BlueCross BlueShield of Texas

WELCOME

to Open Enrollment FY2024

THE TEXAS A&M UNIVERSITY SYSTEM

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

What’s New for 2023-24

WebMD ONE

On **September 1, 2023**, the A&M System will unveil a new personalized wellness experience along with valuable tools and resources to guide you on your well-being journey. With the **Two-Step Wellness Program**, now powered by **WebMD ONE**, you can earn the lowest premium for the plan year beginning September 1, 2023 – just complete your Annual Wellness Exam and a second wellness activity of your choice by August 31, 2024.

Look for an invitation coming soon!

WINFertility

Adding Fertility Benefit through WINFertility, effective **September 1, 2023**. Employees and covered dependents are eligible for this benefit after 12-months of consecutive enrollment in the A&M Care Plan immediately prior to accessing this benefit.

New ER Copay

Beginning **September 1, 2023**, there will be a **$200 copayment** required for **all emergency room visits**. The copayment will be waived if the member is admitted to the hospital.

WebMD is an independent company that contracts directly with The Texas A&M University System to provide health care communications and a digital member platform for The Texas A&M University System. WebMD does not offer Blue Products or Services.

WINFertility is an independent company that contracts directly with The Texas A&M University System to provide fertility and family planning benefits for The Texas A&M University System. WINFertility does not offer Blue Products or Services.

FY2024 Benefits At-A-Glance

TYPE OF SERVICE (In Network[1])	A&M CARE PLAN AND J PLAN			65 PLUS PLAN
	You Pay	In Brazos Valley Network **You Pay**	Baylor Scott & White Health In the Brazos Valley **You Pay**	**You Pay**
Plan Year Deductible Individual Family[2]	$400 $1,200	$400 $1,200	$400 $1,200	$400 (per individual) —
Plan Year Out-of-Pocket Maximum Individual Family[2]	$5,000 plus deductible above $10,000 plus deductible above	$5,000 plus deductible above $10,000 plus deductible above	$5,000 plus deductible above $10,000 plus deductible above	$1,000 per individual (medical) $400 per individual (prescription) plus deductible above —
Office Visit (per visit) Primary Care & Behavioral Health Provider Specialist	$20 copay[3] $30 copay[3]	$5 copay[3] $15 copay[3]	$20 copay[3] $15 copay[3]	20% after deductible
Preventive Care Routine Physicals Well-Baby Care Immunizations (after 6th birthday) Routine Mammogram	0% Services performed by an out-of-network provider are not covered	0% Services performed by an out-of-network provider are not covered	0% Services performed by an out-of-network provider are not covered	0%
Inpatient Hospital Services (includes behavioral health; must be pre-certified)	20% after deductible	10% after deductible	10% after deductible	Medicare rules apply
Inpatient Hospital Services (Blue Distinction® Centers and Blue Distinction® Centers+)	10% after deductible	10% after deductible	10% after deductible	Medicare rules apply
NEW! Emergency Room Visits[4]	$200 copay/visit + deductible + 20% coinsurance	$200 copay/visit + deductible + 20% coinsurance	$200 copay/visit + deductible + 20% coinsurance	$200 copay/visit + deductible + 20% coinsurance

1. The relative costs described here are for network providers. Out-of-network benefits are also available. Your costs for out-of-network providers may be significantly higher. When using out-of-network providers, you pay 50% after the out-of-network deductible.
2. For the 65 Plus Plan, there is no family deductible or out-of-pocket maximum because each Medicare member has individual coverage and cost-sharing limits.
3. Retirees enrolled in the A&M Care 65 Plus plan and Medicare retirees enrolled in the A&M Care Plan are not eligible for copays except for emergency room visits.
4. Deductible, copay and coinsurance apply for emergency room visits.

This document gives you an overview of the benefits provided. Refer to the Summaries of Benefits for more information. Benefits for the above plans are paid at a percentage of the allowable amount as determined by Blue Cross and Blue Shield of Texas. A&M Care 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.

Preauthorization

Understand your health plan before you get care to help avoid higher costs.

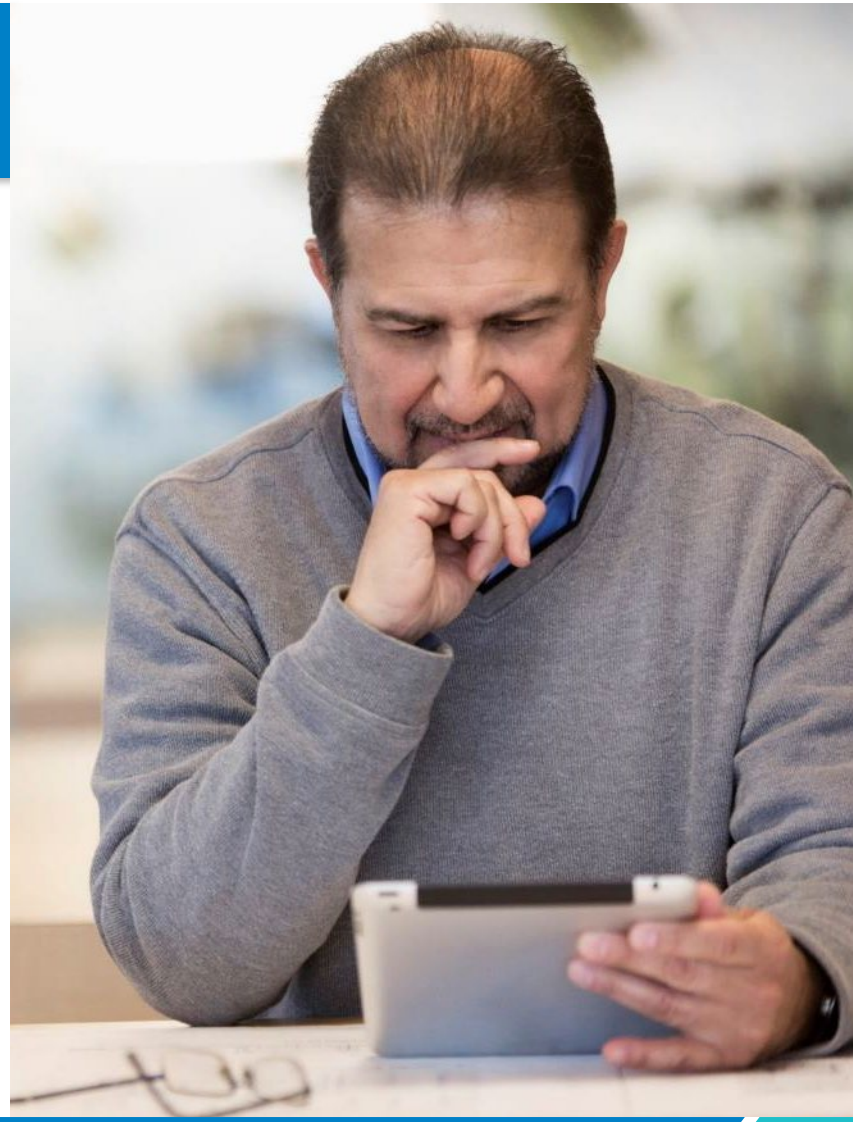
Preauthorization (also known as prior authorization) is a process used to determine whether a medical service meets the requirements for health plan coverage.

You need to have preauthorization for some types of medical care like:

- Hospital stays
- High-cost specialty drugs
- Some services you get outside of a hospital

Your network provider will usually take care of preauthorization. To be sure, call the Customer Service number on the back of your Blue Cross and Blue Shield of Texas (BCBSTX) member ID card before your service.

Check your benefits booklet to learn more. You can find it on **Blue Access for Members℠ (BAM℠)** under **Coverage**.



Blue Distinction® Specialty Care Program

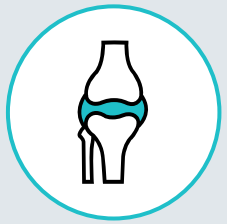
Hospitals may all look the same, but there are often differences in the quality of care you receive depending on the facility you choose.

The choices you make matter when it comes to your health care.

Hospitals and medical facilities that have been rated as **"superior expertise" indicate the delivery of higher-quality health care** in at least one of the following specialties:

Bariatric Surgery

Cardiac Care



Knee and Hip Replacement

Maternity Care

Spine Surgery

Transplants

Call a Benefits Value Advisor (BVA) at 866-295-1212 for participating facilities.

Preventive Care

What's covered?

- **Recommended routine gender and age-specific preventive care and screenings,** including yearly general wellness exams, recommended vaccines and screenings for things like diabetes, cancer and depression – both facility and professional services. **These may count as one of your two steps for the Two-Step Wellness Program credit.**
- **Coverage provided in network at 100% with no copay or deductible.** Out-of-network benefits may vary.

IMPORTANT:

Lab tests related to a condition such as diabetes or asthma **<u>are not</u>** considered preventive and are covered under applicable deductible and coinsurance levels.

Stay healthy by getting regular check ups.

Health and Wellness

Two-Step Wellness Program, Now Powered by WebMD ONE

Receive the lowest rate on your health insurance premium

WebMD health services

Completing **two items** from your personalized checklist* will ensure that you have the lowest rate for your health insurance premiums.

Highlights of the Wellness Program:

- The Two-Step Wellness Program helps **members engage in health-promoting activities** based on unique risks and identified benefit interests.
- **The annual wellness exam is required as one of your Two-Step activities for the new plan year.** You choose the second item from your personalized checklist.
- Applies to employees AND covered spouses enrolled in the A&M Care Plan.
- A premium differential of $30 per month will be applied for each individual (you and your spouse) who completes two activities.
- All retirees and graduate student employees enrolled in the Grad plan will automatically receive the lower premium.

* If you would like to take the Health Assessment provided by Blue Cross and Blue Shield of Texas in Well onTarget®, it can apply as an alternate method to receive the premium differential. You will still need to get an annual wellness exam.

Six Resources to Help You Fit Better Health Into Your Schedule

Well onTarget® Member Wellness Portal*

Jumpstart your journey toward overall wellbeing with personalized action plans, wellness and lifestyle self-management programs, and fitness and nutrition device integration. Convenient online programs address a variety of topics.

24/7 Nurseline**

Call any time, day or night, when you need help deciding whether you should go to the emergency room or make an appointment with your doctor. Examples include fevers, burns and other health issues.

Fitness Program

Gives you access to a network of gyms that fit your budget and lifestyle.

Wellness Coaching

Includes a dedicated coach, goal-setting tools and online and telephonic support. Completion of the Well onTarget Health Assessment drives engagement by recommending self-management programs and coaching outreach.

Digital Health Partners

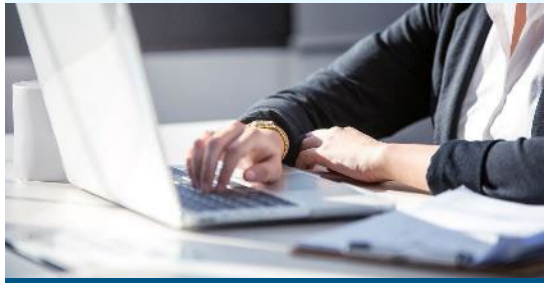
Help you manage metabolic syndrome, diabetes, high blood pressure and joint and spine issues through digital coaching programs.

Ovia Health™ and Women's and Family Health

Provides support for cycle tracking, pregnancy, menopause and parenting.

For quick access to all your health and wellbeing programs:

1. Go to **bcbstx.com/tamus**.
2. Register for Blue Access for Members.
3. Click the **Wellness** tab for more information about the programs listed.



To register, you will need your identification number on the front of your member ID card, OR you can call the Customer Service number on the back of the card.

* The Well onTarget program is offered to you as a part of your employer-sponsored benefits. Participation in the Well onTarget program, including the completion of a Health Assessment, is voluntary and you are not required to participate. Visit Well onTarget for complete details and terms and conditions.

** For medical emergencies, call 911. This program is not a substitute for a doctor's care. Talk to your doctor about health questions or concerns.

The Fitness Program is provided by Tivity Health™ Services, LLC, an independent contractor which administers the Prime® Network of fitness centers. The Prime Network is made up of independently-owned and managed fitness centers. Prime is a registered trademark of Tivity Health, Inc. Tivity Health is a trademark of Tivity Health, Inc.

Ovia Health is an independent company that has contracted with Blue Cross and Blue Shield of Texas to provide maternity and family benefits solutions for members with coverage through BCBSTX.

Digital Health Partners*

UNIQUE PROGRAMS AND SERVICES FOR YOUR NEEDS

Women's Health & Family Planning	Diabetes Management & Hypertension	Musculoskeletal Joint & Muscle Pain	Metabolic Syndrome Reversal Program	Pre-Diabetes and Pre-Hypertension

* These programs are available (based on eligibility) at no additional cost to members of the A&M Care Plan, J Plan and 65 Plus Plans.

Livongo is an independent company that has contracted directly with Blue Cross and Blue Shield of Texas to provide diabetes and hypertension management programs for members with coverage through BCBSTX.

Hinge Health is an independent company that provides an online musculoskeletal program for Blue Cross and Blue Shield of Texas. Hinge Health is solely responsible for the products and services that it provides.

Wondr is an independent company that provides Metabolic Syndrome Management for Blue Cross and Blue Shield of Texas. Wondr is solely responsible for the products and services that it provides.

Omada is an independent company that provides Obesity-related Chronic Disease Prevention and Hypertension Management Solutions for Blue Cross and Blue Shield of Texas. Omada is solely responsible for the products and services that it provides.

BCBSTX makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Your Mental Health Resources

Your health plan includes access to mental health care like therapy and medicines that might help.

You and your family members can get support for issues such as:

- Depression
- Anxiety and panic attacks
- Substance misuse
- Autism
- Bipolar
- Eating disorders
- Attention deficit (ADHD/ADD)
- And more

MDLIVE®

Virtual Visits powered by MDLIVE®

Meet with an MDLIVE mental health professional from the comfort of your own home.

Well onTarget®

Well onTarget®

Articles, videos, online courses, tools and trackers to help you live healthy and well.

learntolive

Learn to Live Digital Mental Health

Help for stress, depression, panic, resilience and other mental health concerns is just a click away.

Employee Work/Life Balance Program

Talk one-on-one with a counselor or use online resources.

Virtual Visits may be limited by plan. For providers licensed in New Mexico and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Texas. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.

Learn to Live, Inc. is an independent company that provides online behavioral health programs and tools for members with coverage through Blue Cross and Blue Shield of Texas. BCBSTX makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Virtual Visits, Provided by BCBSTX and Powered by MDLIVE®

$10 Visit Copay for all registered members (medical and behavioral health consultations)

With Virtual Visits, you get:

- 24/7 access to an independently contracted, board-certified doctor
- Access via online video, mobile app or telephone
- If necessary, e-prescription sent to your local pharmacy

MDLIVE®

Virtual Visits doctors can treat a variety of health conditions, including:

- Allergies
- Asthma
- Cold/Flu
- Ear problems (age 12+)
- Fever (age 3+)
- Nausea
- Pink eye
- Rash
- Sinus infections

Talk Therapy

Speak with a licensed counselor, therapist or psychiatrist for support, available by appointment.

- Anxiety
- Depression
- Trauma and loss
- Relationship problems

Eligibility

Available to all employees, retirees, and their covered dependents enrolled in the A&M Care, 65 Plus and J plans. Graduate Student Employees enrolled in the Grad Plan are not eligible for MDLIVE.

Well onTarget

Empowering, engaging and motivating members

Well onTarget Member Portal*

Member Wellness Portal

- Member dashboard
- Health Assessment*
- Self-management programs
- Trackers and tools
- And more

Interactive Health Coaching

- Evaluate your current lifestyle and health habits
- Determine your priorities and wellness goals

AlwaysOn® Mobile App

- Mobile Health Assessment*
- Health dashboard and trackers
- Sync a fitness and nutrition device or app
- Blue Points℠** balance
- Secure messaging with health coach

* The Well onTarget program is offered to you as a part of your employer-sponsored benefits. Participation in the Well onTarget program, including the completion of a Health Assessment, is voluntary and you are not required to participate. Visit Well onTarget for complete details and terms and conditions.

**Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at wellontarget.com for further information.

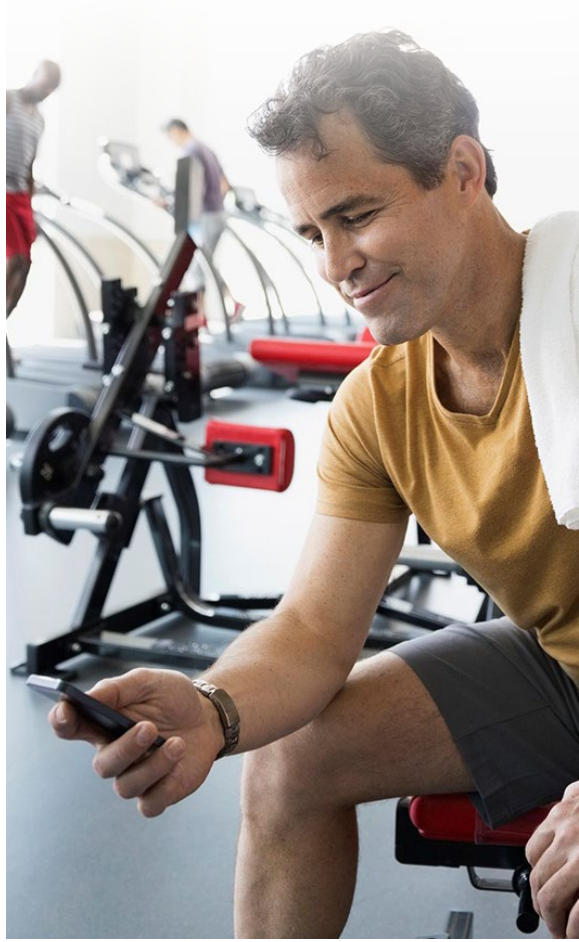
AlwaysOn is provided by Onlife Health which is an independent company that provides Wellness Management Solutions. Onlife is solely responsible for the programs, products and services that it provides.

Fitness Program Benefits

- Flexible Gym Network: A choice of gym networks to fit your budget and preferences

Options	Digital Only	Base	Core	Power	Elite
Monthly Fee	$10	$19	$29	$39	$99
Gym Facility Network Size†	Digital Access Only	3,000	7,500	12,000	12,400
$19 Enrollment Fee (No enrollment fee for Digital Only Option)					

- Studio Class Network: Boutique-style classes and specialty gyms with pay-as-you-go option and 30% off every 10th class
- Family Friendly: Expands gym network access to your covered dependents (16+*) at a bundled price discount
- Convenient Payment: Monthly fees are paid via automatic credit card or bank account withdrawals
- Access to multiple fitness locations, nationwide where members live, work and travel; existing and potential members can search for locations by accessing the Fitness Program page through BAM and through the AlwaysOn** wellness mobile app.
- Easy enrollment online or by AlwaysOn Mobile app.



† Represents possible network locations. Check local listings for exact network options as some locations may not participate. Network locations are subject to change without notice.

* Individuals must be 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Members should check preferred location to see their membership age policy. Underage dependents can log in and join through the primary member's account as an "additional member."

Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward. The Fitness Program is provided by Tivity Health™, an independent contractor that administers the Prime Network of fitness locations. The Prime Network is made up of independently owned and operated fitness locations.

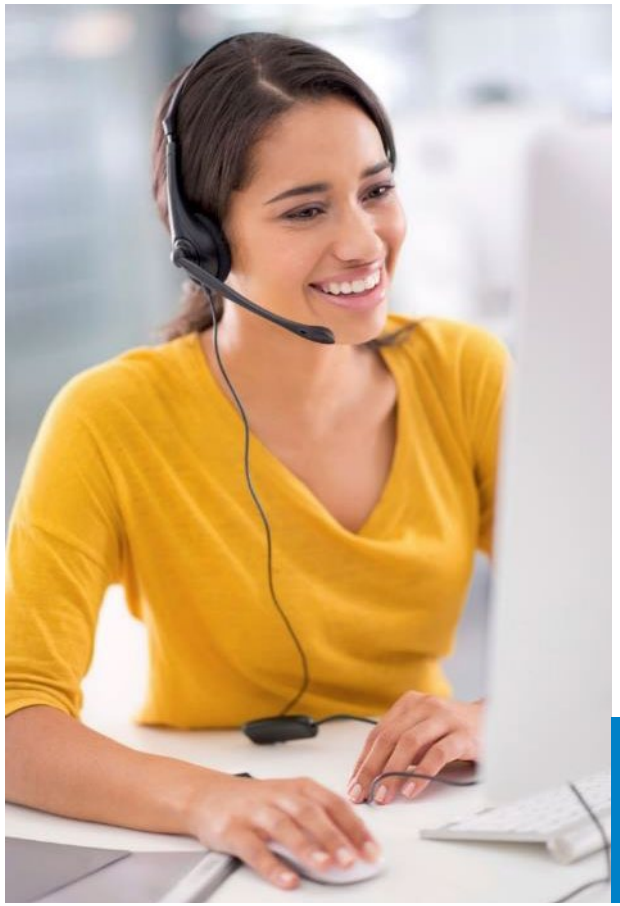
** AlwaysOn is provided by OnLife Health which is an independent company that provides Wellness Management Solutions. Onlife is solely responsible for the programs, products and services that it provides.

Guide to Navigate Your Health

Benefits Value Advisor

Benefits Value Advisors (BVA)

They make it easier to use your health plan, while helping you save time and money.



Call a BVA for assistance and questions about:

- Claims
- Medical benefit coverage
- Finding providers
- Membership and eligibility
- Navigating digital tools and resources
- Member ID card requests
- Health education and transfer to other health programs
- Transition of care
- Scheduling appointments
- Providing cost estimates

866-295-1212 • Available 24/7
(Live Chat and Phone)

Benefits Value Advisors offer cost estimates for various providers, facilities and procedures. Lower pricing and cost savings are dependent on the provider or facility of your choosing. Member communications and information from Benefits Value Advisors are not meant to replace the advice of health care professionals. Members are encouraged to seek the advice of their doctors to discuss their health care needs. Decisions regarding course and place of treatment remain with the member and his or her health care providers. Cost estimates are just an estimate. In addition to your usual deductibles, copayments and/or coinsurance, the actual cost of the services may vary based on a number of factors including the date of service, the actual procedure performed and what services were billed by the provider and your particular benefit plan. Coverage is subject to the limitations, exclusions and terms of your plan.

Retiree Information

Retirees Under 65

- Should continue to use network providers and office visit claims will continue to process using copayments.

SilverSneakers®

- The A&M System offers a fitness program for retirees and spouses age 65 and older.
- SilverSneakers Flier: https://assets.system.tamus.edu/files/benefits/website/Flyers/SilverSneakers.pdf

Virtual Visits (MDLIVE)

- Available to all retirees and survivors for a **$10 copay** regardless of whether you are Medicare primary or not.

Digital Health Partners

These programs are available (based on eligibility) at no additional cost to members of the A&M Care Plan, J Plan and 65 Plus Plans.

- **Hinge Health** | Musculoskeletal/Chronic Pain Program
- **Omada** | Chronic Disease Prevention & Support
- **Livongo** | Hypertension Program
- **Livongo** | Diabetes Program
- **Wondr** I Metabolic Syndrome Reversal Program

SilverSneakers® is a wellness program owned and operated by Tivity Health, Inc., an independent company.

BlueCross BlueShield of Texas

QUESTIONS?

Thank you.

THE TEXAS A&M UNIVERSITY SYSTEM

756352.0423