

HEALTHCARE BENEFITS: THE CHOICE IS YOURS



Choosing a Health Plan that works for You

Hempstead ISD



State of Texas Alternative Medical Program (STAMP)

A better healthcare experience built to deliver exceptional member support

We understand healthcare is complex and we are committed to making it easy for you.

With a compassionate support team, intelligent technology and clinical expertise, we make sure every member gets the care and guidance they need.



You get:

- One Number to Call
- Complete Healthcare Guidance
- Health and Clinical Support
- Price Protection and Billing Support

You're at the center of all we do. Our team is made up of real people who listen and are passionate about answering your questions and advocating on your behalf. We proactively look after you and your family and make it easy for you to get the help you need.



One Call – That's All

Our team is ready and able to help resolve most issues in just one call. Contact us if:

You have questions
about your benefits

Need help
with a claim

Need to find
a provider

Just call us at 800-716-2852.

One Number to Call

Our Member Care Team is ready to assist you no matter what you are inquiring about: benefits information; assistance finding a doctor; or questions about a claim or bill. Your time is valuable, and we are committed to helping you get the most out of your health plan with just one call.

Complete Healthcare Guidance (live and digital resources)

Get expert support to find right provider for your needs. Compare providers based on quality metrics, cost and other information so that you can make an informed choice. Finally, no more random internet searches – get real-time, industry-leading data.

Health and Clinical Support

We will take care of you throughout your healthcare journey. Our team of experts will answer questions and provide education regarding your treatment plan, diagnosis care options and medications. We can also assist you with scheduling appointments and obtaining your medical records.

Price Protection and Billing Support

Your health plan has built-in price protection to make sure you don't overpay for care. Claims are reviewed to make sure they don't exceed your plan's allowable limits. If a provider does not accept your plan's payment, they may send you a bill for the difference. (You just need to compare it to your Explanation of Benefits, or EOB.) We can work to get it resolved; be sure to notify us right away if you have a question about a bill.



Benefits ID Card

Your benefits ID card has all the information you and your provider need. Make sure to:

Always have your Benefits ID Card with you when you go to a healthcare provider

Provide your Benefits ID Card at check-in

Ask the provider to call the phone number on the card if they have any questions about your benefits coverage

Here to help with just one call.

Phone: 800-716-2852 | Hours: Mon-Thurs: 7am-9pm CST Friday: 7am-7pm CST

Email: myplan@gpatpa.com

Provider Choices

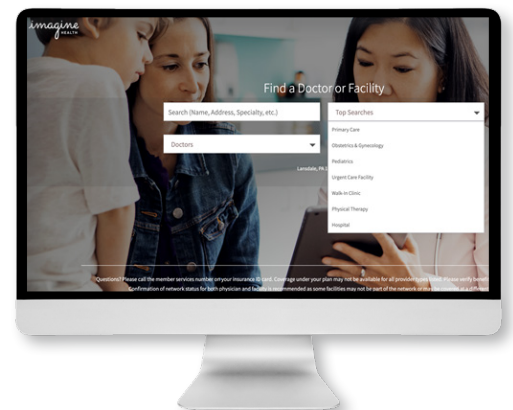
Finding quality healthcare is easy. Choose an Imagine Health provider and you'll receive affordable, quality care. Need to see a provider that is not an Imagine partner? We've got you covered with access to the network of Multiplan providers.

You also have the ability to choose to see any provider you wish.

Find an Imagine Provider

Imagine Health providers are carefully selected for the quality care they provide, and offer a full breadth of providers to meet your needs. You also have access to all CVS MinuteClinics® nationwide, as well as laboratory services through Quest Diagnostics.

- Go to providers.imaginehealth.com.
- Enter and select your city or zip code.
- Customize your search by entering a provider name, address or specialty. You can also search by top searches, facilities, or even specialist options. (e.g., Hospitals, Urgent Care, Hospice, Infusion, Laboratory).
- Results are shown as a list or map. Filter by name or location, or change the search radius.



If you are outside the Imagine footprint, you can also find options through Multiplan.

- Visit www.multiplan.com/mpipracanc.
- Click on Search by Name, Specialty and then scroll down and select Provider Type.
- Enter your city/county/zip code in the next field.
- Click the search button or hit "Enter".
- Hit ok at the bottom of the pop-up screen.

*Please note that if you see a provider outside Imagine or Multiplan you may be asked to pay upfront and will need to submit a claim to GPA.

Need Help Finding a Provider? Call!

We are happy to help you select a provider that works with your plan. Just call the number on your benefits ID card.

**Imagine Benefit Plans with Member Costshare Differentials
versus TRS ActiveCare Primary**

Monthly Premiums

Current Option – TRS ActiveCare Primary		STAMP Primary
Employee Only	\$417.00	\$405.00
Employee + Spouse	\$1,176.00	\$1,165.00
Employee + Child(ren)	\$751.00	\$740.00
Employee + Family	\$1,405.00	\$1,394.00

Preventive Care

Current Option – TRS ActiveCare Primary		STAMP Primary
Well Care (Up to Age 19)	Covered 100%, Deductible Waived	Covered 100%, Deductible Waived
Routine Adult Care	Covered 100%, Deductible Waived	Covered 100%, Deductible Waived

Plan Features

Coverage Type	Tier 1 INN Only	Tier 2 None Except ER	Imagine Health Providers/Facilities	All Other Providers/Facilities
Deductible - Individual	\$2,500	Not Available	\$1,000	\$2,000
Deductible (Individual + 1 or more)	\$5,000		\$2,000	\$4,000
Plan Co-Insurance (except where noted)	70%		90%	70%
Max OOP - Individual	\$8,150		\$6,000	\$7,500
Max OOP (Individual + 1 or more)	\$16,300		\$12,000	\$15,000
Telehealth	Included		No Charge	No Charge
Office Visit – Primary	\$30		\$10	\$25
Office Visit – Specialist	\$70		\$40	\$60
Physical, Occupational & Speech Therapy	You pay 30% after Deductible		\$40	\$60
In-Patient Hospital (Facility)	You pay 30% after Deductible		You pay 10% after Deductible	You pay 30% after Deductible
In-Patient Hospital (Surgeon)	You pay 30% after Deductible		You pay 10% after Deductible	You pay 30% after Deductible
Out-Patient Hospital (Facility)	You pay 30% after Deductible		You pay 10% after Deductible	You pay 30% after Deductible
Out-Patient Hospital (Surgeon)	You pay 30% after Deductible		You pay 10% after Deductible	You pay 30% after Deductible
Participating Lab Services	Place of Service		Place of Service	Place of Service
Standard X-Ray	Place of Service		Place of Service	Place of Service
Complex Imaging	You pay 30% after Deductible		You pay 10% after Deductible	You pay 30% after Deductible
Urgent Care	\$50		\$40	\$50
Ambulance (Air & Land) - Emergency	You pay 30% after Deductible	INN Benefit Level	You pay 10% after Deductible	Incentive tier benefit level
Emergency Room	\$500 + deductible/coinsurance	INN Benefit Level	\$500 + deductible/coinsurance	Incentive tier benefit level

Prescription Drugs

Coverage Type	Tier 1 INN Only	Tier 2 None Except ER	Imagine Health Providers/Facilities	All Other Providers/Facilities
Drug Deductible	Integrated with medical		Integrated with medical	
Generics (30-day/90-day)	\$15/\$45 copay		\$5/\$15 copay	
Preferred Brand	You pay 30% after Deductible		You pay 20% after Deductible	
Non-Preferred Brand	You pay 50% after Deductible		You pay 50% after Deductible	
Specialty	You pay 30% after Deductible		Not Covered by Plan *	

Imagine Benefit Plans with Member Costshare Differentials
versus TRS ActiveCare Primary+

Monthly Premiums

Current Option – TRS ActiveCare Primary+		STAMP Primary+
Employee Only	\$542.00	\$441.00
Employee + Spouse	\$1,334.00	\$1,326.00
Employee + Child(ren)	\$879.00	\$874.00
Employee + Family	\$1,675.00	\$1,672.00

Preventive Care

Current Option – TRS ActiveCare Primary+		STAMP Primary+
Well Care (Up to Age 19)	Covered 100%, Deductible Waived	Covered 100%, Deductible Waived
Routine Adult Care	Covered 100%, Deductible Waived	Covered 100%, Deductible Waived

Plan Features

Coverage Type	Tier 1 INN Only	Tier 2 None Except ER	Imagine Health Providers/Facilities	All Other Providers/Facilities
Deductible - Individual	\$1,200	Not Available	\$500	\$1,000
Deductible (Individual + 1 or more)	\$3,600		\$1,500	\$3,000
Plan Co-Insurance (except where noted)	80%		90%	80%
Max OOP - Individual	\$6,900		\$4,500	\$6,000
Max OOP (Individual + 1 or more)	\$13,800		\$9,000	\$12,000
Telehealth	Included		No Charge	No Charge
Office Visit – Primary	\$30		\$10	\$25
Office Visit – Specialist	\$70		\$40	\$60
Physical, Occupational & Speech Therapy	You pay 20% after Deductible		\$40	\$60
In-Patient Hospital (Facility)	You pay 20% after Deductible		You pay 10% after Deductible	You pay 20% after Deductible
In-Patient Hospital (Surgeon)	You pay 20% after Deductible		You pay 10% after Deductible	You pay 20% after Deductible
Out-Patient Hospital (Facility)	You pay 20% after Deductible		You pay 10% after Deductible	You pay 20% after Deductible
Out-Patient Hospital (Surgeon)	You pay 20% after Deductible		You pay 10% after Deductible	You pay 20% after Deductible
Participating Lab Services	Place of Service		Place of Service	Place of Service
Standard X-Ray	Place of Service		Place of Service	Place of Service
Complex Imaging	You pay 20% after Deductible		You pay 10% after Deductible	You pay 20% after Deductible
Urgent Care	\$50		\$40	\$50
Ambulance (Air & Land) - Emergency	You pay 20% after Deductible	INN Benefit Level	You pay 10% after Deductible	Incentive tier benefit level
Emergency Room	\$500 + deductible/coinsurance	INN Benefit Level	\$500 + deductible/coinsurance	Incentive tier benefit level

Prescription Drugs

Coverage Type	Tier 1 INN Only	Tier 2 None Except ER	Imagine Health Providers/Facilities	All Other Providers/Facilities
Drug Deductible	\$200 Brand Deductible	Not Available	\$150 Brand Deductible	
Generics (30-day/90-day)	\$15/\$45 copay		\$10/\$30 copay	
Preferred Brand	You pay 20% after Deductible		You pay 20% after Deductible	
Non-Preferred Brand	You pay 50% after Deductible		You pay 50% after Deductible	
Specialty	You pay 20% after Deductible		Not Covered by Plan *	

**Imagine Benefit Plans with Member Costshare Differentials
versus TRS ActiveCare HD
Monthly Premiums**

Current Option – TRS ActiveCare HD		STAMP HD
Employee Only	\$429.00	\$409.00
Employee + Spouse	\$1,209.00	\$1,202.00
Employee + Child(ren)	\$772.00	\$761.00
Employee + Family	\$1,445.00	\$1,436.00

Preventive Care

Current Option – TRS ActiveCare HD			STAMP HD
	Tier 1 INN Only	Tier 2 OON	
Well Care (Up to Age 19)	Covered 100%, Deductible Waived	50% After Deductible	Covered 100%, Deductible Waived
Routine Adult Care	Covered 100%, Deductible Waived	50% After Deductible	Covered 100%, Deductible Waived

Plan Features

Coverage Type	Tier 1 INN Only	Tier 2 OON	Imagine Health Providers/Facilities	All Other Providers/Facilities
Deductible - Individual	\$3,000	\$5,500	\$1,400	\$2,000
Deductible (Individual + 1 or more)	\$6,000	\$11,000	\$2,800	\$4,000
Plan Co-Insurance (except where noted)	70%	50%	80%	70%
Max OOP - Individual	\$7,000	\$20,250	\$4,000	\$6,000
Max OOP (Individual + 1 or more)	\$14,000	\$40,500	\$8,000	\$12,000
Telehealth	Included	Included	No Charge	No Charge
Office Visit – Primary	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Office Visit – Specialist	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Physical, Occupational & Speech Therapy	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
In-Patient Hospital (Facility)	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	Incentive tier benefit level
In-Patient Hospital (Surgeon)	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Out-Patient Hospital (Facility)	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	Incentive tier benefit level
Out-Patient Hospital (Surgeon)	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Participating Lab Services	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Standard X-Ray	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Complex Imaging	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Urgent Care	You pay 30% after Deductible	You pay 50% after Deductible	You pay 20% after Deductible	You pay 30% after Deductible
Ambulance (Air & Land) - Emergency	You pay 30% after Deductible	INN benefit level	You pay 20% after Deductible	Incentive tier benefit level
Emergency Room	You pay 30% after Deductible	INN benefit level	You pay 20% after Deductible	Incentive tier benefit level

Prescription Drugs

Coverage Type	Tier 1 INN Only	Tier 2 None Except ER	Imagine Health Providers/Facilities	All Other Providers/Facilities
Drug Deductible	Integrated with medical		Integrated with medical	Integrated with medical
Generics (30-day/90-day)	You pay 20% after deductible		You pay 10% after deductible	You pay 20% after deductible
Preferred Brand	You pay 30% after deductible		You pay 20% after deductible	You pay 30% after deductible
Non-Preferred Brand	You pay 50% after deductible		You pay 30% after deductible	You pay 40% after deductible
Specialty	You pay 30% after deductible		Not Covered by Plan *	Not Covered by Plan *



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