Your 2019-2020 A&M Care Benefits At-A-Glance

TYPE OF SERVICE (In Network*)	A&M CARE PLAN AND J PLAN	65 PLUS PLAN
2 1	You Pay	You Pay
Plan year deductible Individual Family	\$400 \$1,200	\$400 —
Plan year out-of-pocket maximum (includes medical copays and coinsurance and prescription drug deductible and copays) Individual Family	\$5,000 plus deductible above \$10,000 plus deductible above	\$1,400 including deductible above
Lifetime maximum per participant	Unlimited	Unlimited
Office visit (per visit) Primary care and behavioral health provider Specialist	\$20 copay** \$30 copay**	20% after deductible
Inpatient hospital services (includes behavioral health; must be pre-certified)	20% after deductible	20% after deductible
Lab and X-ray in other outpatient facilities (excluding certain diagnostic procedures). Benefit depends upon setting and procedure. See plan description booklet or call Blue Cross and Blue Shield of Texas Customer Service for details.	0%	20% after deductible
Certain diagnostic procedures including bone scan, cardiac stress test, CT scan (with or without contrast), ultrasound, MRI, myelogram, PET scan, arthroscopic or endoscopic procedures. Certain behavioral health services in outpatient settings are also included.	20% after deductible	20% after deductible
Chiropractic care — office services	\$30 copay** 30 visits per plan year	20% after deductible 30 visits per plan year
Other physical medicine services rendered by any other eligible provider will be allowed on the same basis as any other illness.	\$30 for office visit setting; 20% after deductible for outpatient or hospital-related facility setting	20% after deductible
Preventive care Routine physicals Well-baby care Immunizations (after 6th birthday) Routine mammogram	0% Services performed by an out-of-network doctor are not covered	0%
Extended care services (must be pre-certified) Home health care Skilled nursing facility Hospice care	20% after deductible 60 visits per plan year 60-day maximum per plan year No maximum	20% after deductible 60 visits per plan year 60-day maximum per plan year No maximum

Quick reference guide for PPO network treatment resources

CARE OPTION	HOURS	YOUR RELATIVE COST*	DESCRIPTION	
Doctor's office	Office hours vary	Usually lower cost than an ER visit	Your doctor's office is generally the best place to go for non-emergency care, such as health exams, colds, sore throats, minor injuries, aches and pains.	
Virtual visits powered by MDLIVE®**	24 hours, seven days a week	Usually lower cost than an ER visit	Access to care for non-emergency medical issues whether you're at home or traveling	
Urgent care provider	Generally include evenings, weekends and holidays	Usually lower cost than an ER visit	Urgent care centers can provide care when your doctor is not available and you don't have a true emergency. For example, they can treat sprained ankles, fevers, and minor cuts and injuries	
Emergency room (ER)	24 hours, seven days a week	Highest out-of-pocket cost to you	 Any life-threatening or disabling condition Sudden or unexplained loss of consciousness Chest pain; numbness in the face, arm or leg; difficulty speaking Severe shortness of breath High fever with stiff neck, mental confusion or difficulty breathing Coughing up or vomiting blood Cut or wound that won't stop bleeding Major injuries Possible broken bones 	

24/7 Nurseline ***

The 24/7 Nurseline can:

800-581-0368

- · Assist you in determining if you should call your doctor, go to the ER or treat the problem yourself
- Answer many of your health-related questions
- · Help you understand your condition

Available 24 hours a day, seven days a week; bilingual nurses available

^{*} Out-of-network benefits are also available. When using out-of-network providers, you pay 50 percent after the out-of-network deductible.

** Retirees age 65 and older are not eligible for copays unless you work in the A&M System. Please see more details in your Open Enrollment book. Medicare primary retirees on the A&M Care plan are not eligible for copays.

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 Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association.

^{*} The relative costs described here are for network providers. Your costs for out-of-network providers may be significantly higher.

^{*} Internet/Wi-Fi connection is needed for computer access. Data charges may papely. Check your phone carrier's plan for details. Virtual visits may not be available on all plans. Non-emergency medical service in Montana and New Mexico is limited to interactive online video. Non-emergency medical service in Arkansas and Idaho is limited to interactive online video for initial consultation. 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.

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^{*** 24/7} Nurseline is not a substitute for the sound medical advice of your doctor. If you have any questions or concerns regarding your health, you should discuss them with your doctor.