

TRS Scott & White HMO Medical Plan

A list of Scott & White HMO Network Physicians can be found at www.trs.swhp.org

Benefits	Scott & White HMO Health Plan
Annual Deductible	\$950 employee only \$2,850 employee and spouse; employee and child(ren); employee and family
Annual Out of Pocket Maximum (includes medical and prescription copays and coinsurance)	\$7,450 employee only \$14,900 employee and spouse; employee and child(ren), employee and family (includes combined Medical and Rx copays, deductibles and coinsurance)
Preventive Care	No Charge
Standard Lab and X-Ray	No Charge
Disease Management and Complex Case Management	No Charge
Well Child Care Annual Exams	No Charge
Immunizations (age appropriate)	No Charge
Outpatient Services Primary Care * Specialist Other Outpatient Services Diagnostic/Radiology Eye Exam (one annually) Allergy Serum & Injections Outpatient Surgery	\$20 copay (First Primary Care Visit for Illness - \$0 Copay/\$0 Copay for primary visit for dependents age 19 and under) \$70 copay 20% after deductible 20% after deductible No Charge 20% after deductible \$150 per day and 20% of charges after deductible
Maternity Care Prenatal Care Inpatient Delivery	No Charge \$150 per day and 20% of charges after deductible
Inpatient Services Overnight hospital stay: includes all medical services including semi-private room or intensive care	\$150 per day**** and 20% of charges after deductible
Worldwide Emergency Care Nurse Advice Line Online Services After-Hours Primary Care Clinics Ambulance and Helicopter Emergency Room Urgent Care Facility	1-877-505-7947 No Charge – go to trs.swhp.org \$20 copay \$40 copay and 20% of charges after deductible \$500 copay after deductible \$50 copay
Equipment and Supplies Preferred Diabetic Supplies and Equipment Non-Preferred Diabetic Supplies and Equipment Durable Medical Equipment/Prosthetics	\$5/\$12.50 copay; no deductible 30% after Rx deductible 20% after deductible
The SWHP MOMS Program provides you with professional staff who are notified of the delivery of your baby. These licensed professions will contact you after you return home and help you with everything from the general well-being of both you and your baby, to breast/bottle feeding, to information on how to add your baby to your health plan.	

TRS Scott & White Pharmacy Plan

Benefits		Scott & White HMO Health Plan	
Annual Benefit Maximum		Unlimited	
RX Deductible Does not apply to generic drugs		\$150	
Ask an SWHP Pharmacy representative how to save money on your prescriptions	Retail Quantity (Up to a 30-day supply)	Maintenance Quantity (Up to a 90-day supply) Available at BSW Pharmacies, in-network retail pharmacies and mail order	
	Preferred Generic	\$5 copay	\$12.50 copay
	Preferred Brand	30% after prescription deductible	30% after prescription deductible
	Non-preferred	50% after prescription deductible	50% after deductible
	Online Refills	trs.swhp.org	trs.swhp.org
Mail Order	1-817-388-3090	1-817-388-3090	
Specialty Medications (up to 30 day supply)			
Tier 1:		15% after prescription deductible	
Tier 2		15% after prescription deductible	
Tier 3:		25% after prescription deductible	
<p>* Including all services billed with office visit</p> <p>**Does not apply to wellness or preventive visits</p> <p>***Includes other services, treatments, or procedures received at time of office visit</p> <p>****\$750 maximum copay per admission and 20% after deductible</p> <p>*****35 max visits per year</p> <p>*****Copay waived if admitted within 24 hours</p>			

Ask a SWHP Pharmacy representative how to save money on your prescriptions
800-321-7947