

2025 West Texas

Benefits of Membership





Contact information at a glance

Baylor Scott & White Customer Service
Health Plan 1.833.442.2405 • 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

Mail Order Prescriptions 1.833.502.3340

OTC Card 1.833.442.2405 · TTY: 711

(over-the-counter) Baylor Scott & White Health Plan Customer Service

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

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/FindProvider** 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)

You can see an in-network 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** and select Find Your Plan Information.

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 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.

More \$

3

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 BSWHealthPlan.com/FindProvider.

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

Visit a doctor, counselor or psychiatrist by phone, tablet or computer. Your health plan 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.

Additional requirements or limits on prescription drug coverage include:

- **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 drugs and encourages you to try less costly but equally effective drugs before the plan covers another drug.

Mail order prescriptions

Mail order service is also available. 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.

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

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.

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.

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**.

NEW FOR 2025: You will receive a dental ID card in the mail from MetLife.

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. New 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. Existing members will continue to use their current OTC to make purchases. Participating retailers include: Albertsons, CVS Health, Discount Drug Mart, Dollar General, Family Dollar, HEB, Kroger, Walmart, Walgreens and other independent pharmacy locations.

For a full list of participating stores visit: MyBenefitCenter.com

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.

Covenant Health Advantage HMO Benefits

Effective January 1, 2025

| Medical Plan Benefits | НМО | HMO Rx |
|--|---|---|
| Monthly Premium (See Part B premium note below) | \$O¹ | \$0 |
| Part B premium reduction | \$50 | Not available |
| Deductible | \$0 | \$0 |
| Out-of-Pocket Maximum | \$5,600 | \$5,900 |
| Annual Physical Exam | \$0 copay | \$0 copay |
| Primary Care Physician (PCP) Office Visit | \$0 copay | \$0 copay |
| Specialty Care Physician (SCP) Office Visit | \$30 copay | \$30 copay |
| Telehealth Visit (PCP, SCP, Psychiatry Services) | \$0 copay | \$0 copay |
| Diagnostic Tests, X-rays, Lab Services (separate office visit copay may apply) | \$0 сорау | \$0 copay |
| Advanced Diagnostic Imaging Services (MRI, MRA, SPECT, CTA) | \$0-\$325 copay | \$0-\$325 copay |
| Physical/Occupational/Speech Therapy (per visit) | \$35 copay | \$35 copay |
| Inpatient Hospital | 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 |
| Inpatient Mental Health | 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 |
| Skilled Nursing Facility (SNF) | Day 1-20: \$0/day Day 21-100: \$214/day | Day 1-20: \$0/day Day 21-100: \$214/day |
| Outpatient Surgery (facility) | \$275 copay | \$275 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) | \$120 copay | \$120 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 | 0%-20% coinsurance | 0%-20% coinsurance |
| Other Part B Drugs | 0%-20% coinsurance | 0%-20% coinsurance |

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.

This is not a complete description of benefits. For more information, please refer to the plan's Evidence of Coverage available at BSWHealthPlan.com/Medicare.

You must continue to pay your Medicare Part B premium.

¹The HMO plan (without Part D Rx) pays \$50 per month toward your Part B premium. This reduction is applied to your Social Security check. Contact Social Security or go to SSA.gov for more information.

²If 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.



| Prescription Drug Benefits ² | HMC | O Rx |
|--|---|-------------------|
| Deductible | \$0 | |
| Retail Copays During Initial Coverage Period (30-day supply) | Preferred/Standard Pharmacy | |
| Tier 1 - Preferred Generic Drugs | \$0/\$5 | |
| Tier 2 - Generic Drugs | \$5/\$10 | |
| Tier 3 - Preferred Brand Drugs | \$47/\$47 | |
| Tier 4 - Non-Preferred Drugs | \$100/\$100 | |
| Tier 5 - Specialty Drugs | 33% coinsurance | |
| Mail Order Copays | Tiers 1 - 2 are \$0 copay; Tiers 3 - 4 are 2 copays for a 90-day supply | |
| Total Out-of-Pocket Amount | \$2,000 | |
| Catastrophic Coverage Amounts - You Pay | \$0 | |
| Dental Benefits | НМО | HMO Rx |
| Monthly Premium | Included | Included |
| Annual Dental Benefit Maximum | \$2,500 | \$3,000 |
| Deductible | \$0 | \$0 |
| Oral Exams (one every 6 months) | \$ O | \$0 |
| Cleanings (one every 6 months) | \$0 | \$0 |
| Dental X-rays | \$0 | \$0 |
| Extractions | 50% coinsurance | 50% coinsurance |
| Fillings (one filling per surface, per tooth every 24 months) | 50% coinsurance | 50% coinsurance |
| Dentures (every 5 years) | 50% coinsurance | 50% coinsurance |
| Restorative Services | 50% coinsurance | 50% coinsurance |
| Supplemental Benefits | НМО | HMO Rx |
| Routine Eye Exam (one per year; must use a network provider) | \$0 copay | \$0 copay |
| Eyewear (annually; must use network provider) | \$125 allowance | \$125 allowance |
| Routine Hearing Exam (one per year) | \$0 copay | \$0 сорау |
| Hearing Aids (every 3 years) | \$1,000 allowance | \$1,000 allowance |
| Over-the-counter (OTC) Allowance (must use OTC Network card at participating retailers; no rollover) | \$30 per quarter | \$90 per quarter |
| | | |

The counties in the West Texas HMO service area are:

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



1206 West Campus Drive Temple, TX 76502

Important Covenant Health Advantage Information

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