

Medicare that keeps you at the center of it all

Your budget. With <\$0> premium and affordable copays, **Covenant Health Advantage HMO** is made with not only your health, but also your budget in mind.

Your doctor. Choose from among hundreds of Covenant Health physicians and clinics as well as cornerstone hospital facilities across West Texas. You'll also enjoy the freedom of having worldwide urgent and emergency care coverage, and the opportunity to see in-network specialists without a referral.

Your complete care. With **Covenant Health Advantage HMO**, you get all the benefits of Original Medicare, plus many supplemental benefits to help reduce your out-of-pocket healthcare expenses and make life easier.

Rx benefits. A plan is available with or without prescription drug benefits. If you choose the plan with prescription drug benefits, you'll have the benefit of <\$0> copays for many generic prescriptions.

Dental. **Covenant Health Advantage HMO** plans feature dental benefits through MetLife for no additional premium.

Vision. Our plans provide coverage for a routine annual eye exam, plus an annual allowance toward the purchase of contacts, frames and lenses. You must use a network vision provider.

Hearing. 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.

OTC allowance. Plans feature a quarterly purchase allowance (based on calendar quarter) from participating retailers for eligible (OTC) items such as bandages, cold and allergy medicines, and pain relievers.

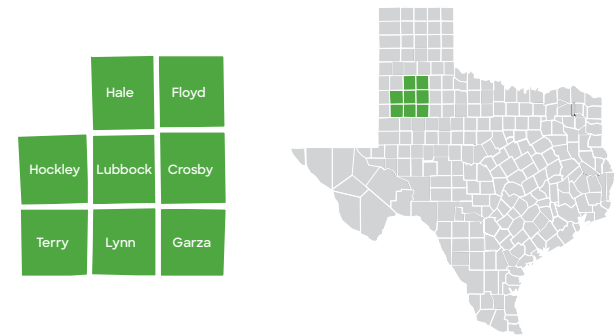
Enroll today!

To speak with a licensed insurance agent and discuss your Covenant Health Advantage HMO options, call:

<1.833.738.2460>

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.



If you are entitled to Medicare Part A, enrolled in Medicare Part B, and are a resident of Crosby, Floyd, Garza, Hale, Hockley, Lubbock, Lynn or Terry County, you are eligible to join the Covenant Health Advantage HMO plan.



Learn more at:
<MyBSWMedicare.com>

MEDICARE ADVANTAGE

\$0 Premium >

\$0 Tier One Prescriptions*>

\$0 Primary Care >

\$0 Virtual Care >



2025
West Texas
HMO

*Preferred retail and mail order

How do you know if your prescriptions are covered?

Ask your local insurance agent or visit [BSWHealthPlan.com/Medicare](https://www.bswhealthplan.com/Medicare) to view the formulary (drug list) and pharmacy directory.

Prescription payment plan option.

The Medicare Prescription Payment Plan is a new payment option that works with your Medicare Advantage prescription drug coverage. It can help you manage your out-of-pocket drug costs by spreading them across monthly payments that vary throughout the year (Jan. – Dec.). This payment option might help you manage your expenses, but it doesn’t save you money or lower your drug costs.

You can opt in to the Medicare Prescription Payment Plan when you enroll in a Medicare Advantage plan or any time during the year as a Medicare Advantage member.

To find out more about the Medicare Prescription Payment Plan, call **<1.833.502.3340>** TTY 711.

Medical Plan Benefits	HMO	HMO Rx
Monthly Premium	<\$0 ¹ > (see note)	<\$0>
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
Routine Hearing Exam	<\$0> copay	<\$0> copay
Hearing Aids (every three years)	<\$1,000> allowance	<\$1,000> allowance
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
Over-the-Counter Allowance (must use OTC Network card at participating retailers; no rollover)	<\$30> per quarter	<\$90> per quarter

Prescription Drug Benefits ²	HMO Rx	
Total Out-of-Pocket Amount	<\$2,000>	
Deductible	<\$0>	
Copays During Initial Coverage Period	Preferred/Standard Pharmacies (for a 30-day supply)	Mail Order (up to a 90-day supply)
Tier 1 – Preferred Generic Drugs	<\$0/\$5> copay	<\$0> copay
Tier 2 – Generic Drugs	<\$5/\$10> copay	<\$0> copay
Tier 3 – Preferred Brand Drugs	<\$47/\$47> copay	<\$94> copay
Tier 4 – Non-Preferred Drugs	<\$100/\$100> copay	<\$200> copay
Tier 5 – Specialty Drugs	<33%> coinsurance	Not Available

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 by October 15, 2024 at [BSWHealthPlan.com/Medicare](https://www.bswhealthplan.com/Medicare).

You must continue to pay your Medicare Part B premium.

¹The HMO plan (without Part D) 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](https://www.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

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.

Not connected with or endorsed by the United States government or the federal Medicare program.