



2025-2026 **BENEFITS GUIDE**



Table of Contents

Benefits Website	4
Basic Insurance Terms	5
Get Started With the Aetna Secure Member Website	6
Aetna Health App	6
Wellness	7
Teledoc	8
Aetna Urgent Care	9
Where to go for Diagnostic Procedures	9
Informed Health® Line	10
MinuteClinic®	10
CVS ExtraCare Plus®	11
CVS® HealthHUB™	11
Preventive Care Screenings	12
Preferred Plan Comparison	14
Prescription Drug Plan	16
CVS Caremark Mail Service Pharmacy for Home Delivery	17
Benefit Basics	18
Contacts	19

The Bucks and Montgomery County Schools Healthcare Consortium provides a wide variety of plans and programs to its participating school entities and their members. The plans provide options to meet the needs of individual employees and their families.

For example, medical plans as well as prescription drug benefits vary by district. Your benefit coordinator or HR representative will provide you with those important details. There are other plans and programs that might be offered by your individual district.

The BMCS website has information to help you contact the person who helps administer your benefits program.

Visit <https://bmshc.org/contacts> or scan the QR code to go directly to that webpage.



Welcome to Your *2025-2026 Benefits Guide!*

On behalf of the Bucks and Montgomery County Schools Healthcare Consortium, thank you for the important work that you do in our public schools. We value your important contributions to our students, communities, and colleagues.

Please use this guide as a roadmap of support for using the medical and prescription drug benefits available through our consortium. It will help you understand common healthcare vocabulary, the designs of each of our four medical plans, and a host of other supports to help you navigate the complexities of our healthcare system and receive excellent care.

If you have questions about any of the features of our plans or services, please utilize the telephone numbers listed in this guide or contact a member of your HR department.

*Best wishes for a safe
and healthy school year!*

Rebecca Roberts-Malamis and Bill Senavaitis

*Chair and Vice Chair of the Bucks and Montgomery County
Schools Healthcare Consortium*



Bucks and Montgomery County Schools Healthcare Consortium appreciates your commitment to our success. We're equally committed to providing you with competitive, affordable health and wellness benefits to help you take care of yourself and your family.

Please read this guide carefully. It summarizes your plan options and provides helpful tips for getting the most value from your benefit plans. We understand that you may have questions about annual enrollment, and we'll do our best to help you understand your options and guide you through the process.

This guide is not your only resource, of course. Anytime you have questions about benefits or the enrollment process, you can contact your human resources representative. Although this guide contains an overview of benefits, for complete information about the plans available to you, please see the summary plan description (SPD).



Benefits Website

 www.bmshc.org

We've gathered the most commonly requested BMCS member resources and documents all in one convenient location. Our site contains detailed information on our medical plans and carrier programs that are available to all of our members.

If you don't find what you're looking for, please reach out to your plan administrator.

Stay up to date with all your benefits information with access at your fingertips, 24/7.

Visit www.bmshc.org for more information on BMCS, our benefit plans, and program flyers.



Or scan the QR code with your mobile device.



Basic Terms

Coinsurance

Coinsurance is your share of the costs of a covered healthcare service, calculated as a percent (for example, 20%) of the allowed amount for the service. Your coinsurance will begin after you have met your deductible. For example, if the health plan's allowed amount for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health plan pays the rest of the allowed amount.

Copay

A copay is a fixed dollar amount you pay for a healthcare service. The amount can vary by the type of service. Your copays will not count toward your deductible but will count toward your out-of-pocket maximum.

Deductible

The deductible is the amount you owe for covered healthcare services before your plan begins to pay benefits. For example, if your deductible is \$1,100, your plan won't pay anything until you've met your \$1,100 deductible for covered healthcare services subject to the deductible. Preventive care is not subject to the deductible as it is covered 100% by any medical plan option.

Explanation of Benefits (EOB)

An EOB is a statement from the insurance company showing how claims were processed. The EOB tells you what portion of the claim was paid to the healthcare provider and what portion of the payment, if any, you are responsible for.

In-Network VS. Out-Of-Network

A network is composed of all contracted providers. Networks request providers to participate in their network, and in return, providers agree to offer discounted services to their patients. If you pick an out-of-network provider, your costs will be higher because you will not receive the discounts the in-network providers offer.

Additionally, you will incur higher deductibles and out-of-pocket maximums when you select to receive services from an Out-of-Network provider."

Out-Of-Pocket Maximum

The out-of-pocket maximum is designed to protect you in the event of a catastrophic illness or injury. Your out-of-pocket maximum includes your deductible, coinsurance and copays that come out of your pocket. After you have paid the specified out-of-pocket amount during a policy year, the plan pays the remaining covered services at 100%.

Preventive Care

Routine healthcare services can minimize the risk of certain illnesses or chronic conditions. Examples of preventive care services include but are not limited to physical exams, mammograms, flu vaccines, prostate tests and smoking cessation.

Reasonable and Customary

The amount of money a health plan determines is the normal or acceptable range of charges for a specific health-related service or medical procedure. If your healthcare provider submits higher charges than what the health plan considers normal or acceptable, you may have to pay the difference.



Get Started With the Aetna Secure Member Website

Your secure member website saves you time, and helps you make more informed decisions about your health. And, you can view your most important information at-a-glance. You can:

Find the right doctor

- See what you owe
- Know your plan
- Get valuable information
- Know costs before you go
- Get healthier

Logging in is fast, easy and convenient

You may use your Aetna member ID card or your social security number to register.

STEP 1: Go to aetna.com

STEP 2: Click on the Log In/Register link

STEP 3: Follow the simple prompts

Questions?

Call Aetna Member Services at
1-(800) 293-3536

Aetna Health App

You're in charge

Staying healthy is important. So is keeping track of your benefits. But with everything else you have going on, managing it all can be a challenge.

The Aetna Health app can help. The app is your all-in-one resource for the information you need, from finding a doctor and comparing costs to paying claims and viewing your ID card.

See for yourself how the Aetna Health app can make it easier to manage your benefits.

View benefits and pay claims for your whole family

- Search for providers, procedures and medications
- Locate an in-network urgent care facility
- Get cost estimates before you get care
- Track spending and progress toward meeting your deductible
- Access your member ID card whenever you need it



**Download the
Aetna Health App**



Wellness

The following programs are included in the BMCS Health Care Consortium medical plans through Aetna. These resources will assist you in taking a more direct and active role in successfully managing your most important asset — *your health!*

NEW
for 2025!

Weight Management

A comprehensive weight management solution based off of a health assessment to provide recommended programs available to you. You may also choose a different program than the recommended program and switch anytime.

Mental Health

Mental/Emotional Health (AbleTo): Behavioral health program that provides support if you have experienced health conditions or life changes, such as infertility, health issues, postpartum depression, grief, loss, and many more.

Emotional Health (MindCheck): Online tools to help you manage your emotional health and factors like stress and anxiety.

Mindfulness (Headspace): Meditation made simple, your personal guide to mindfulness and a restful night's sleep.

Physical Wellness

Back & Joint Care (Hinge Health): Hinge Health is a digital exercise therapy program that can help relieve joint and muscle pain. Members receive real-time exercise therapy guidance virtually.

Fitness (HUSK): Find local gyms, virtual subscriptions, products, nutritionists, mental health and physical therapy at discounted rates. You must register, enter your insurance information and check your zip code if applicable for the discount.

Health Coaching (Journeys): A digital health coach who works with you based off your health assessment results to create a personalized journey for you to embark on at your own pace.

Preventive Care

Virtual (Informed HealthLine): 24-hour information line for your health questions and talk to a registered nurse anytime.

Virtual (Teladoc): Gives access to you 24 hours, 7 days a week to a U.S. board certified doctor and therapist through the convenience of phone, video or mobile app.

In-Person (CVS HealthHUB): Local health care destination that offers convenient and affordable care that you may need to help you feel your best.

Virtual In-Person (CVS MinuteClinic): Convenient and reliable care when you need it the most. The MinuteClinic is open every day, including evenings for both walk-in and scheduled appointments.

Preventive/Age Gender Appropriate Screenings: Preventive age/gender appropriate screenings often include annual physical and biometric screenings but are not limited to age-gender-specific screenings. Recommended screenings are based on your age and gender. These are often scheduled with your primary care provider.

Urgent Care

Urgent Care: An urgent, not life-threatening medical issue place to be seen when your primary care provider is unavailable, or you do not have a primary care provider established.

Cost Estimator: Gives access to cost-sharing liability for covered items or services.

Know Before You Go: A comparison of what is available to you through the benefits from virtual care to emergency room visits.

Cancer Support

Transform Oncology: Resources for your cancer journey. A cancer diagnosis is life changing. You probably have a million things on your mind as you navigate your treatment. Aetna® is here for you with the resources and support you may need to manage your care, understand your benefits, and locate the right providers.



Visit www.bmsmc.org/wellness or scan the QR code to learn more.



Scan here to view digital copy of your *Comprehensive Wellness Guide* to learn more.

Teladoc

Teladoc gives you access 24 hours, 7 days a week to a U.S. board-certified doctor and therapist through the convenience of phone, video or mobile app visits. It's an affordable option for quality medical care.

- Receive quality care via phone, video or mobile app
- Prompt treatment, talk to a doctor in minutes
- Prescriptions sent to the pharmacy of choice if medically necessary
- Teladoc is less expensive than the ER or urgent care
- Meet a Therapist 7 days a week and get support for anxiety, depression, stress, and more!

Cost Comparison

General Medicine Teladoc	ER
\$0	\$100

**Behavioral Health and Dermatological Teladoc apply the applicable specialist copay depending on the plan.*

With your consent, Teladoc is happy to provide information about your Teladoc visit to your primary care physician.

Get the care you need

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Pink Eye
- Respiratory infection
- Sinus problems
- Skin problems
- And more!

[Teladoc.com/aetna](https://teladoc.com/aetna)

(855) 835-2362



Aetna Urgent Care

Feeling fluish? Have a pounding headache? Hurt your back carrying the groceries? Don't spend more time and money than needed at the emergency room (ER). Consider visiting an urgent care center instead to help you feel better sooner.

Plenty of services

Urgent care centers offer care for serious medical matters that aren't life threatening. They also handle vaccinations and treat:

- Sprains and minor fractures
- Cuts that require stitches
- Bronchitis
- Lower back pain
- Headaches and more

Finding care near you is easy:

1. Log in or register at [aetna.com](#)

2. Click on "Find Care."

3. Select "Urgent Care."

4. Scroll down and select "Urgent Care Facilities."

Non-Emergency Services	Average ER Cost*	Average Urgent Care Cost*
Sprains	\$750 - \$1,000	\$125 - \$175
Flu	\$750 - \$1,000	\$125 - \$175
Minor Cuts	\$750 - \$1,000	\$125 - \$175
Migraines/tension headaches	\$750 - \$1,000	\$125 - \$175

* Average retail and ER pricing. Based on Aetna average claims costs. Data accessed April 2018. For illustrative purposes only. 1Urgent Care Locations, LLC. Urgent care center vs. emergency room. Available at: [urgentcarelocations.com/urgent-care-101/faq/urgent-care-center-vs-emergency-room](#). Accessed April 4, 2018.

Where to go for Diagnostic Procedures

Locate an in-network lab

Quest Diagnostics and LabCorp are Aetna's national preferred labs. These labs, along with their national and specialized affiliates, offer a wide range of testing services. Patients can get everything from routine blood tests to gene-based cardiology to molecular testing.

Stay in the network and pay less! You can save on out-of-pocket costs when you get lab work done in Aetna's network. Below is an example of how in-network costs compare to out-of-network costs using the Open Choice 1 plan:*

	Quest Diagnostics and LabCorp	Out-of-Network
Lab test price	\$30	\$300
Patient's Coinsurance	0%	30%
Patent Pays	\$0	\$90

You can see a complete list on ***Aetna.com*** by using our provider search tool.

*These prices reflect an example of a routine lab test.

Informed Health[®] Line

A 24-hour information line for your health questions, talk to a registered nurse anytime.

With the Informed Health Line, you can speak to a registered nurse about health issues — whenever you need to.

Plus — it's toll-free, you can call as many times as you need (at no extra cost), and your covered family members can use it, too!

You can:

- Get information on a wide range of health and wellness topics
- Make better health care decisions
- Find out more about a medical test or procedure
- Get help preparing for a visit to your doctor
- Receive emails with links to videos that relate to your question or topic



MinuteClinic[®]

The time for a solution that gives people more options to take control of their health and get the care they need — on their terms — is now.

Care that's convenient and reliable

MinuteClinic[®] makes it easy for you to get the care you need, when and where you need it. You can get access to all covered MinuteClinic services at no cost — not just preventive care.

- MinuteClinic is a walk-in clinic inside select CVS Pharmacy[®] and Target stores and is the largest provider of retail health care in the United States — with over 1,100 locations in 33 states and the District of Columbia.
- Open every day, including evenings. MinuteClinic offers both walk-in and scheduled appointment options.
- MinuteClinic health care providers treat a variety of illnesses, injuries and conditions. They can also write prescriptions, when medically appropriate.



CVS.com/minuteclinic

CVS ExtraCare Plus®

Get membership perks you'll use everyday

The CVS ExtraCare Plus membership program can help you and your family stay healthy, save money and ultimately stress less. Benefits like no-cost delivery and discounts on thousands of your favorite CVS Health brand products offer convenient ways to keep your health goals on track — and give you fewer errands to run.

Take advantage of these benefits

24/7 access to CVS pharmacists

- Through our Pharmacist Helpline, get medication support quickly.

Rx delivery on your schedule

- Get the medications you need, with no-cost Rx delivery on prescriptions.

Discounts on your favorite items

- Receive 20% savings on thousands of CVS Health® brand products.* Plus, get eligible items delivered to your door with no-cost same-day delivery, and no-cost shipping (\$10 minimum order).

\$10 Monthly Bonus Reward

Easily use your bonus reward in-store or online — it's automatically added to your ExtraCare® card to thank you for being a member.



Activate your CVS ExtraCare Plus benefit: Log in to your Aetna HealthSM app OR your Aetna® member website.

CVS® HealthHUB™

CVS® HealthHUB™ is a local health care destination that offers convenient and affordable care that you may need to help you feel your best.

Care that's convenient and reliable

- Expanded health services that can go beyond everyday care to help assist with chronic conditions, such as diabetes or sleep apnea.
- A professional care team of providers that work together to support your total health and help coordinate care and services you may need.
- Extra assistance from the pharmacist who can talk with you about screenings, support tools and services you may need to get on the path to better health.
- A care concierge who is there to guide you every step of the way and help you navigate the services and resources offered within a CVS HealthHUB location.
- And, a greater selection of health and wellness products— with everything from self-care products to durable medical equipment and supplies, to help support your total health.



CVS.com/healthHUB

Preventive Care Screenings



WOMEN - Age Appropriate Health Screenings

AGE	TIMING	SCREENING
20s & 30s	Once a month	<ul style="list-style-type: none"> Breast self-exam Self-check skin cancer screening
	Once a year	<ul style="list-style-type: none"> Blood pressure screening Height, weight, body mass index (BMI) Breast self-exam Cardiovascular evaluation Comprehensive physical exam Depression screening
	Every 2-5 years *	<ul style="list-style-type: none"> Blood sugar test Eye exam Human papilloma virus (HPV) test Pap test
	Every 5 years	<ul style="list-style-type: none"> Cholesterol check
	As needed *	<ul style="list-style-type: none"> Sexually transmitted diseases (STD) tests
40s	Once a month	<ul style="list-style-type: none"> Breast self-exam Self-check skin cancer screening
	Once a year	<ul style="list-style-type: none"> Mammogram Full-body skin exams Blood pressure screening Height, weight, body mass index (BMI) Breast self-exam Cardiovascular evaluation Comprehensive physical exam Depression screening
	Every 2-5 years *	<ul style="list-style-type: none"> Blood sugar test Eye exam Human papilloma virus (HPV) test Pap test Cholesterol check
	Every 10 years	<ul style="list-style-type: none"> Colon cancer screening
	As needed *	<ul style="list-style-type: none"> Sexually transmitted diseases (STD) tests
50s	Once a month	<ul style="list-style-type: none"> Breast self-exam Self-check skin cancer screening
	Once a year	<ul style="list-style-type: none"> Mammogram Full-body skin exams Blood pressure screening Height, weight, body mass index (BMI) Breast self-exam Cardiovascular evaluation Comprehensive physical exam Depression screening
	Every 2-5 years *	<ul style="list-style-type: none"> Blood sugar test Eye exam Human papilloma virus (HPV) test Pap test Cholesterol check
	Every 5 years	<ul style="list-style-type: none"> Bone density test Thyroid panel
	Every 10 years	<ul style="list-style-type: none"> Colon cancer screening Cardiac calcium scoring Hearing test
	As needed *	<ul style="list-style-type: none"> Sexually transmitted diseases (STD) tests Low-dose lung CT scan
60s	Once/month	<ul style="list-style-type: none"> Breast self-exam Self-check skin cancer screening
	Once/year	<ul style="list-style-type: none"> Mammogram Full-body skin exams Blood pressure screening Height, weight, body mass index (BMI) Breast self-exam Cardiovascular evaluation Comprehensive physical exam Depression screening Dementia and Alzheimer's screening
	Every 2-5 years *	<ul style="list-style-type: none"> Blood sugar test Eye exam Human papilloma virus (HPV) test Pap test Cholesterol check
	Every 5 years	<ul style="list-style-type: none"> Bone density test Thyroid panel
	Every 10 years	<ul style="list-style-type: none"> Colon cancer screening Cardiac calcium scoring Hearing test
	As needed *	<ul style="list-style-type: none"> Sexually transmitted diseases (STD) tests Low-dose lung CT scan

* And/or as recommended by your primary care provider Source: <https://www.uhhospitals.org/services/primary-care/routine-care/your-guide-to-health-screenings-by-age> (12-01-2024)

Early Detection Saves Lives— Schedule Your Screening Today

Preventive Care Screenings



MEN - Age Appropriate Health Screenings

AGE	TIMING	SCREENING	
20s & 30s	Once a month	• Self-check skin cancer screening	• Testicular self-exam
	Once a year	• Blood pressure screening • Height, weight, body mass index (BMI) • Cardiovascular evaluation	• Comprehensive physical exam • Depression screening • Testicular cancer screening
	Every 2-5 years *	• Blood sugar test	• Eye exam
	Every 5 years	• Cholesterol check	
	As needed *	• Sexually transmitted diseases (STD) tests	• Fertility testing
40s	Once a month	• Self-check skin cancer screening	• Testicular self-exam
	Once a year	• Full-body skin exam • Blood pressure screening • Height, weight, body mass index (BMI) • Cardiovascular evaluation	• Comprehensive physical exam • Depression screening • Testicular cancer screening
	Every 2-5 years *	• Cholesterol check • Blood sugar test	• Eye exam
	Every 10 years	• Colon cancer screening	
	As needed *	• Sexually transmitted diseases (STD) tests	• Fertility testing
50s	Once a month	• Self-check skin cancer screening	• Testicular self-exam
	Once a year	• Cholesterol check • Full-body skin exam • Blood pressure screening • Height, weight, body mass index (BMI)	• Cardiovascular evaluation • Comprehensive physical exam • Depression screening • Testicular cancer screening
	Every 2-5 years *	• Blood sugar test	• Eye exam
	Every 10 years	• Colon cancer screening • Cardiac calcium scoring	• Hearing test
	As needed *	• Sexually transmitted diseases (STD) tests • Fertility testing • Bone density test	• Low-dose lung CT scan • Prostate specific antigen (PSA) screening
60s	Once a month	• Self-check skin cancer screening	• Testicular self-exam
	Once a year	• Dementia and Alzheimer's screening • Cholesterol check • Full-body skin exam • Blood pressure screening • Height, weight, body mass index (BMI)	• Cardiovascular evaluation • Comprehensive physical exam • Depression screening • Testicular cancer screening
	Every 2-5 years *	• Blood sugar test	• Eye exam
	Every 10 years	• Colon cancer screening • Cardiac calcium scoring	• Hearing test
	As needed *	• Sexually transmitted diseases (STD) tests • Fertility testing • Bone density test • Low-dose lung CT scan	• Prostate specific antigen (PSA) screening • Abdominal aortic aneurysm (AAA)

* And/or as recommended by your primary care provider Source: <https://www.uhhospitals.org/services/primary-care/routine-care/your-guide-to-health-screenings-by-age> (12-01-2024)

Preventive care screenings are often performed based on your age and gender. These can usually be performed as part of your annual physical. However, these are general recommendations only. It is always best to check with your healthcare provider so services can be tailored to your individual needs.

Preferred Plan Comparison



	BMCS Open Choice• - 1		BMCS Open Choice• - 2	
	In network	Out of network	In network	Out of network
Referrals required	No	No	No	No
Deductible				
Individual	\$0	\$600	\$0	\$1,000
Family	\$0	\$1,200	\$0	\$3,000
After deductible, plan pays	100%	70%	100%	70%
Out-of-pocket maximum				
Individual	\$3,500	\$7,500	\$5,000	\$7,500
Family	\$7,000	\$15,000	\$10,000	\$15,000
Lifetime maximum	Unlimited	Unlimited	Unlimited	Unlimited
Doctor's office visits				
Primary Care Services	\$10 copayment	70%, after deductible	\$20 copayment	70%, after deductible
Specialist Services	\$20 copayment	70%, after deductible	\$40 copayment	70%, after deductible
Preventive Care	100%	70%, no deductible	100%	70%, no deductible
Routine Eye Exam	Not covered	Not covered	Not covered	Not covered
Hospital services				
Inpatient Hospital Services	\$75 per day (Max of 5 copayments per admission)	70%, after deductible	\$350 copayment per admission	70%, after deductible
Outpatient Surgery	\$75 copayment	70%, after deductible	\$200 copayment	70%, after deductible
Emergency Room (copayment waived if admitted)	\$100 copayment	\$100 copayment	\$100 copayment	\$100 copayment
Urgent Care/Non-Urgent Use of Urgent Care	\$28 copayment	70%, after deductible	\$28 copayment	70%, after deductible
Ambulance				
Emergency	100%	100%	100%	100%
Diagnostic procedures				
Outpatient Laboratory/ Pathology	100%	70%, after deductible	100%	70%, after deductible
Outpatient Radiology (routine radiology/diagnostic MRI/MRA, CT /CTA scan, PET scan)	\$20 copayment	70%, after deductible	\$40 copayment	70%, after deductible



To view the full plan comparison, please visit www.bmsmc.org.

BMCS Open Choice• - 3		BMCS POS	
In network	Out of network	In network	Out of network
No	No	Yes	No
\$1,100	\$1,100	\$0	\$3,000
\$2,200	\$3,300	\$0	\$3,000
100%	50%	100%	50%
\$3,500	\$10,000	\$3,500	\$10,000
\$7,000	\$30,000	\$7,000	\$30,000
Unlimited	Unlimited	Unlimited	Unlimited
\$25 copayment	50%, after deductible	\$15 copayment	50%, after deductible
\$50 copayment	50%, after deductible	\$35 copayment	50%, after deductible
100%	50%, no deductible	100%	50%, no deductible
Not covered	Not covered	\$25 copayment (once every 24 months)	Not covered
\$300 copayment per admission	50%, after deductible	\$250 copayment per admission	50%, after deductible
\$200 copayment	50%, after deductible	\$100 copayment	50%, after deductible
\$100 copayment	\$100 copayment	\$100 copayment	\$100 copayment
\$50 copayment	50%, after deductible	\$24 copayment	50%, after deductible
100%	100%	100%	100%
100%, after deductible	50%, after deductible	100%	50%, after deductible
100%, after deductible	50%, after deductible	100%	50%, after deductible

Prescription Drug Plan

! Update for 2025-2026

Please refer to your school's benefit coordinator or HR rep for prescription drug plan details such as copays.

Effective July 1, 2025, your prescription drug plan is now administered through CVS Caremark in conjunction with National CooperativeRx. There is a dedicated Customer Care team available 24 hours a day, seven days a week that can be reached at 1-866-818-6911.

The CVS Caremark suite of digital tools includes an online member portal and mobile app, giving you a personal advisor for your prescriptions in the palm of your hand.

- Find a pharmacy
- View your claims history
- Download a digital pharmacy card
- View which drugs are covered under your plan
- Track how much money you have paid towards your out-of-pocket obligations

REMEMBER:

The new CVS Caremark® pharmacy benefits do not start until July 1. In the meantime, you should continue to access your pharmacy services through Capital Rx and, for mail order, Optum.

To Access The Member Website



Create your account and register at: [Caremark.com/StartNow](https://www.caremark.com/StartNow).

1. Using a member ID
2. Without a member ID

CVS Caremark Mobile App - Effective July 1st

The CVS Caremark Pharmacy Benefits mobile app is a modern and user-friendly experience. It is designed to empower members to understand and manage their pharmacy benefits.

- Allows members to access the CVS Caremark Formulary and other helpful tools
- Uses the latest security authentication with the ability to enable push notifications
- Keeps members informed of updated drug pricing and possible drug alternatives



Search for the lowest cost drug at surrounding pharmacies



Find a pharmacy



View your claims history



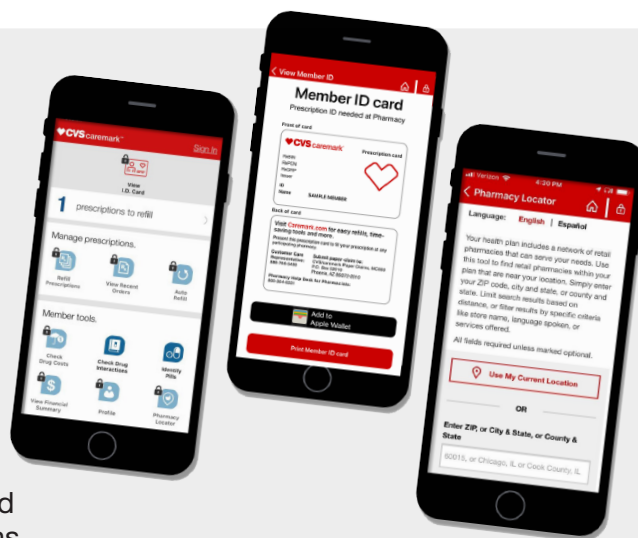
Download a digital pharmacy card



View which drugs are covered under your plan



Track how much money you have paid towards your out-of-pocket obligations



CVS Caremark Mail Service Pharmacy for Home Delivery

CVS Caremark® Mail Service Pharmacy can deliver 90-day supplies of medications you take regularly to your door. For even more convenience, start automatic refills, too.

Phone:

Call (866) 239-4543

CVS Caremark Mail Service Pharmacy telephone support is available 24 hours a day, 7 days a week.

E-prescribe:

Have your prescriber e-prescribe to CVS Caremark Mail Service Pharmacy.

Mail:

Complete an CVS Caremark Mail Service Pharmacy prescription order form and mail with your paper prescription to:

CVS Caremark Mail Service Pharmacy
PO Box 659541
San Antonio, TX 78265-9541

Fax:

Have your doctor fax your prescription to CVS Caremark Mail Service Pharmacy.

Fax (800) 378 0323



Learn more at
Caremark.com/Rxdelivery



View additional CVS Caremark resources by visiting,
www.bmsmc.org/pharmacy

Benefit Basics

Benefit Basics is a new program from The Bucks and Montgomery County Schools (BMCS) Health Care Consortium.

Twice a month, your institution's plan administrator will send out a Benefit Basics email. This email will have important tips on health, wellness, or a specific member benefit.

We want to keep you informed about the wide range of resources available.

Your well-being is a priority for the Bucks and Montgomery County School's Healthcare Consortium.



To view past Benefit Basics communications, visit www.bmsmc.org/benefitbasics or scan the QR code with your mobile device.



Keep an eye out for emails like this with important information about your BMCS benefits!

BUCKS AND MONTGOMERY COUNTY SCHOOLS HEALTH CARE CONSORTIUM
BENEFIT BASICS
Take advantage of what we have to offer.

aetna **Teladoc HEALTH**

Your care. Your way.
Access your Teladoc Health benefits anytime.

As a member enrolled in the Bucks and Montgomery County Schools (BMCS) Health Care Consortium, you have access to Teladoc Health.

Teladoc Health connects you with care, at your convenience and an affordable cost. You'll find what you need to get well—like 24/7 care—alongside primary care, therapy and programs proven to keep you well.

Your video and phone visits have no time limit. So, instead of 15 minutes, you might spend an hour talking about your health and planning the next steps together with a medical professional.

There is no copay when you use Teladoc Health to access general medical care for non-emergency conditions such as flu, sinus infections, sore throats, allergies, stomach bugs or COVID-19 advice (copays apply for virtual visits for mental health and dermatology).

Set up your account today.

Visit Teladoc.com/Aetna or call 1-855-TELADOC (835-2362).

For more information visit the [Member Resources](#) section of the Bucks and Montgomery County Schools (BMCS) Health Care Consortium website and go to the Teladoc section.

BMCS Health Care Consortium
The Bucks and Montgomery County Schools Health Care Consortium
www.bmsmc.org

Benefit Basics is intended for distribution to members enrolled in the Bucks and Montgomery County Schools Health Care Consortium insurance plan. The Summary Plan Description available at the website provides full details of all coverage including exceptions and limitations.

Contacts

Benefit Type	Carrier	Website	Phone Number
Medical	Aetna	aetna.com	Member Services: (800) 293-3536 Info Health Line: (800) 556-1555
Prescription	CVS Caremark	caremark.com	Customer Care: (866) 818-6911
Telehealth	Teladoc	Teladoc.com/aetna	Customer Service: (855) 835-2362

This summary of benefits is not intended to be a complete description of Bucks and Montgomery County Schools Healthcare Consortium's insurance benefit plans.

Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document rather than by this or any other summary of the insurance benefits provided by the plan.

In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Bucks and Montgomery County Schools Healthcare Consortium maintains its benefit plans on an ongoing basis, Bucks and Montgomery County Schools Healthcare Consortium reserves the right to terminate or amend each plan in its entirety or in any part at any time.

Please contact the HR department of your participating entity with questions regarding the information provided in this overview.

The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.





C/O AMCA Systems
101 Bradford Rd.
Suite 340
Wexford, PA 15090

View the
BMCS Health
Care Consortium

2025 BENEFITS GUIDE