

Supplemental benefits

Routine Eye Exam (one per year; must use a network provider)	\$0 copay
Eyewear (annual allowance; must use a network provider)	\$125 allowance toward purchase
Routine Hearing Exam (one per year)	\$0 copay
Hearing Aids (every three years)	\$1,000 allowance toward purchase
Fitness (at participating Silver&Fit locations)	\$0 cost
Over-the-Counter (OTC) Allowance (must use OTC Network card at participating retailers; no rollover)	\$50 allowance per quarter in Select Rx plan; \$30 per quarter in Select plan
In-Home Meals (14 meals per hospital discharge to home; limit 3 discharges per year)	\$0 cost
Routine Transportation (up to 24 one-way trips per year, or 12 round trips up to 50 miles each way)	\$0 cost
In-Home Support Services (assistance in performing activities of daily living)	\$0 cost

Additional care programs

In-Home Acute Care for eligible members with complex health issues	\$0 cost
Kidney Health Program for eligible members diagnosed with kidney disease	\$0 cost

Dental benefits

BSW SeniorCare Advantage HMO features dental benefits from Metropolitan Life Insurance Company (MetLife) for no additional premium.

Visit any licensed dentist – in or out of the MetLife PDP Plus network – and receive benefits. Find a participating dentist at [MetLife.com](https://www.metlife.com).

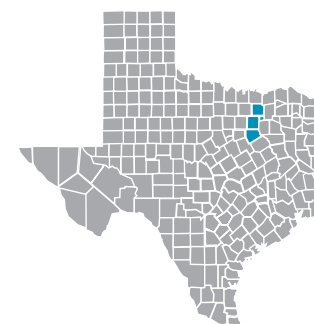
Yearly Benefit Maximum	\$2,000
Deductible	\$0
Oral Exams, Cleanings (every 6 months)	\$0
Dental X-rays (every 3 years)	\$0
Extractions and Fillings	50%
Dentures (every 5 years)	50%
Restorative Services (every 2 years)	50%

Enroll today! To speak with a licensed insurance agent and discuss your BSW SeniorCare Advantage options, call:

1.800.782.5068

8 AM – 5 PM CT Monday-Friday

If you are entitled to Medicare Part A, enrolled in Medicare Part B, and are a resident of Collin, Dallas, Ellis or Rockwall county, you are eligible to join BSW SeniorCare Advantage HMO.



[advantage.swhp.org](https://www.advantage.swhp.org)

BSW SeniorCare Advantage HMO is offered by Scott and White Health Plan, doing business as Baylor Scott & White Health Plan, a Medicare Advantage organization with a Medicare contract. Enrollment in BSW SeniorCare Advantage depends on contract renewal.

You must continue to pay your Medicare Part B premium.

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



My Medicare Plan

2022 North Texas HMO

 **Baylor Scott & White Health Plan**

Our new brand in 2022

BSW SENIORCARE
ADVANTAGE • HMO

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Benefit highlights

- \$0 premium, affordable copays and no referrals to see a specialist
- Available with or without prescription drug coverage; \$0 copays for many mail-order prescriptions
- Access to renowned Baylor Scott & White Health providers and other providers across North and Central Texas

Medical Plan Benefits*	Select Rx/Select
Monthly Premium	
Select Rx - with Part D prescription drug coverage	\$0
Select - without Part D prescription drug coverage**	\$0
Deductible	\$0
Out-of-Pocket Maximum	\$6,300 / \$5,900
Annual Physical Exam	\$0 copay
Primary Care Physician (PCP) Office Visit	\$0 copay
Specialty Care Physician (SCP) Office Visit	\$25 copay
Telehealth Visit (PCP, SCP, Psychiatry Services)	\$0 copay
Diagnostic Tests, X-rays, Lab Services (separate office visit copay may apply)	\$0-\$75 copay
Advanced Diagnostic Imaging Services (MRI, MRA, SPECT, CTA, CT, PET, Nuclear Cardiology)	\$300 copay
Physical/Occupational/Speech Therapy (per visit)	\$35 copay
Inpatient Hospital	Days 1-6: \$325/day Days 7-90: \$0/day
Inpatient Mental Health	Days 1-5: \$318/day Days 6-90: \$0/day
Skilled Nursing Facility (SNF)	Days 1-20: \$0/day Days 21-100: \$188/day
Outpatient Surgery (facility)	\$350 copay
Ambulatory Surgical Center (facility)	\$275 copay
Ambulance (U.S. only)	\$300 copay / \$265 copay
Emergency Care (U.S. only; copay waived if admitted within 24 hours)	\$90 copay
Urgent Care (U.S. only; copay waived if admitted within 24 hours)	\$50 copay
Durable Medical Equipment (DME)	20% coinsurance
Podiatry	\$45 copay
Chemotherapy Drugs	20% coinsurance
Other Part B Drugs	20% coinsurance
Prescription Drug Benefits	Select Rx
Initial Coverage Amount	\$4,430
Deductible	\$300
Deductible Applies to:	Tiers 4-5
Copays During Initial Coverage Period	Retail
Tier 1 - Preferred Generic Drugs	\$6 copay
Tier 2 - Generic Drugs	\$20 copay
Tier 3 - Preferred Brand Drugs	\$47copay
Tier 4 - Non-Preferred Drugs	\$100 copay
Tier 5 - Specialty Drugs	27% coinsurance
After Initial Coverage Amount - You Pay	Not Available
Preferred Generic Drugs	25% coinsurance
Other Generic Drugs	25% coinsurance
Brand-Name Drugs	25% coinsurance
Total Out-of-Pocket You Pay Before Catastrophic Coverage	\$7,050
Catastrophic Coverage Amounts - You Pay	The greater of 5% or \$3.95 for generic drugs (including brand drugs treated as generic) or \$9.85 for all other drugs

There is no deductible for BSW SeniorCare Advantage for select insulins. Your out-of-pocket costs for select insulins will be \$35 for a 30-day supply during the deductible and initial coverage phase. BSW SeniorCare Advantage also offers additional gap coverage for select insulins. During the Coverage Gap stage, your out-of-pocket costs for select insulins will also be \$35 for a 30-day supply.

*This is not a complete description of benefits. Please refer to the plan's Evidence of Coverage at advantage.swhp.org. **If you have Part D prescription drug coverage through another carrier, and you purchase a plan with Part D, your drug coverage will end when your new BSW SeniorCare 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 BSW SeniorCare 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.