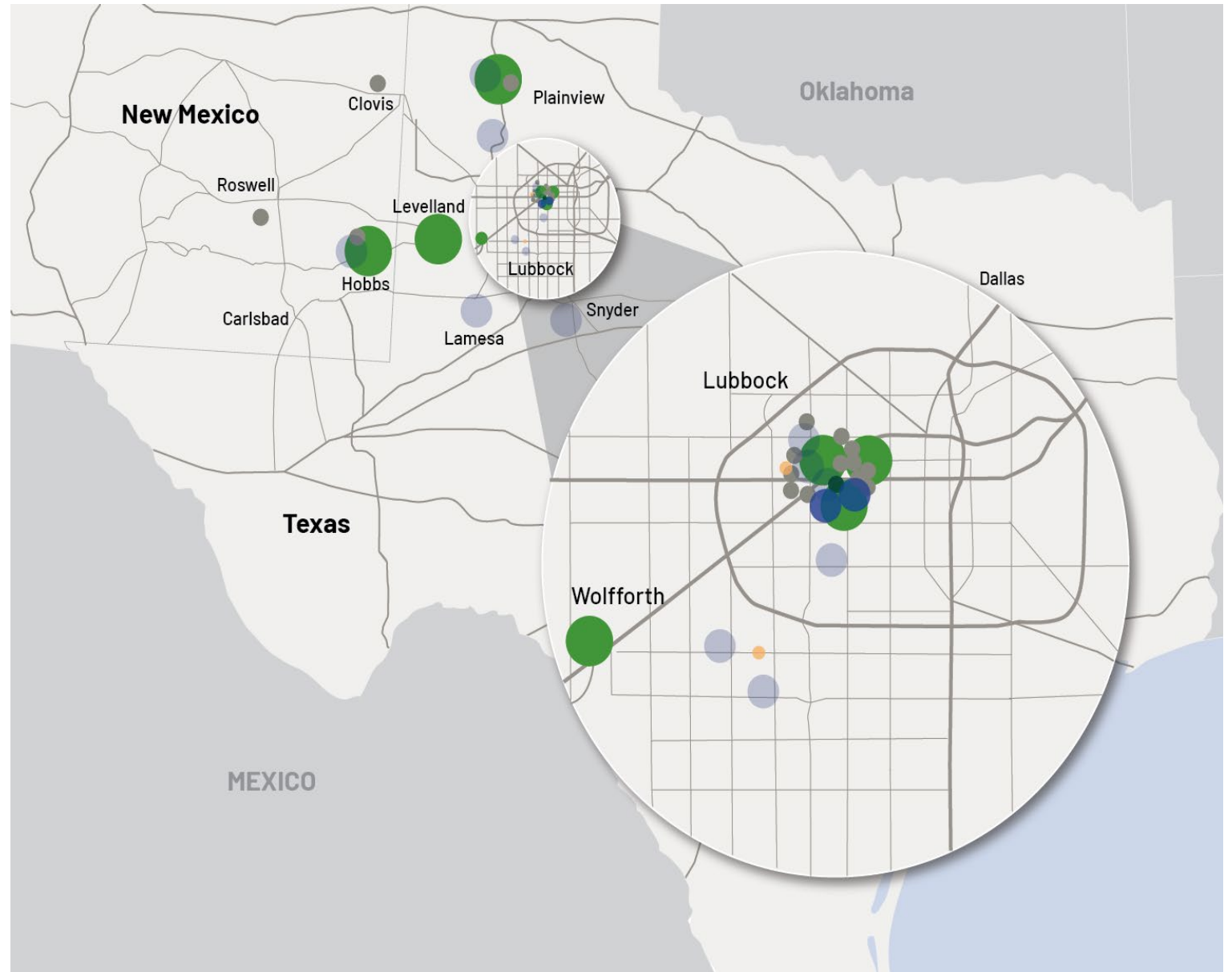
Today's discussion

1. Network of Care and Partnership
2. What's Changing for 2025?
3. Covenant Health Advantage HMO
4. Extra Benefits
5. BSW SeniorCare Advantage PPO – NEW!
6. Contact Information

Network of Care

600+ Providers

- Primary Care locations
- Specialty Care locations
- Urgent Care or ExpressCare Clinics
- Ambulatory Surgery Centers
- Ambulatory Imaging Centers
- Hospitals



Covenant Health Advantage HMO



8 COUNTIES:

Crosby

Floyd

Garza

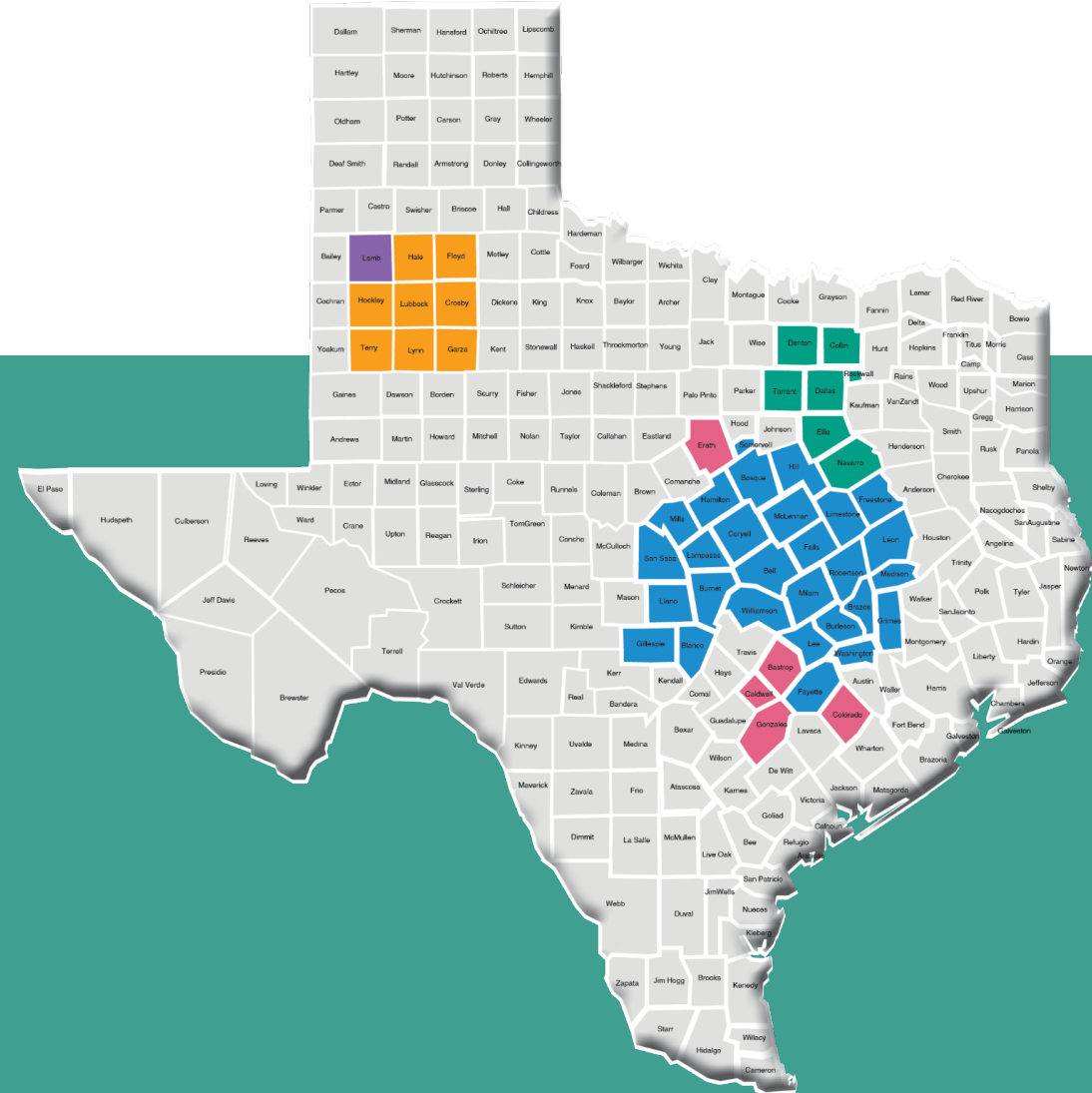
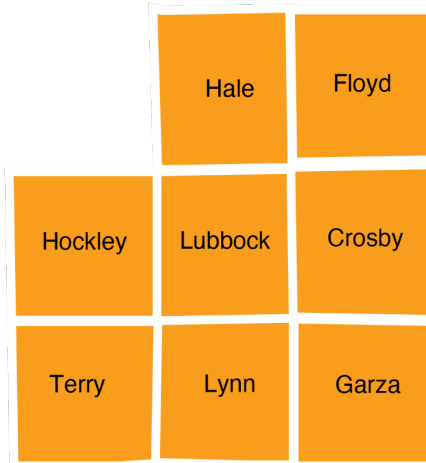
Hale

Hockley

Lynn

Lubbock

Terry



What's Changing for 2025?

- New Part D drug coverage phases
- Medicare Prescription Payment Plan
- Capital Rx replaces Optum Rx as the Pharmacy Benefit Administrator
- Separate MetLife Dental ID Cards
- Baylor Scott & White Health Plan PPO – *NEW for 2025 in Lubbock area*
 - BSW SeniorCare Advantage PPO plan available
 - Coverage across 9 counties, including: Crosby, Floyd, Garza, Hale, Hockley, Lamb, Lubbock, Lynn, Terry



New Medicare Drug Phases

	2025
Deductible Phase	Cost sharing is 100% before deductible is met (if plan has deductible)
Out-of-Pocket Threshold	\$2,000
Catastrophic Phase	Member pays \$0



Medicare Prescription Payment Plan (M3P)



Voluntary program allowing members to spread prescription costs over monthly installments. Can be elected prior to and during the plan year.



Plan sponsors and pharmacies will notify members if they are likely to benefit from the M3P program.



Plan sponsors are responsible for billing M3P members monthly using a CMS prescribed payment methodology. Payments may change monthly.

M3P helps manage monthly expenses but does **NOT** lower drug costs.



M3P

Who Benefits from the Medicare Prescription Payment Plan (M3P)?

Who may benefit from M3P?

- High drug costs early in the calendar year
- Electing early in the plan year (prior to September)

Who may NOT benefit from M3P?

- Yearly drug costs are low
- Member is low-income subsidy (LIS)
- Electing late in the plan year (after September)
- Drug costs are the same each month
- Receives prescription assistance from other sources (Patient Assistance Programs/PAP, other health coverage, etc.)



M3P Program Overview

- Key Program Components:
 - Target Letter to those most likely to benefit
 - Application to opt-in to M3P
 - Website with calculation tool, pharmacy directory, and formulary
 - Monthly billing to M3P participants
 - Deliver late letters to non-paying members
 - Term members based on member directive or for non-payment
 - Send term letter to impacted members
- URL: https://enrollment.cap-rx.com/BSW_Medicare
- Phone: (833) 502-3340



Medicare Plan Highlights

No referrals
required to see a
specialist

Worldwide ER and
Urgent Care
Coverage is
included

\$0 telehealth visits
including primary
care, specialists,
and psychiatry

\$0 copays
available for many
mail order
prescriptions

Preferred
pharmacies with
lower prescription
copays

Dental, vision, and
hearing benefits
included in all
plans



Medicare Advantage Election Periods

- **Annual Election Period (AEP)**

Medicare Advantage-eligible individuals may enroll in or disenroll from a Medicare Advantage plan during AEP, which runs from October 15 through December 7 of each year.

- **Medicare Advantage Open Enrollment Period (OEP)**

OEP takes place annually from January 1 through March 31, and allows individuals enrolled in an MA plan, to make a one-time election to go to another MA plan or Original Medicare. Individuals using the OEP to make a change may make a coordinating change to add or drop Part D coverage.





Covenant Health Advantage HMO



Covenant Health Advantage HMO

Medical Benefits	HMO Rx	HMO
Monthly Premium	\$0	\$0
Part B Buy Down (The plan without Rx pays \$50 toward Part B premium. This reduction is applied on the member's Social Security check. Contact Social Security or go to SSA.gov for more information.)	Not available	(\$50)
Deductible (medical)	\$0	\$0
Out-of-Pocket Maximum	\$5,900	\$5,600
Primary Care Physician (PCP) Office Visit	\$0	\$0
Specialty Care Physician (SCP) Office Visit	\$30	\$30
Telehealth Services (PCP, SCP, Psychiatry)	\$0	\$0
Skilled Nursing Facility (SNF) Care	Days 1-20: \$0/day	Days 1-20: \$0/day
	Days 21-100: \$214/day	Days 21-100: \$214/day
Inpatient Hospital	Days 1-6: \$325/day	Days 1-6: \$325/day
	Days 7-90: \$0/day	Days 7-90: \$0/day
Outpatient Surgery (facility)	\$275 copay	\$275 copay
Ambulatory Surgical Center (facility)	\$250 copay	\$250 copay
Emergency Care (copay waived if admitted within 24 hours)	\$120 copay	\$120 copay
Urgent Care (copay waived if admitted within 24 hours)	\$50 copay	\$50 copay
Worldwide Emergency/Urgent Services	\$0 copay	\$0 copay
	\$5,000 maximum	\$5,000 maximum



Benefits in purple reflect changes from 2024

Covenant Health Advantage HMO

Prescription Drug Benefits	HMO Rx
Deductible	\$0
Total Out-of-Pocket Amount	\$2,000
Copays (30-day supply)	Preferred / Standard Pharmacies
Tier 1: Preferred Generic Drugs	\$0/\$5 copay
Tier 2: Generic Drugs	\$5/\$10 copay
Tier 3: Preferred Brand Drugs	\$47/\$47 copay
Tier 4: Non-Preferred Brand Drugs	\$100/\$100 copay
Tier 5: Specialty Drugs	33% coinsurance
Mail-Order Copays (90-day supply)	
Tier 1: Preferred Generic Drugs	\$0 copay
Tier 2: Generic Drugs	\$0 copay
Tier 3: Preferred Brand Drugs (2 copays of \$47 for 90-day supply)	\$94 copay
Tier 4: Non-Preferred Brand Drugs (2 copays of \$100 for 90-day supply)	\$200 copay
During the Catastrophic Phase, You Pay	\$0 copay



Benefits in purple reflect changes from 2024

Mail Order and 90-Day Prescriptions

Getting your medications delivered to your home can save you time and money.

- Receive three-month supplies of your medications with the option of automatic refills
- Free standard shipping

Sign up for Mail Order in one of three simple ways:

- Ask your doctor to send an electronic prescription to OptumRx® Home Delivery.
- Call OptumRx at 1.844.230.9357 and select the option for Mail Order.

Prefer to use your retail pharmacy to receive 90-day prescriptions? No problem.

- Receive 90-day prescriptions at preferred pharmacies for 2 copays for most medications in Tiers 1-4
- Visit [BSWHealthPlan.com/Medicare](https://www.BSWHealthPlan.com/Medicare) to view the formulary (drug list) and pharmacy directory

Visit [MyBSWHealth.com](https://www.MyBSWHealth.com) and log in to your member portal to enroll and manage your active mail-order prescriptions.





Extra Benefits

Covenant Health Advantage HMO

Bonus Benefits	
Routine Vision Exam (one per year; must use a network provider)	\$0 copay
Eyewear (annual allowance toward purchase; must use a network provider)	\$125 allowance
Routine Hearing Exam (one per year)	\$0 copay
Hearing Aids (annual allowance toward purchase every 3 years)	\$1,000 allowance
Over-the Counter (OTC) Allowance (must use OTC Network card at participating retailers; no rollover)	\$30-90 allowance based on plan

Benefits in purple reflect changes from 2024

Covenant Health Advantage

HMO Dental Benefits



Monthly Premium	Included
Deductible	\$0
Yearly Benefit Maximum	\$2,500-\$3,000
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	50%
Prosthodontics	50%
Other Oral/Maxillofacial Surgery	50%

MetLife ID cards coming in 2025!

Over-the-Counter (OTC) Allowance

- Quarterly allowance toward purchase of bandages, cold and allergy medicines, pain relievers, and more (\$90 allowance for HMO with Rx; \$30 allowance without Rx)
- Unused amounts do not rollover – must use or lose

Participating retailers:

- CVS
- Discount Drug Mart
- Dollar General
- Family Dollar
- HEB
- Kroger
- Rite Aid
- Walgreens
- Walmart
- Whole Foods
- Other independent pharmacy locations
- Online through CVS

Members will receive a mailing with an OTC Network card and instructions

Beginning January 1, 2025, mybenefitscenter.com will have both Walmart and CVS Health links available as online retailers.



NEW!
BSW SeniorCare Advantage PPO



NEW! BSW SeniorCare Advantage PPO

9 COUNTIES:

Crosby

Floyd

Garza

Hale

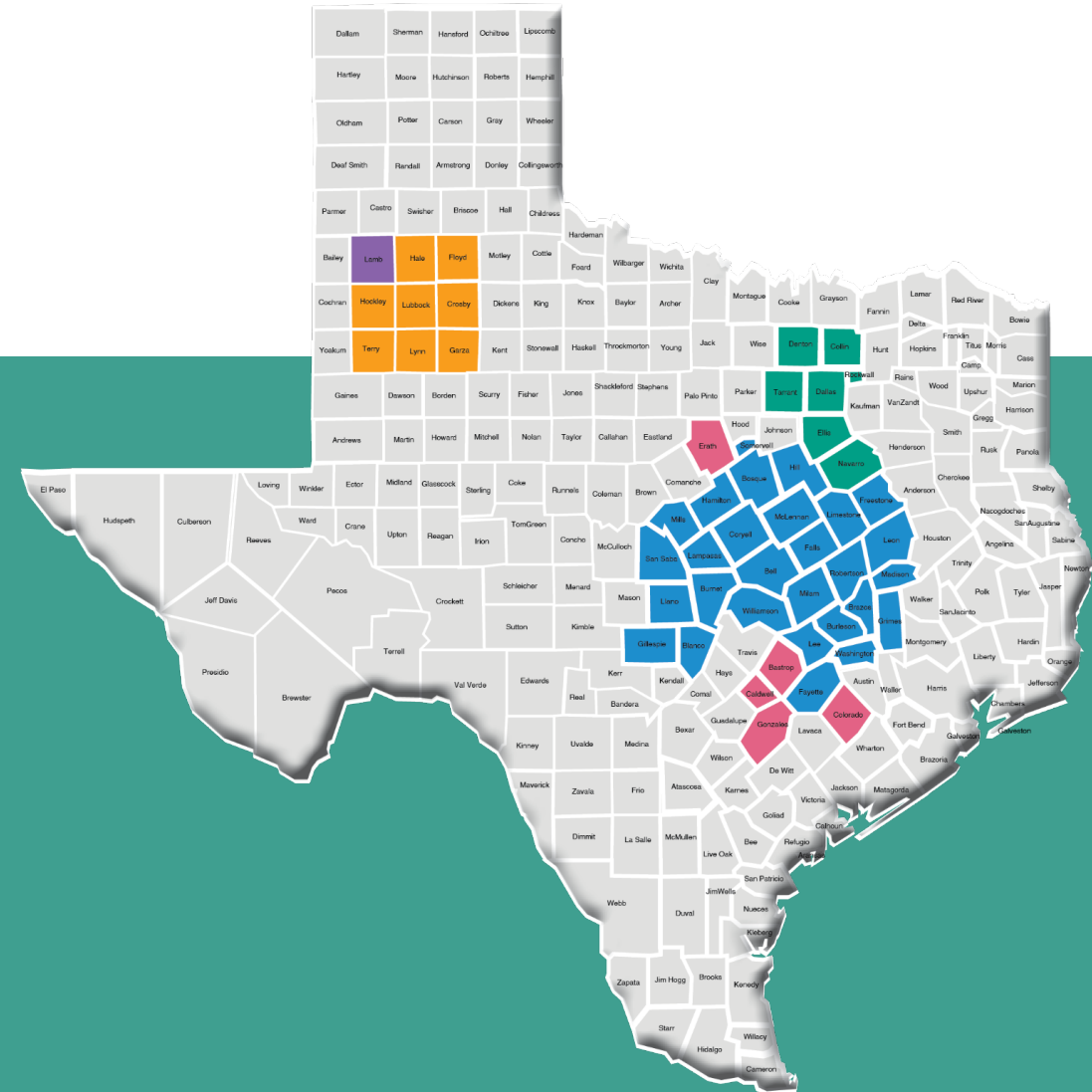
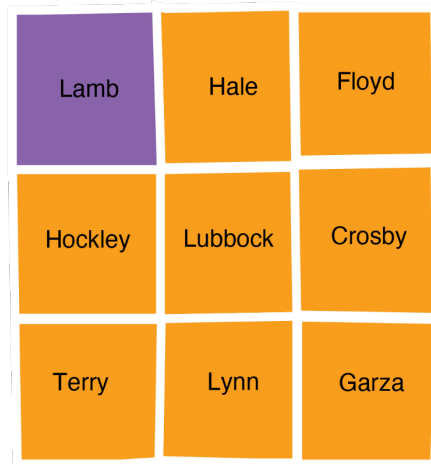
Hockley

Lamb - Only in PPO

Lynn

Lubbock

Terry



BSW SeniorCare Advantage PPO

Medical Benefits	PPO
Monthly Premium (You must continue to pay your Medicare Part B premium)	\$0
Part B Buy Down (This plan pays \$5 toward Part B premium. This reduction is applied on the member's Social Security check. Contact Social Security or go to SSA.gov for more information.)	(\$5)
Deductible (medical)	\$0
Out-of-Pocket Maximum (Does not include prescription drugs)	\$6,400
Out-Pocket Maximum (Combined in-and-out of network)	\$10,000
Primary Care Physician (PCP) Office Visit	\$0
Specialty Care Physician (SCP) Office Visit	\$35
Diagnostic Radiological Services including X-rays	\$0-\$300 copay
Telehealth Services (PCP, SCP, Psychiatry)	\$0
Skilled Nursing Facility (SNF) Care	Days 1-20: \$0/day
	Days 21-100: \$214/day
Inpatient Hospital	Days 1-6: \$325/day
	Days 7-90: \$0/day
Outpatient Surgery (facility)	\$350 copay
Ambulatory Surgical Center (facility)	\$275 copay
Emergency Care (copay waived if admitted within 24 hours)	\$120 copay
Urgent Care (copay waived if admitted within 24 hours)	\$50 copay
Worldwide Emergency/Urgent Services	\$0 copay
	\$5,000 maximum



BSW SeniorCare Advantage PPO

Prescription Drug Benefits	PPO
Rx Deductible	\$300 (applies to Tiers 3-5)
Total Out-of-Pocket Amount	\$2,000
Copays (30-day supply)	Preferred / Standard Pharmacies
Tier 1: Preferred Generic Drugs	\$0/\$5 copay
Tier 2: Generic Drugs	\$7/\$14 copay
Tier 3: Preferred Brand Drugs	\$47/\$47 copay
Tier 4: Non-Preferred Brand Drugs	\$99/\$99 copay
Tier 5: Specialty Drugs	29% coinsurance
Mail-Order Copays (90-day supply)	
Tier 1: Preferred Generic Drugs	\$0 copay
Tier 2: Generic Drugs	\$0 copay
Tier 3: Preferred Brand Drugs (Two 30-day supply copays for 90-day supply)	\$94 copay
Tier 4: Non-Preferred Brand Drugs (Two 30-day supply copays for 90-day supply)	\$198 copay
During the Catastrophic Phase, You Pay	\$0 copay



Mail Order and 90-Day Prescriptions

Getting your medications delivered to your home can save you time and money.

- Receive three-month supplies of your medications with the option of automatic refills
- Free standard shipping

Sign up for Mail Order in one of three simple ways:

- Ask your doctor to send an electronic prescription to OptumRx® Home Delivery.
- Call OptumRx at 1.844.230.9357 and select the option for Mail Order.

Prefer to use your retail pharmacy to receive 90-day prescriptions? No problem.

- Receive 90-day prescriptions at preferred pharmacies for 2 copays for most medications in Tiers 1-4
- Visit [BSWHealthPlan.com/Medicare](https://www.BSWHealthPlan.com/Medicare) to view the formulary (drug list) and pharmacy directory

Visit [MyBSWHealth.com](https://www.MyBSWHealth.com) and log in to your member portal to enroll and manage your active mail-order prescriptions.





Extra Benefits

BSW SeniorCare Advantage PPO

Supplemental Benefits	PPO
Routine Eye Exam (one per year; must use a network provider)	\$0 copay
Eyewear (annual allowance toward purchase; must use a network provider, any upgrades, such as lens tinting is not included in the eyewear allowance and not covered by the plan)	\$150 allowance
Routine Hearing Exam (one per year)	\$0 copay
Hearing Aids (allowance toward purchase every 3 years)	\$1,000 allowance
Fitness (at participating Silver&Fit locations)	\$0
Dental Monthly Premium Annual Benefit Max	\$0 \$3,500
Dentures (every 5 years) (All services count toward the maximum)	\$0 copay
Over-the-counter (OTC) Allowance (must use OTC Network card at participating retailers; no rollover) Walmart as a new online retailer.	\$100 per quarter
Out-of-Network Cost-Sharing	35%
Annual Deductible	\$0
Annual Out-of-Pocket Maximum for Services Received In and Out-of-Network Combined	\$10,000



BSW SeniorCare Advantage

PPO Dental Benefits



Monthly Premium	Included
Yearly Benefit Maximum	\$3,500
Deductible	\$0
Oral Exams, Cleanings (every 6 months)	\$0
Dental X-rays (Full mouth x-rays every 60 months. Bite-wing x-rays every 12 months)	\$0
Extractions	\$0
Dentures (Once every 5 years)	50%
Fillings (1 every 24 months)	50%
Crowns, Inlays, Onlays, Bridges, Implants (1 per tooth position every 10 years)	50%
Other Restorative Services	50%
Other Oral/Maxillofacial Surgery	50%



MetLife ID cards coming in 2025!

Over-the-Counter (OTC) Allowance

- Quarterly allowance toward purchase of bandages, cold and allergy medicines, pain relievers, and more (\$100 allowance for PPO)
- Unused amounts do not rollover – must use or lose

Participating retailers:

- CVS
- Discount Drug Mart
- Dollar General
- Family Dollar
- HEB
- Kroger
- Rite Aid
- Walgreens
- Walmart
- Whole Foods
- Other independent pharmacy locations
- Online through CVS

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Beginning January 1, 2025, mybenefitscenter.com will have both Walmart and CVS Health links available as online retailers.

Contact Information

BSWHP Customer Service

Covenant Health Advantage (HMO)

833.442.2405 TTY: 711

7 AM – 8 PM, 7 days a week

BSW SeniorCare Advantage (PPO)

866.334.3141 TTY: 711

7 AM – 8 PM, 7 days a week

Optum Rx (Mail Order Pharmacy)

844.230.9357

Capital Rx (Prescription Payment Plan Information)

833.502.3340

BSWHP Customer Engagement

Call for plan changes

877.845.3901 TTY: 711

8 AM – 5 PM, Monday-Friday

HPCustomerEngagement@BSWHeath.org

InComm (OTC Benefit Card)

Order Online @ [Mybenefitscenter.com](https://www.mybenefitscenter.com)

Order via phone: 833.875.1816

MetLife (Dental)

855.676.9337

metlife.com

Silver & Fit (Fitness – PPO Plans only)

877.427.4788

Silverandfit.com



Thank you!

Please review for 2025 Annual Notice of Change mailing for more details

