

2021
2022

Enrollment Guide



Welcome to the **TML Health Benefits Pool**

You're joining TML Health Benefits Pool (TML Health) at a great time. The booklet you hold in your hands contains a wealth of information about your benefit plans with TML Health. More partners. More benefits. More savings. Every one of which is a direct result of our mission: *Making healthcare better for you.*



Making Healthcare **Better For You**

It's no secret: Healthcare can be complex and we want to do something about it.

With this guide, we hope to not only give you an overview of all the of benefits that are available to you so you can make informed decisions during your annual enrollment period, but we also want to show you how you can use these benefits and get the most out of your health plan.

This guide will give you the means to take the first steps towards making yourself the healthiest version of you while also saving you money:

- Expanded network with more discounts and 24/7 customer service
- Mobile apps and tools to help manage your healthcare
- Member-friendly and easy to understand Benefits Plans
- Lower cost options for care

Inside, you'll find the information you need about eligibility, our programs, and plan details to help you make smart decisions about your healthcare coverage. However, remember the official plan and insurance documents will govern your rights and benefits under each plan.

DISCLAIMER

This contains proprietary and confidential information of TML Health.

The information in this guide or booklet is meant to provide guidelines and should be used as a general reference or resource only.

TML Health Benefits Pool is a non-profit trust organization created by political subdivisions to provide group benefits services to participating political subdivisions and is not an insurance company.



Everything you have to look forward to



Our brand new, easy to use online system to enroll.



**BlueCross BlueShield
of Texas**

A better Texan network with even bigger discounts.



A pharmacy benefit manager with industry-leading cost-effectiveness and 24/7 customer service.



A telemedicine program from the convenience of your home.



A diabetes and hypertension management program.



A dedicated app suite for women's and family health.



An outcome-based physical therapy program.



An employee assistance and mental health program.



A digital weight loss program.



Two Texas-leading wellness programs dedicated to your mental and physical health.

**You must be enrolled in any of the above programs to use their accompanying app. Check with your employer to know which are available to you.*

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CHECKLIST TO BETTER HEALTH

There are many things to think about when choosing benefits that are right for you and your family. Use this checklist to help you get started on the right foot.

- Read this Benefit Guide to understand all the tools, resources, and services available to you from TML Health.
- Review the benefit highlights (located in the back pocket of this Guide) for more information on the specific benefits being offered by your employer.
- Confirm your current primary care physician is in the network. If you currently do not have a primary care physician, we encourage you to identify one and schedule your annual exam.
- Complete your enrollment by _____.

When you receive your TML Health ID Card:

- Register on your TML Health Online account at www.tmlhealthbenefits.org. If you are the employee, you will need to create an account even if you had one before.
- Register your account at www.BCBSTX.com and then download the BCBSTX mobile app to your smartphone.
- Register and set up your MDLIVE account. Then download the MDLIVE mobile app to your smart phone.
- Register and set up your Navitus account. Then download the Navitus mobile app to your smartphone.
- Register and set up your Navigate Wellness account. Then download the Navigatemobile app to your smartphone.

WHEN YOU CAN CHOOSE YOUR BENEFITS

1 When You Are Newly Hired

To get you started with a TML Health plan, please make your plan selections to enroll within 31 days of your hire date or within 31 days of the date your coverage is effective — whichever date is later.

2 During Open Enrollment

Each year you have the opportunity to review your current benefits and make changes including benefit choices and/or adding/dropping dependents. Changes made during open enrollment will be effective on the plan's effective date. If we don't receive your changes within the open enrollment period, your current benefits will remain in effect for the new plan year.

When you enroll during the correct time period, your coverage will begin during one of these dates — whichever is later:

1. The date you became an active employee working at least 20 hours per week.
2. The date you complete any waiting period established by your employer.
3. The Anniversary Date of your plan following your Open Enrollment period.

3 When You Have a Qualifying Life Event

Sometimes an event, such as a marriage or birth, may mean you need to change your benefits during the plan year.

The following are qualifying life events that allow you to make changes to your benefits during the plan year.

- Marriage
- Divorce
- Birth or adoption of a child
- Placement of a foster child in your family
- Death
- Change in Medicare or Medicaid eligibility status
- Loss of State Children's Health Insurance Program (SCHIP), but not gain of SCHIP benefits
- Significant change in the financial terms of health benefits provided through a spouse's employer or another carrier
- Unpaid leave of absence taken by employee or spouse
- Spouse, dependent, or both gains or loses coverage through employment

You must submit your enrollment within 31 days of the date of the life event (60 days for a birth/adoption). If you qualify, your coverage will start on the date the life event took place. You will also be responsible for any payroll deductions associated with the change.



Copayment DEFINITION

Also called a “copay,” this is the fixed dollar amount (not a percentage) you will pay for a certain kind of medical service under some plans.

DEPENDENT ELIGIBILITY

It is important for you to understand who can and cannot be considered a dependent on your plan. Documentation is required to support the eligibility status of each of your dependents. All dependent eligibility documentation must be provided to your employer along with your enrollment form. All covered dependents are enrolled in the same plan as the employee.

Spouse	
REQUIRED SUPPORTING DOCUMENTATION Copy of Certified Marriage Certificate or Declaration and Registration of Informal Marriage	ELIGIBILITY DETAILS Documents written in foreign language must be accompanied by a certified English translation
Biological Child	
REQUIRED SUPPORTING DOCUMENTATION <ul style="list-style-type: none"> • Birth certificate or other court document listing the employee as the parent of the child, or • A Verification of Birth Facts or birth record (up to age 5 only). 	ELIGIBILITY DETAILS Coverage available up to age 26. Coverage ends on the last day of the month in which the dependent turns 26.
Adopted Child	
REQUIRED SUPPORTING DOCUMENTATION <ul style="list-style-type: none"> • Adoption Agreement, or • Legal guardianship documents, or • Divorce decree documents identifying the dependent child, or • Qualified Medical Support Court Order (QMSCO), or • Amended birth certificate showing adoptive parents 	ELIGIBILITY DETAILS Coverage available up to age 26. Coverage ends on the last day of the month in which the dependent turns 26.
Stepchild	
REQUIRED SUPPORTING DOCUMENTATION <ul style="list-style-type: none"> • Birth certificate or other court document listing the employee's spouse as the parent of the child, and • Marriage license of the employee and parent of the child 	ELIGIBILITY DETAILS Coverage available up to age 26. Coverage ends on the last day of the month in which the dependent turns 26.
Foster Child	
REQUIRED SUPPORTING DOCUMENTATION Foster care placement agreement between the employee and Texas Department of Family & Protective Services or its subcontractor	
Legal Custody or Guardianship	
REQUIRED SUPPORTING DOCUMENTATION Court documents signed by a judge that grant permanent legal custody or permanent legal guardianship to the employee	
Disabled Children Age 26 and Over	
REQUIRED SUPPORTING DOCUMENTATION Letter from Social Security Administration Office deeming child disabled needed in order to remain covered	

1

OUR PARTNERS



PARTNERING WITH BLUE CROSS AND BLUE SHIELD OF TEXAS

With our dedication to making healthcare better for you and your family comes our most exciting announcement of the year: we are partnering with Blue Cross and Blue Shield of Texas™ (BCBSTX) to both expand your access to providers through a larger network and save you money with better rates.



Better Cost

The Blue Cross and Blue Shield of Texas provider network has the best discounts on the cost of healthcare, which helps keep your rates as low as possible.



Better Access

Texas may be big, but the Blue Cross and Blue Shield of Texas PPO network is bigger. From gulf to panhandle, wherever you are in Texas, the BCBSTX network gives you access to nearby doctors and hospitals.



Better Service

You'll still have your dedicated TML Health team with you, but now we've expanded the team! You can get help 24/7 with BCBSTX's service team based right here in Texas.



Better Health

In addition to the TML Well program you know and love, you also have access to new wellness benefits and rewards with BCBSTX, such as individual health coaching and their integrated "whole person" approach to disease management.

DISCLAIMER

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



**BlueCross BlueShield
of Texas**

PRESCRIPTION DRUG PLAN

The prescription drug plan included with your medical benefits is managed by Navitus and uses a network of participating pharmacies. To receive benefits, you must use a participating pharmacy.

Using Your Prescription Drug Benefits

You can get your medicines from either a retail network pharmacy or through the Navitus mail order program. To make the most of your savings, we encourage you to ask for a generic medicine whenever possible. Generic medicines must meet the same FDA safety requirements as more expensive medicines to treat the same condition.

Wellness Drugs for Members with High Deductible Health Plans

If you are enrolled in the High Deductible Health Plan, certain wellness drugs (for prevention, rather than treatment) are only subject to prescription copays. Non-Wellness drugs are subject to the In-Network deductible. Once the In-Network deductible is met, prescription copays will apply.

Refer to your Summary of Benefits & Coverage (SBC) to determine which Plan design applies.

Prior Authorization

Some medicines have to be approved (authorized) by a doctor before you can start them. The reason is because some medicines are only approved or effective for certain health conditions. Prior authorizations help manage costs, control drug abuse, and protect your safety. They give you a chance to have the best possible treatment outcomes.

As part of this process, a group of doctors and pharmacists meet often to review medicines that are part of prescription drug plans. They also recommend prior authorization guidelines.

To start the prior authorization process:

- You, your pharmacist, or your doctor will contact us.
- We'll work with your doctor to get the information that's needed for the review.

For more information, call Navitus Customer Care at **855-673-6504**.

Disease Management Maintenance Drugs

Certain generic Disease Management Maintenance Drugs are offered at \$0 including medications for hypertension, high cholesterol, and diabetes

You can see a complete list of eligible medications by logging in at tmlhealthbenefits.org.

Step Therapy

Most health conditions can be treated using various medicines. Although they may work in much the same way, their prices can vary quite a lot. With the step therapy program, you can still get the treatment you need — often at a lower cost.

Here's how the step therapy program works:

- You'll try a **Step 1 medicine** *before* a **Step 2 medicine will be covered**.
- That means you'll try a less expensive medicine (**Step 1**) before trying one that costs more (**Step 2**).
- Based on the results of **Step 1**, a **Step 2** medicine may be processed and covered.
- When you bring a prescription to your pharmacy, our system will automatically check to see if it meets the requirements for step therapy.
- If you have already filed pharmacy claims and they show you've tried a **Step 1** medicine that didn't work for you, the **Step 2** medicine may then be processed.
- But, if you have not recently tried a **Step 1** medicine, **the pharmacist will ask your doctor for more details**.

Always talk with your doctor about the choices you have for your treatments and medicines and check the Navitus app while you're at the doctor's office. That way, you will know whether a drug requires step therapy before you go to the pharmacy.



Take action:

To make the most of your prescription drug benefits, you can access your prescription benefits using the Navitus web portal or mobile app. You can:

1. Compare medication prices to find the lowest cost option for you
2. Locate the most convenient in-network pharmacies
3. Save your preferred pharmacies for quick and easy access
4. See medication and benefit information
5. View your member ID card

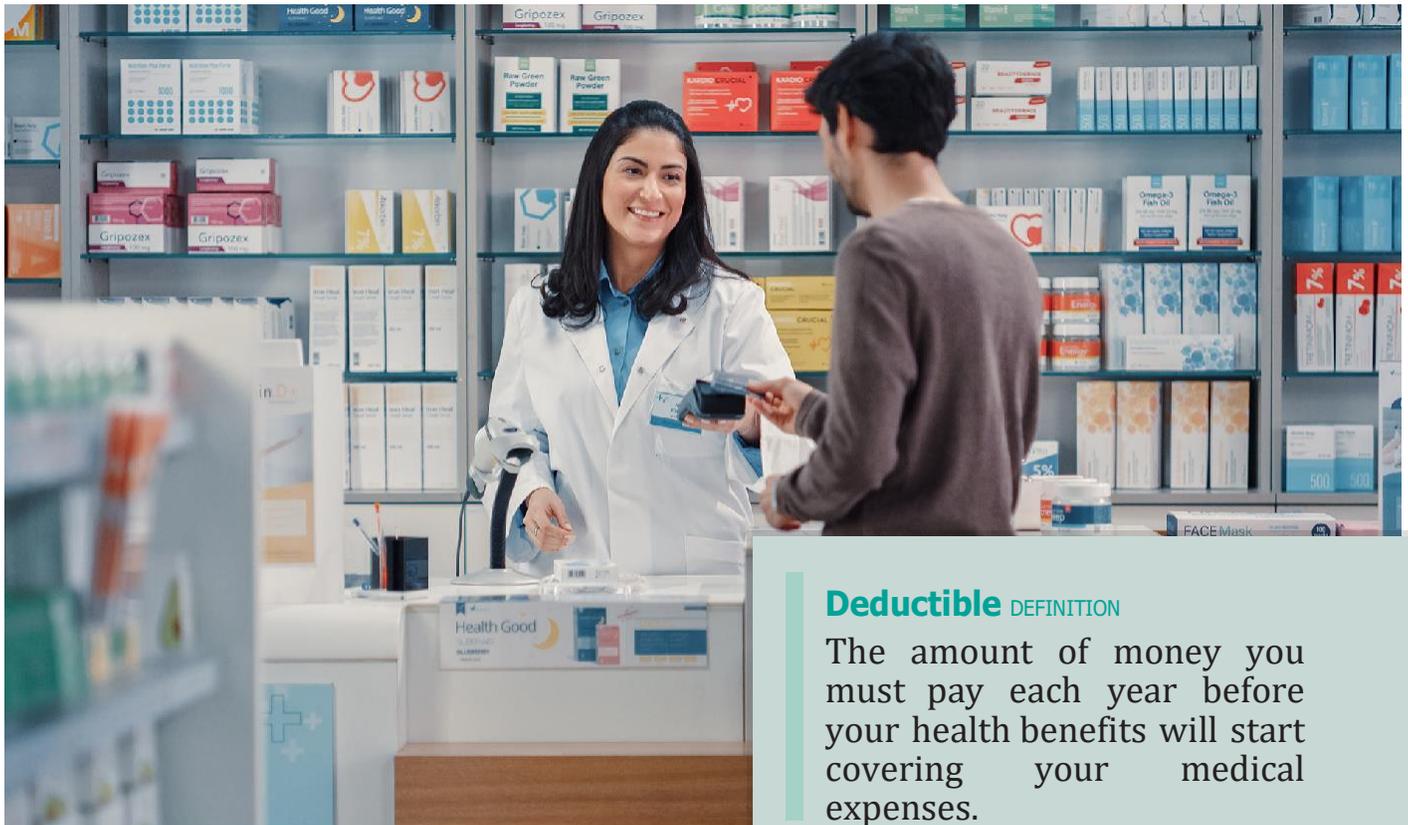


How to Access the Navitus Portal

1. Beginning on your effective date, go straight to the Navitus website, [Navitus.com](https://www.Navitus.com)
2. Select **Portal Login**
3. Select **Member Portal Login**
4. Select the link for **New Registration**

For mobile app account assistance contact Navitus customer care: **855-673-6504** • Open 24 hours a day, 7 days a week

**Registration is simple and secure and may require your member ID. The app is available to iOS and Android users. You must be 18 years or older and covered under Navitus' pharmacy benefit plan. Hover your phone's camera over the code to download the app.*



Deductible DEFINITION

The amount of money you must pay each year before your health benefits will start covering your medical expenses.

DEER OAKS

The Deer Oaks Employee Assistance Program (EAP) is a free service included with your TML Health membership. Everyone residing in your household can use the EAP even if they are not enrolled in your medical plan. This program offers a wide variety of counseling, referral, and consultation services, all designed to help you resolve work/life issues and live a happier, healthier, more balanced life. These services are confidential and can be easily accessed by calling the toll-free Helpline at 866-327-2400.

In-Person and Telephone Counseling

A network of 50,000 mental health providers throughout the United States are available to provide in-person assessment and counseling services. You can also call a counselor for in-the-moment phone/video support and crisis intervention. And your plan includes 6 free visits per year for each person in your family. If you prefer counseling in a language other than English, you can request phone interpretation in more than 190 common languages.

Referrals to Community Resources

Get referrals to community resources such as support groups, legal resources, and childcare or elder care services. Work/Life Consultants are also available to help you find a wide range of daily living resources such as pet sitters, event planners, home repair, tutors, and moving services. Simply call the Helpline for resource and referral information.

The Find-Now Child & Elder Care Program helps you care for children and aging parents by finding licensed, regulated, and inspected childcare and elder care facilities in your area. Work/Life Consultants assess your unique needs and provide a list of 3 to 5 confirmed referrals within 12 hours of your call. You can also search the databases and other resources on the Deer Oaks website at www.deeroakseap.com to help you find the right care arrangement.

Advantage Legal Assist

Get a free 30-minute telephone or in-person consultation with a plan attorney, and unlimited online access to a library of educational legal resources, links, tools and forms, interactive online Simple Will preparation, and access to state agencies to obtain birth certificates and other records.

If you need legal representation, you also receive a 25% discount on hourly attorney fees through the EAP.



Advantage Financial Assist

Call Deer Oaks for unlimited phone consultation with a financial counselor qualified to advise on a range of issues such as bankruptcy prevention, debt reduction, and financial planning. Financial counselors can also review your credit report and offer ways to improve your score. You can also find educational financial resources, such as tax guides and financial calculators on the Deer Oaks website at www.deeroakseap.com.

ID Recovery

If your identity has been stolen, this phone consultation service is here to help you recover and minimize the impact. You will receive a free 30-minute phone consultation with an Identity Recovery Professional, a customized action plan, and consultation on implementing the plan. Reduce the time you would spend repairing your damaged credit history, and take back your peace of mind. You can also get free ID monitoring.

Online Tools & Resources

www.deeroakseap.com contains an extensive library of health and wellness articles, downloadable presentations, child and elder care resources, and work/life balance resources, as well as a wealth of information for supervisors covering conflict resolution, leadership, motivation, and more.

Safe Ride Home with Take the High Road

Deer Oaks will reimburse you for your cab fares if you are impaired by alcohol, other substances, or extreme emotional condition. This service is available once per year per participant with a maximum reimbursement of \$45.00 (excluding tips).

If you are retired or have separated from your employer within the last 6 months, you can still use your EAP services.

24/7 ACCESS TO YOUR DEDICATED BENEFITS VALUE ADVISOR

Overwhelmed with cross-checking hospitals, doctors, and your network to get the best price? Then meet your Benefits Value Advisor (BVA), a personal customer service concierge dedicated to getting YOU the best deals on any medical expense in Texas!

These trained advisors maximize your savings by keeping you up to date on all of the best options and costs for procedures by:

Using the "Member Liability Estimator" (MLE)

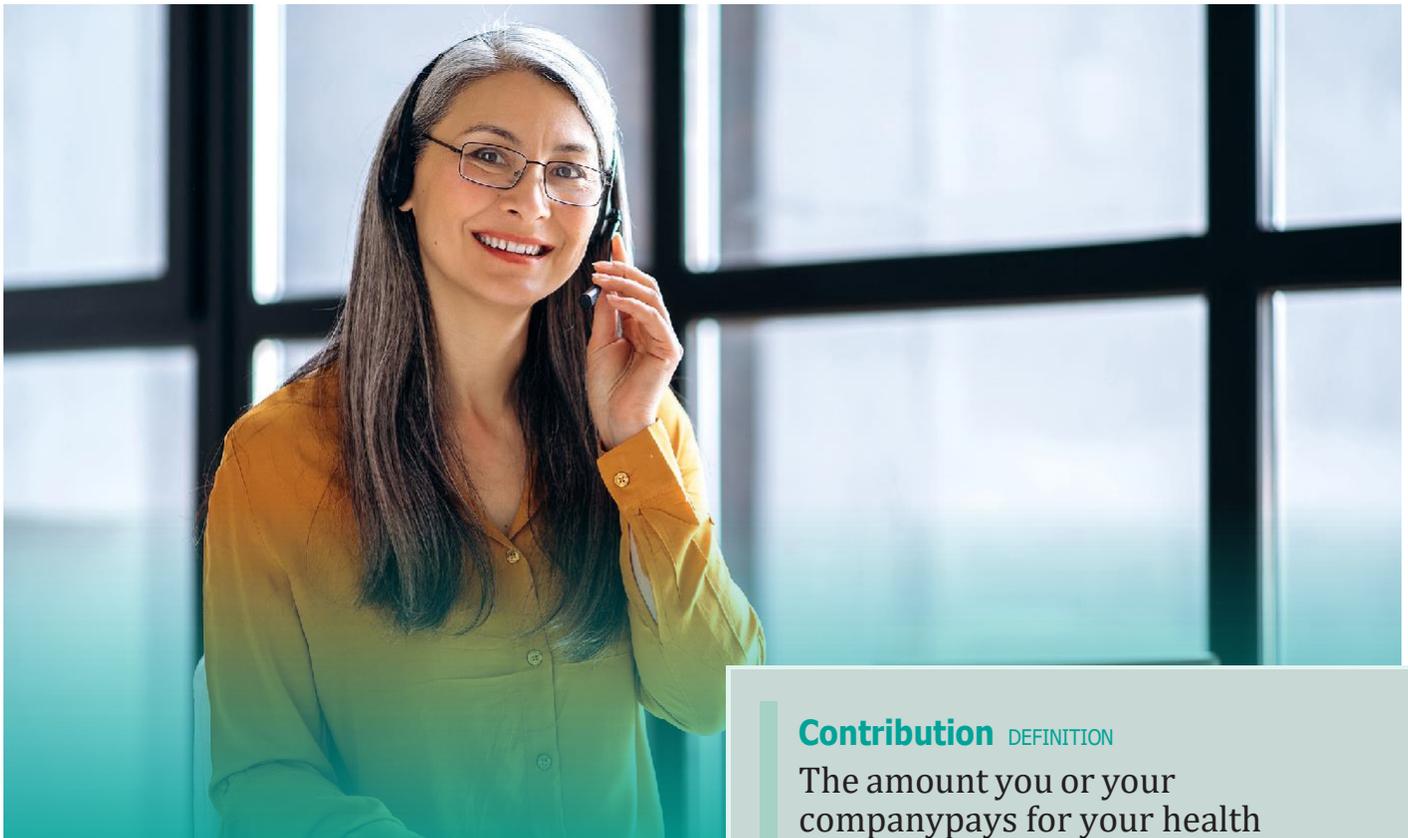
- Your BVA uses a price comparison tool (that you can also access on the BCBSTX website) that has more than 1600 procedures you can search for the best price on.
- And because the MLE is accessed through your login, all the results are tailored to YOUR plan already (including your current deductible and history).
- You can search by doctor, hospital, or procedure.

Being your personal medical secretary

- Your BVA may find you a better option that can save you money. If so, they'll take care of everything. Your BVA will cancel your previous appointment, reschedule with a more cost-efficient provider, and then contact your Primary Care Provider letting them know of the change.
- Your BVA will provide you with "after-call summaries" to ensure you have a written breakdown of how you can get the best price on your procedure.

And they're located right in Texas!

- Every BVA is located at our call center in Marshall, TX. That means when you pick up the phone, you'll be talking to a fellow Texan that knows the area and which doctors to point you to.



Contribution DEFINITION

The amount you or your company pays for your health benefits.

WELLNESS

Exciting news—Your TML Health membership gives you access to TWO incredible wellness programs, TML Health’s TML Well and BCBSTX’s Well on Target! Between them, you now have access to a robust collection of benefits that are completely FREE for you to use. Let’s take a look at each and go through everything you’ll now have access to.



Sound Mind & Body with TML Well’s Health Support



Deer Oaks Employee Assistance Program

TML Health’s partnership with Deer Oaks provides you with free access to their Employee Assistance Program (EAP), a 24/7 live access to a nationwide network of mental health professionals. Deer Oaks specializes in both Work/Life Services and Organizational Training & Skill Development.

Work/Life Services

From work to relationships to parenting, the modern Texan has a lot to balance in their day-to-day lifestyle and it’s ok to admit: it can get pretty stressful! That’s why Deer Oaks offers services to help you manage the perfect work/life balance.

Organizational Training & Skills Development

Better yourself and your career with Deer Oaks’ program committed to helping manage your career development with intensive trainings for your organization.

Online Wellness Video Library

From one-shot topics to entire video courses, TML Well gives you access to a wealth of online material to learn about mental and behavioral health.

Videos cover subjects like depression, schizophrenia, tobacco cessation, nutrition, and so much more. And to top it all off, designated video courses can even count towards your annual \$150 Wellness Incentive Check—all from the comfort of your own device!



Catapult Virtual Checkup™

Get a preventive screening and earn credit toward your \$150 Wellness Incentive. **There are two options:** participate in an onsite event or complete the Virtual Checkup™ in the comfort of your own home. Your Virtual Checkup includes a private video conference with a nurse practitioner who will go over your screening results with you and help you make a plan to address any resulting diagnoses or risks to your health, including:

- Metabolic syndrome
- Uncontrolled high blood pressure
- Prediabetes
- Uncontrolled lipids
- Weight challenges
- Depression



Weight Management Program: Naturally Slim is Now Wondr Health!

This ten-week online program teaches people how to lose weight and improve their health without giving up their favorite foods, through digital behavioral counseling for weight management and diabetes prevention. With as little as a 3% to 5% weight loss, our members can reduce the risk of metabolic syndrome by 41%.

Our pilot group of 400 individuals lost 1,300 lbs. in ten weeks. Wondr Health is available free to all adult members covered by TML Health plans. Selection criteria include:

- Must be older than 18
- Must have a BMI greater than 25 and one risk factor or a BMI of greater than 30
- Must be covered under the medical plan

Earn \$150 for Completing Wellness Challenges

Employees and spouses earn rewards each year by taking a wellbeing survey and completing either a biometric screening, individual challenges, group challenges, or “Wellness Your Way” challenges through TML Well.

Option 1

- Preventive Care Screening (*Biometrics*)
- Wellbeing Survey

Option 2

- Quarterly Challenge (*4-6 weeks in length*)
- Wellbeing Survey

Option 3

- 2 Personal Challenges (*must be in the nutrition or physical activity category*)
- Wellbeing Survey

Option 4

- Wellness Your Way Challenge offered by your employer
- Wellbeing Survey

Primary Care Provider (PCP) DEFINITION

Also called a Primary Care Physician, this is the generalist medical professional you select who can act as your first touch point for anything health-related.



Well onTarget® **Well onTarget® Wellness Programs**

As mentioned, your TML Health membership comes with TWO wellness programs, our very own TML Well and free access to Blue Cross and Blue Shield of Texas' (BCBSTX) Well onTarget® program. Well onTarget® includes a health incentive program called Blue Points, a mobile app with fitness and nutrition tracking, lifestyle coaching, and a library of online resources.

Earn Rewards with Blue Points

By regularly participating in healthy activities, you can earn Blue Points that can be redeemed in an online rewards store through BCBSTX's Well onTarget program. From camping equipment to smart wearables, there are plenty of exciting rewards waiting to be unlocked by doing activities as simple as:



- Filling in health assessments
- Engaging in fitness classes
- Tracking your own steps, diet, etc.
- Connecting and using fitness wearables
- Learning about various health topics

oviahealth™

Ovia Health for Women's and Family Health

Get support from Ovia Health's complete app suite to providesupport from pre-pregnancy to delivery all the way through parenting. On top of being great tracking apps for every step of the parenting journey, Ovia Health helps manage both the children's and the mother's health, including support for post-partum depression.

See your Welcome Packet for more details on everything OviaHealth has to offer!



Livongo for Diabetes and Hypertension Management

At no additional cost, members with diabetes or hypertension claims will receive an outreach call from a professional at Livongo, a digital health platform determined to empower you to take control of your condition.

If you choose to participate, you will receive digitally connected glucose monitors, scales, and/or blood pressure cuffs that will monitor and transmit your data in real time to your own personal Livongo coach, who will help you manage your condition.

See your Welcome Packet for more details about enrolling in Livongo!



Airrosti for Musculoskeletal Recovery

Airrosti is an outcome-based program, dedicated to quick recovery from common conditions or injuries through physical therapy for those who wish to avoid surgeries or other unnecessary invasive care options.

You have the option to choose in-office care or virtual and remote treatment to start feeling like yourself in as little as 3-4 visits.

HOW TO USE YOUR BENEFITS



UNDERSTANDING HOW YOUR MEDICAL BENEFITS WORK

Benefit Plan Designs

Your employer offers specific plans, which you can see in the back pocket of this Guide.

The Most In-Network Doctors

The Blue Cross and Blue Shield of Texas network provides coverage for the TML Health Benefits Pool medical plans.

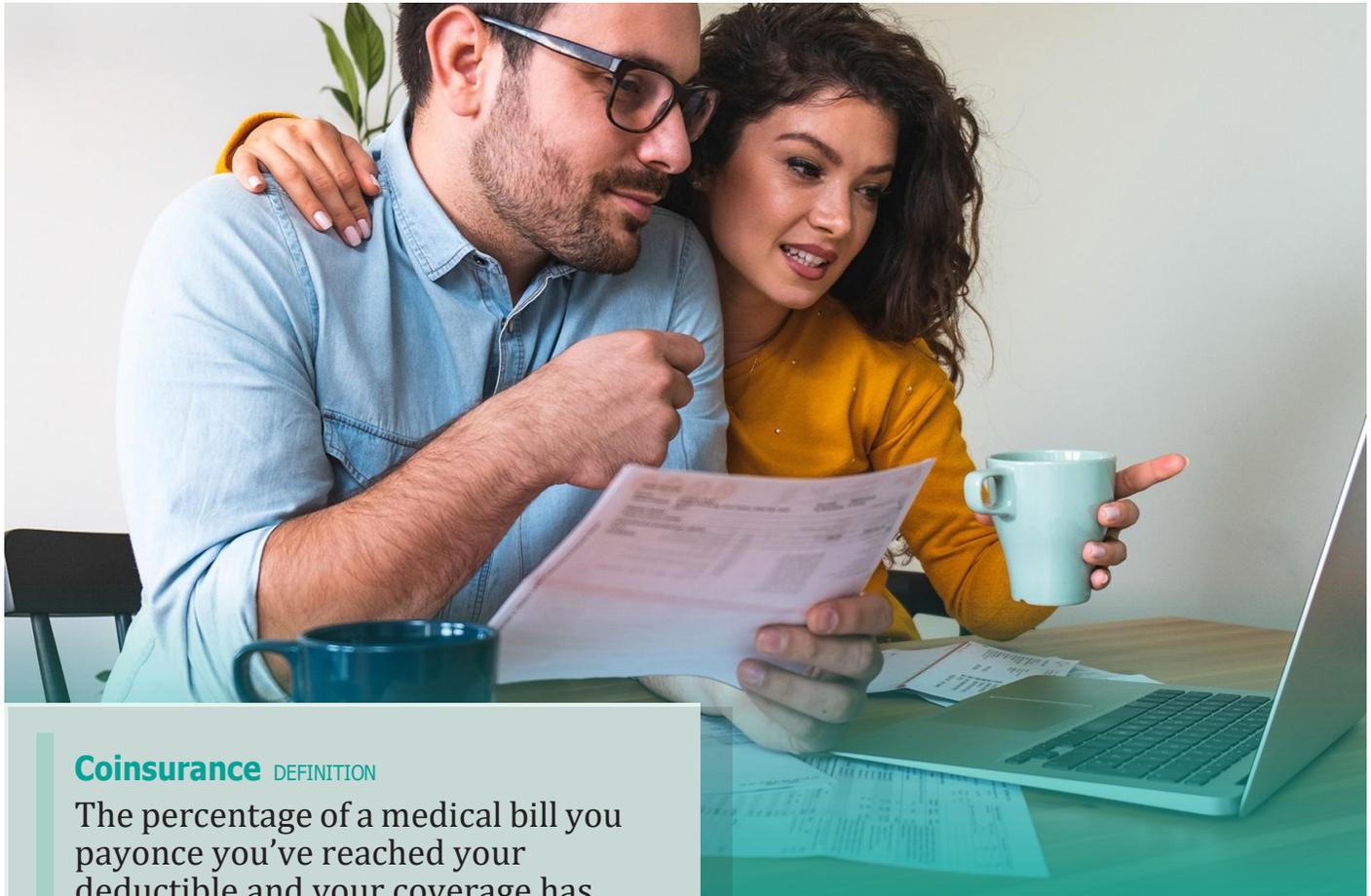
Your best option is to always select an in-network healthcare provider or facility. This will not only save you money during the visit, but helps keep your premiums lower as well. If you use an out-of-network provider or facility, you may be responsible for paying the difference between the covered amount and the amount charged by the provider/facility. Some health plans may not offer coverage for out-of-network providers.

Find the Best Price

Get the same care at a lower out of pocket cost to you by comparing prices at the Blue Cross and Blue Shield of Texas website, using the Price Comparison Tool. Compare what you would pay out of pocket, with your specific plan, for more than 1600 procedures. Search by procedure or by provider.

Benefit Value Advisor (BVA)

As part of our commitment to bringing concierge service to our members, you will have 24/7 access to service through the Benefit Value Advisor program (BVA). Your Benefit Value Advisor can help you understand your benefits, find the best price on a procedure, and make, reschedule, or cancel appointments. If your doctor sets an imaging appointment for you, such as an MRI or CT scan, but you could get a better price elsewhere, your BVA will handle canceling your previous appointment and making the new one. Your calls will be kept right here in Texas, with Benefit Value Advisors in Marshall, TX.



Coinsurance DEFINITION

The percentage of a medical bill you pay once you've reached your deductible and your coverage has begun.

MEDICAL MANAGEMENT

TML Health's benefit plans include several programs designed to help you get the right care at the right price. Below is a summary of key programs we feel are important for you to know in order to understand how your plan works.

Wellbeing Management

Our holistic medical management program will give you a single point of contact, to help you treat your whole body, mind, and all your conditions in an integrated way, because you're a whole person, not a collection of parts with unconnected conditions.

24/7 Nurseline

A nurse at the 24-Hour Advisor Line can help you decide if you should call your doctor, visit the ER or urgent care, wait to see your doctor when you can, or treat the problem yourself. Services are available in many languages.

Teens can also call and speak to a nurse in private about teen health issues.

By calling this line, you can also listen to audio tapes on hundreds of health topics that may concern you, such as:

- Pregnancy
- Diabetes
- Children's health
- High blood pressure
- Insomnia
- Sexually transmitted diseases such as HIV/AIDS

24/7 Nurseline

877-351-8392

TTY: 800-386-4424

Well onTarget

Get 1-on-1 health coaching to help you meet your health and wellness goals like getting your blood pressure or glucose under control, getting fit, or managing your mental health.

To access your health coaching, enroll in the Well onTarget portal. You will then get a call from a health coach to find out more about your goals, your lifestyle, and set milestones to help you get to where you want to be. The coach will do 6-8 future calls with you to help support you on your health and wellness journey.

Prior Authorization

Some services covered under your medical plan may require an authorization before receiving services.

If you are using an in-network provider (doctor or facility), the in-network provider may obtain the prior authorization on your behalf. We recommend that you confirm with your provider that this has been done before you receive your treatment.

When Do I Need a Prior Authorization?

Services that may require a prior authorization include:

- Major imaging
- Joint and spine surgeries
- Genetic testing
- Radiation therapies

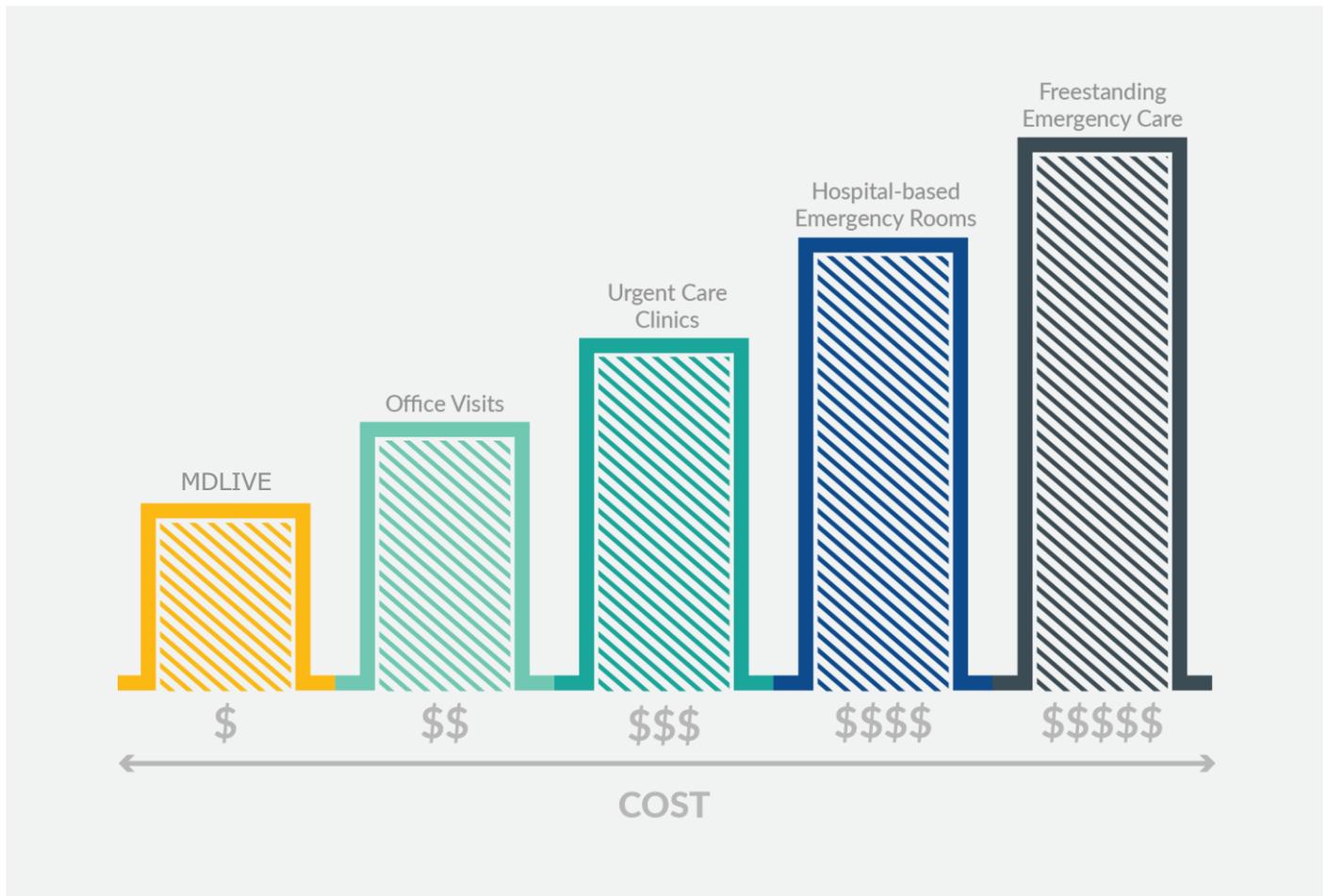
This list is just a sample, please refer to your Medical Benefits Booklet for the complete list of services that require Prior Authorization.

Specialty Review Unit

The Specialty Review Unit helps ensure that you are getting the right prescription, based on the latest research, the best dosage for you, and other factors. If they believe there is a better alternative, they will reach out to your medical provider to discuss your prescription.

GET THE CARE YOU NEED AT THE RIGHT PRICE

We understand healthcare can seem complicated. That's why TML Health is working to simplify healthcare by helping you know where to go for treatment at the lowest cost. Below is a quick reference to understand which care options are best for meeting medical needs you or a covered family member may have.



BLUE ACCESS FOR MEMBERSSM

Blue Cross and Blue Shield of Texas helps you get the most out of your healthcare benefits with Blue Access for Members (BAMSM). You and all covered dependents age 18 and up can create a BAM account.

With BAM, you can:

- Use our Provider Finder[®] tool to search for a healthcare provider, hospital, or pharmacy
- Request or print your ID card
- Check the status or history of a claim
- View or print Explanation of Benefits statements
- Use our Cost Estimator tool to find the price of hundreds of tests, treatments, and procedures
- Download our app
- Sign up for text or email alerts

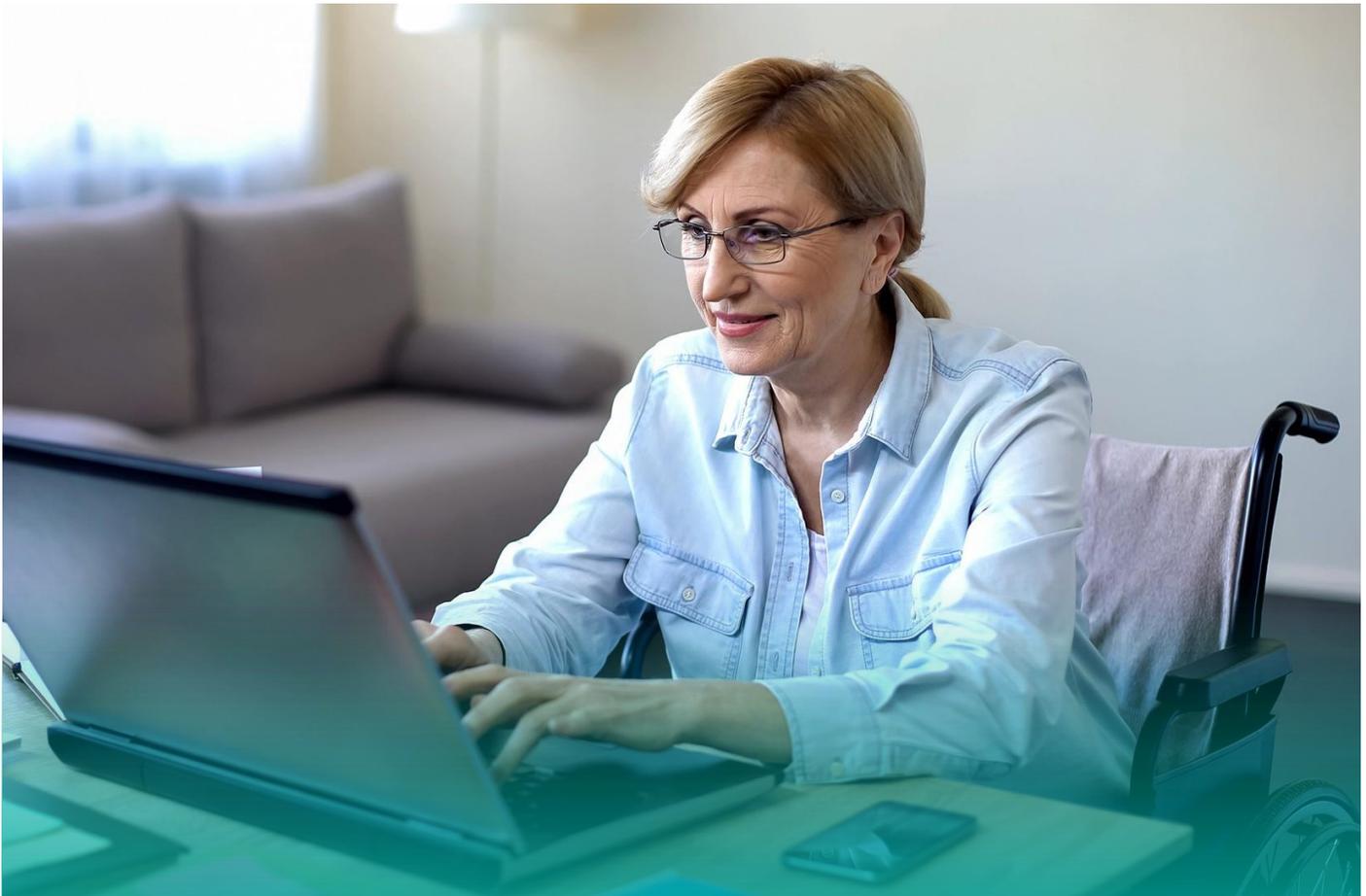


It's easy to get started!

1. Go to bcbstx.com/member
2. Click Log Into My Account
3. Use the information on your BCBSTX ID card to sign up

Or, text* BCBSTXAPP to 33633 to get the BCBSTX App that lets you use BAM while you're on the go.

**Message and data rates may apply.*



USING YOUR MEDICAL PLAN

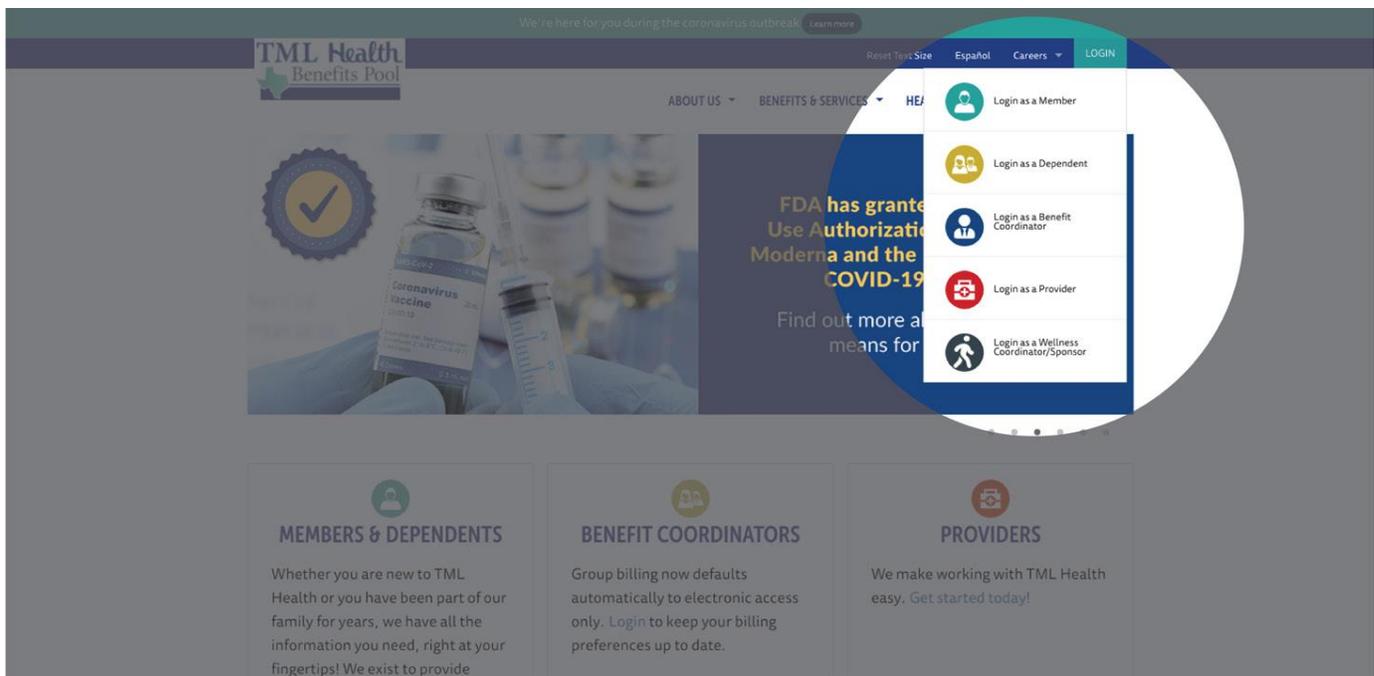
TML Health offers you and your family tools and resources to help you save money while using your medical plan. Below are some key ways to stretch your healthcare dollar.

TML Health Online

TML Health Online helps you easily manage and track your benefits information on your computer – all on a secure online account. Through TML Health Online, you can:

- Find an in-network provider in the Blue Cross and Blue Shield of Texas network
- View your ID card
- Check claims, deductibles, and out of pocket balances.

1. Go to www.tmlhealthbenefits.org
2. Click on **Login** then click on **Login as a Member** or **Login as a Dependent**
3. Click on **Register**
4. Read the License Agreement and click **Agree**
5. Create a username, password, and enter answers to your security questions



The screenshot shows the TML Health Benefits Pool website. The top navigation bar includes "Reset Text Size", "Español", "Careers", and "LOGIN". A dropdown menu is open under "LOGIN", listing the following options: "Login as a Member", "Login as a Dependent", "Login as a Benefit Coordinator", "Login as a Provider", and "Login as a Wellness Coordinator/Sponsor". The main content area features a banner for COVID-19 vaccines with the text "FDA has granted Use Authorization for Moderna and the COVID-19 Vaccine" and "Find out more about the vaccine means for you". Below the banner are three columns: "MEMBERS & DEPENDENTS", "BENEFIT COORDINATORS", and "PROVIDERS", each with a brief description of services.

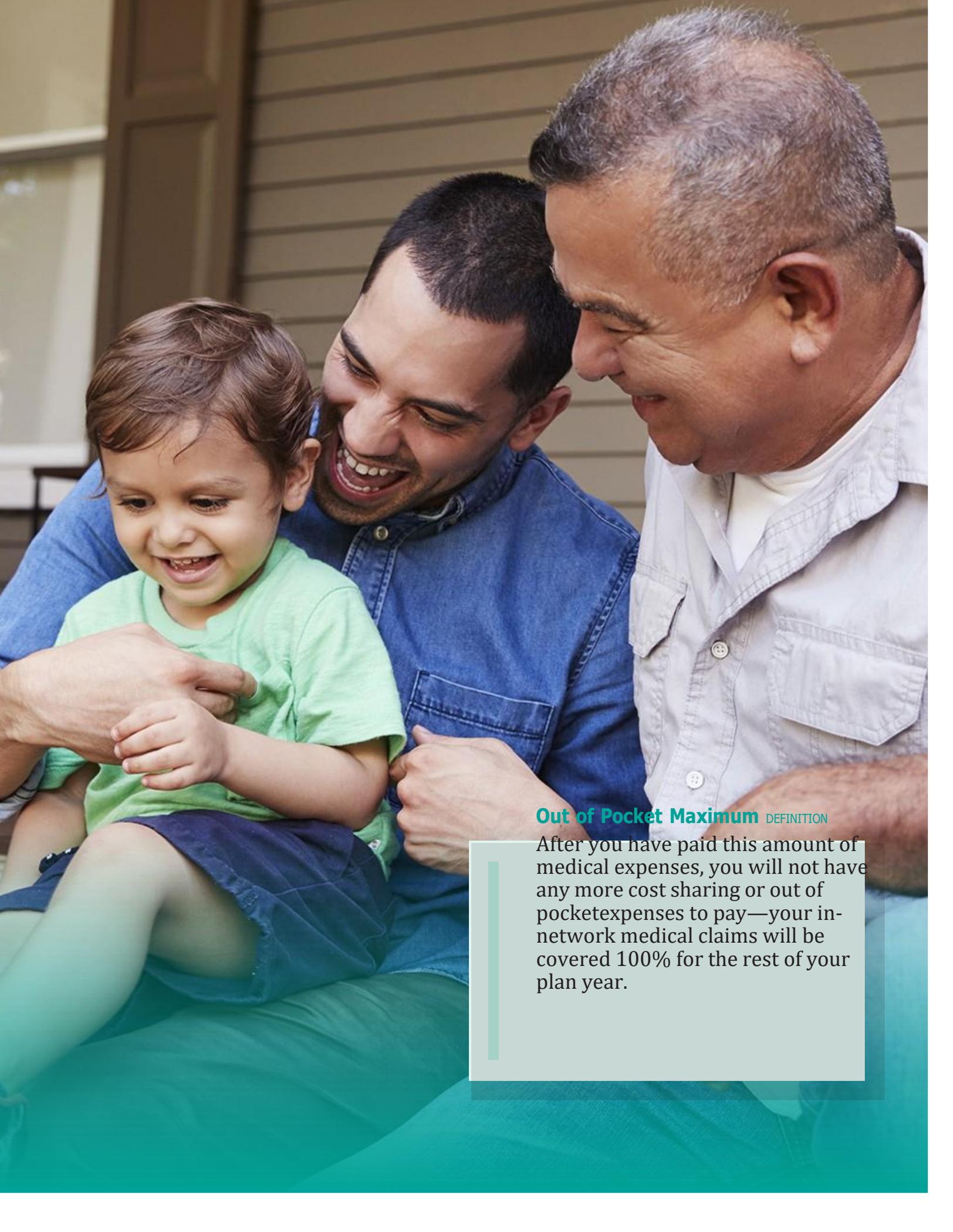
VIRTUAL VISITS WITH MDLIVE

The Virtual Visits benefit with MDLIVE (provided through the BCBSTX network) allows you to remotely connect with a board-certified doctor via online video, mobile app, or phone, anytime, anywhere! Download the app and register today.

Virtual Visits can address a variety of non-emergency care issues, ranging from the cold and flu to pink eye. It even is a great tool for behavioral health concerns as well. MDLIVE doctors can also send prescriptions to nearby pharmacies for many common medical conditions.



MDLIVE[®]



Out of Pocket Maximum DEFINITION

After you have paid this amount of medical expenses, you will not have any more cost sharing or out of pocket expenses to pay—your in-network medical claims will be covered 100% for the rest of your plan year.





To access TML Health Online:

1. Go to www.tmlhealthbenefits.org
2. Click on **Login** then click on **Login as a Member** or **Login as a Dependent**
3. Click on **Register**
4. Read the License Agreement and click **Agree**
5. Create a username, password, and enter answers to your security questions

Customer Care 800-282-5385
Monday- Friday, 7:00 AM-6:00 PM Central



To access your Navitus Portal:

1. Log in to TML Health Online at www.tmlhealthbenefits.org
2. Go to the **Benefits Center** tab
3. Select **Navitus** from the list of benefits

For more information, contact Navitus Customer Care at: 855-673-6504



To access your MDLIVE benefit:

1. Log in to TML Health Online at www.tmlhealthbenefits.org
2. Go to the **Benefits Center** tab.
3. Click on **Blue Access for Members (BAM)**.
4. Log in to your BAM account to schedule a remote checkup.

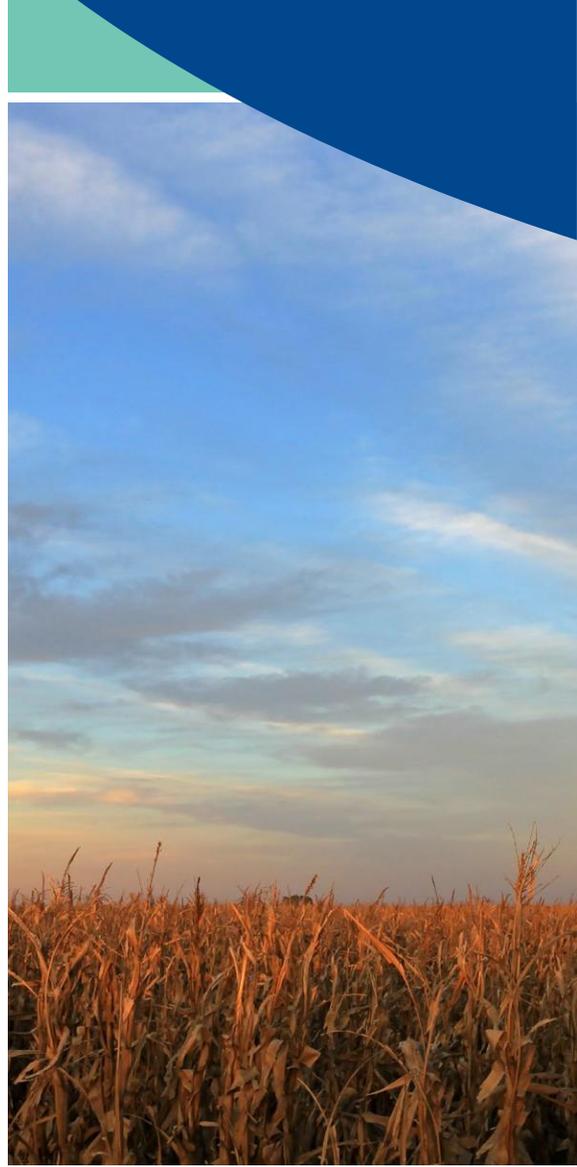
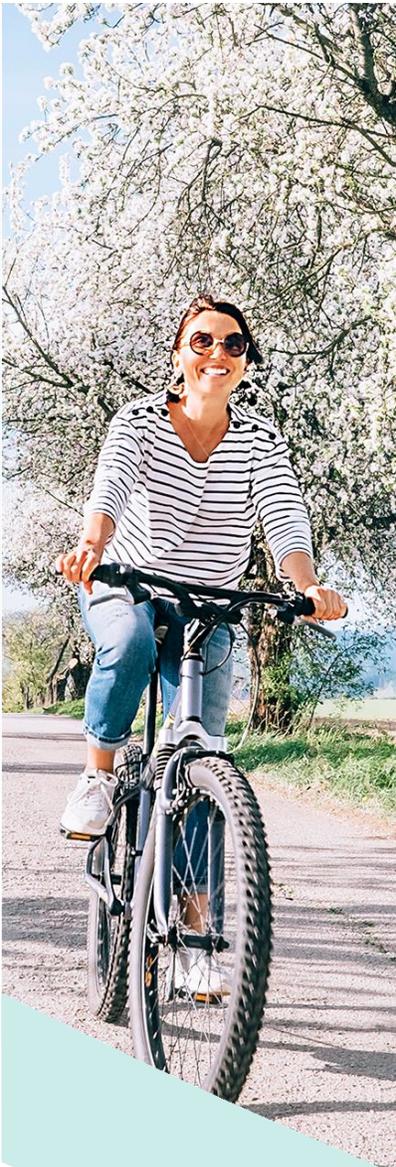
24/7 NURSELINE

Get your health questions answered with the 24/7 Nurseline:

1. Call **877-351-8392** to reach a nurse who can speak with you in your language of choice.
2. If you have hearing or speech loss, you can call **800-386-4424**.

CONTACT CHART

Questions about...	Access	Contact Info	Hours
<ul style="list-style-type: none"> • Medical benefits • Medical procedures • Major imaging like MRI, CT, etc. <i>(Call before your appointment)</i> • Cost estimates for procedures • Medical claims, EOBs • Select or change PCP • Deductibles, co-payments, co-insurance 	BlueCross BlueShield of Texas Helpline	855-762-6084	24 hours a day 7 days a week
<ul style="list-style-type: none"> • Enrolling in benefits • Adding, removing, or changing any TML Health administered benefit • Changing your contact information • Spending accounts, including balances • Life insurance • TML Health website • TML Health Online password reset • General questions 	TML Health Member Service	800-282-5385	Monday-Friday 7:00 am-6:00 pm CT
<ul style="list-style-type: none"> • Prescription drugs covered by the plan • Rx Copays and lower cost options • Mail-order pharmacy • Specialty pharmacy • Pharmacy network • Prescription drug plan benefits 	Navitus Customer Care	855-673-6504	24 hours a day 7 days a week
<ul style="list-style-type: none"> • Medical procedures requiring prior approval <i>(also known as a prior authorization)</i> 	Medical Preauthorization Helpline	800-441-9188	Monday-Friday 6:00 am-6:00 pm CT
<ul style="list-style-type: none"> • Mental health prior authorization • Substance use prior authorization 	Mental Health/Chemical Dependency (SUD) Preauthorization Helpline	800-528-7264	24 hours a day 7 days a week
<ul style="list-style-type: none"> • TML Health Online access • Access to benefits books • Health and wellness resources 	TML Health Website	www.tmlhb.org in the “Reference Center”	24 hours a day 7 days a week
<ul style="list-style-type: none"> • Blue Access for Members (BAM) • Find an in-network provider 	BCBSTX Website	www.BCBSTX.com Login under “Member Services”	24 hours a day 7 days a week
<ul style="list-style-type: none"> • Your mental health • Work/life balance • Skill development and organization 	Deer Oaks Employee Assistance Program (EAP)	866-327-2400 www.deeroakseap.com	24 hours a day 7 days a week
<ul style="list-style-type: none"> • Non-emergency symptoms • Prescriptions • Behavioral health 	MDLIVE	www.mdlnext.mdlive.com	24 hours a day 7 days a week
<ul style="list-style-type: none"> • Healthcare options and decisions • Teen health • Diabetes and blood pressure • Sexually transmitted diseases 	24/7 Nurseline	877-351-8392 or 800-386-4424 (Hearing/Speech Impaired)	24 hours a day 7 days a week



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(800) 282-5385

For more information, visit us at
tmlhealthbenefits.org

Follow us: @TMLHealth



TML Health Benefits Pool is a non-profit trust organization created by political subdivisions to provide group benefits services to participating political subdivisions and is not an insurance company.