Summary Information

TRS-ActiveCare Medical Insurance

Lewisville ISD offers health insurance through TRS-ActiveCare. The following information applies only to TRS-ActiveCare:

**District Contribution** – All active, contributing members of TRS are eligible to receive the District Contribution toward their health insurance premium. The District Contribution is only available for the health insurance premium and cannot be used for any other benefit.

**Eligibility** - all active, contributing members of TRS are eligible to participate in TRS-ActiveCare. This includes full time and part time employees. Employees who are not active contributing members of TRS who work at least 10 hours per week are also eligible but do not qualify for the District Contribution.

**Employees NOT eligible to enroll** - State of Texas employees, higher education employees, TRS retirees including those back at work (These individuals are not eligible to enroll for TRS-ActiveCare coverage as employees, but they can be covered as a dependent of an eligible employee.)

**Eligible dependents**

- Spouse (including a common law spouse)
- Children under age 26 - natural child, adopted child, stepchild, foster child, child under the legal guardianship of the employee
- An unmarried child in a regular parent-child relationship with the employee if the child's primary residence is the household of the employee and the employee provides at least 50% of the child’s support and neither of the child’s natural parents resides in that household and the employee has the legal right to make decisions regarding the child’s medical care.
- A grandchild whose primary residence is the household of the employee and who is a dependent of the employee for federal income tax purposes.
- A child (any age) who is mentally or physically disabled. Any other dependents required to be covered under applicable law.
- A newborn is automatically covered for the first 31 days from the date of birth and must be added to the employee's plan within 60 days of birth.

**PPO Network** – ActiveCare Plan 1HD and Plan 2 are PPO plans and are administered by Aetna for medical benefits and Caremark for prescription benefits. For a list of network providers click here – [www.trsactivecareaetna.com](http://www.trsactivecareaetna.com). Access to Caremark information is available from this site.

**EPO and HMO Networks** – ActiveCare Select uses an EPO (small closed network) for employees who live in the DFW area. The EPO network in the DFW area is the Baylor Scott & White Quality Alliance network. Scott & White HMO network can be found by going to [www.trs.swhp.org](http://www.trs.swhp.org) – click on the link for Provider Information (select TRS ActiveCare Participants Network from the “Select a Plan” drop down). Neither of these plans provide benefits if an out of network provider is used (except for true emergencies).

**Pre-certification required** - All inpatient hospital stays (emergency and elective), Home infusion therapy, Home health care, Hospice, Skilled nursing facilities/extended care facilities. **Network providers will pre-certify services for you.**

**Premiums for TRS-ActiveCare (Employee Cost per month)** – New Employees can elect coverage as of their hire date or first of the month following their hire date. If coverage is effective on the hire date then the full monthly premium will be deducted (TRS-ActiveCare does not allow LISD to pro-rate premiums).
If employee and spouse both work for a participating entity: A spouse may be covered as an employee or as a dependent of an employee. Only one parent can cover dependent children. *Married couples working for different participating entities may “pool” funds. This requires an Application to Split Premium form to be completed by both employers. The form is available on the benefits website.

A child (under age 26) employed by a participating entity and a contributing TRS member cannot be covered as a dependent. The child must be covered as an employee of the participating entity. If the child is not a contributing TRS member, the child may be covered as a dependent.

Questions concerning the TRS-ActiveCare plans should be directed to TRS – 1-800-222-9205 or visit the TRS website at trsactivecareaetna.com.

**Notices**

**Initial Notice about Special Enrollment Rights**

The federal law called Health Insurance Portability and Accountability Act (HIPAA) requires that we notify you about a very important provisions in the plan. The first is your right to enroll in the plan under its “special enrollment provision” if you acquire a new dependent or if you decline coverage under this plan for yourself or an eligible dependent while other coverage is in effect and later lose that other coverage for certain qualifying reasons.

1. **SPECIAL ENROLLMENT PROVISIONS**

**Loss of Other Coverage (Excluding Medicaid or a State Children’s Health Insurance Program)**

If you are declining enrollment for yourself or your eligible dependents (including your spouse) because of other available health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if you move out of an HMO service area, or the employer stops all contributions towards other coverage for you and your dependents). However, you must request enrollment, and Aetna must receive your request, within 31 days after coverage ends for you or your dependents (or you move out of the prior plan’s HMO service area, or after the employer stops all contributions toward the other coverage, including employer paid COBRA paid premiums).

**Loss of Coverage for Medicaid or a State Children’s Health Insurance Program**

If you decline enrollment for yourself or an eligible dependent (including your spouse) while Medicaid coverage or coverage under the Texas Children’s Health Insurance Program (CHIP) is in effect, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage. However, you must request enrollment, and Aetna must receive your request, within 60
days after your or your dependents’ coverage ends under Medicaid or a state children's health insurance program.

**Loss of Coverage as a Result of a Lifetime Limit on All Benefits**

You or your spouse or dependents may also have special enrollment rights in this plan at the time a claim is denied by another group health plan as a result of a lifetime limit on all benefits in the other group health plan. However, you must request enrollment, and Aetna must receive your request, within 31 days after the claim has been denied by the other group health plan.

**New Dependent by Marriage, Birth, Adoption, or Placement for Adoption**

If you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents in this plan. However, you must request enrollment, and Aetna must receive your request, within 31 days after the marriage, birth*, adoption, or placement for adoption.

*Special rules apply to newborns; refer to your TRS-ActiveCare Benefits Booklet or the HMO's Evidence of Coverage.