



## HEALTH PLAN FOR UNC CHAPEL HILL STUDENTS | 2019-2020





## A HEALTHY PLAN

for a successful future

The UNC System has selected Student Blue to provide you with quality health insurance coverage from Blue Cross and Blue Shield of North Carolina (Blue Cross NC). With Student Blue, you have low out-of-pocket costs and worldwide coverage.<sup>1</sup>

All eligible students enrolled in the UNC System Colleges and Universities are required to have health insurance coverage. The UNC System endorses a cost-effective Student Health Insurance Plan (SHIP) that covers additional health care expenses not included in the Student Health Fee. This plan is administered by Blue Cross NC. Each semester the Student Health Insurance Premium is added to all eligible students' University accounts. Eligible students must pay the premium and enroll, or complete the online waiver process with their own creditable insurance coverage before the deadline each semester. Once the waiver is verified and approved, the premium will be credited to the student's account.

### Am I eligible for the UNC system plan?

Please refer to the plan's Benefit Booklet to review eligibility criteria. The Benefit Booklet can be found at [StudentBlueNC.com/UNCCH/benefits](http://StudentBlueNC.com/UNCCH/benefits).

### Deadlines for Waive/Enroll/Renew

Fall Semester 09/10/19

Spring Semester 01/31/20

2019-2020 MEDICAL PLAN		
MEDICAL PLAN RATES <sup>2</sup> Billed on a semester basis	Fall Semester Effective Dates 08/01/19 – 12/31/19	Spring Semester Effective Dates 01/01/20 – 07/31/20
Student	\$1,313.50	\$1,313.50

<sup>2</sup>A portion of the Student Health Insurance premium rate is retained by UNC Chapel Hill to pay for administrative costs.



# BENEFIT highlights



StudentBlue™	If you visit your Student Health Center or doctor in the Student Blue network: (In-network provider)	If you visit a doctor NOT in the Student Blue network: (Out-of-network provider)
All dollar amounts and percentages are what you, as a plan member, would pay.		
<b>Policy year deductible</b>	\$0 at Student Health Center \$500 per insured member in-network	\$500 per insured member
<b>Policy year out of pocket maximum</b>	\$0 at Student Health Center \$4,000 Individual	\$8,000 Individual
<b>Office visits</b> Includes telehealth <sup>3</sup> , office surgery, X-rays and labs	<b>Student Health Center:</b> No Charge <b>Primary care provider and/or Specialist:</b> \$25 copayment, then 20% after deductible	<b>Primary care provider and/or Specialist:</b> \$25 copayment, then 30% after deductible
<b>Preventive care</b> Routine examinations, well-child care, immunizations, gynecological exams, cervical cancer screening, ovarian cancer screening, screening mammograms, colorectal screening, bone mass measurement, newborn hearing screening and prostate specific antigen tests (PSAs).	No Charge at both Student Health Center and in-network	30% after deductible
<b>Urgent care centers and emergency room</b> Urgent care centers (Copayment waived if referred to ER) Emergency room visit (Inpatient hospital benefits apply if admitted. If held for observation, outpatient benefits apply. See "Inpatient and Outpatient Hospital Services.") Ambulance service	<b>Urgent care centers:</b> \$75 copayment, then 20% after deductible <b>Emergency room:</b> \$400 copayment, then 20% after deductible <b>Ambulance service:</b> 20% after deductible	<b>Urgent care centers:</b> \$75 copayment, then 20% after deductible <b>Emergency room:</b> \$400 copayment, then 20% after deductible <b>Ambulance service:</b> 20% after deductible
<b>Inpatient and outpatient hospital services</b>	20% after deductible	30% after deductible
<b>Prescription drugs</b> Up to 30 day supply. 31-60 day supply is two copayments and 61-90 day supply is three copayments. Infertility, Weight Loss, and Sexual Dysfunction Drugs not covered by the plan.	\$15 for all 30-day prescriptions at Student Health Center regardless of Tier <b>Tier 1:</b> \$30 copayment <b>Tier 2:</b> \$45 copayment <b>Tier 3:</b> \$60 copayment <b>Tier 4:</b> \$120 copayment	Copayment + charge over in-network allowed amount
<b>Mental health and substance abuse services</b> Office visits Inpatient/outpatient	<b>Office visits:</b> \$25 copayment, then 20% after deductible <b>Inpatient/outpatient:</b> 20% after deductible	<b>Office visits:</b> \$25 copayment, then 30% after deductible <b>Inpatient/outpatient:</b> 30% after deductible
<b>Vision care</b> Preventive eye exam Diagnostic eye exam Lens and frame coverage. (Reimbursement up to the benefit period maximum of \$200 for prescribed glasses – lenses and frames – and hard, soft or disposable contact lenses.)	<b>Preventive eye exam:</b> No Charge <b>Diagnostic eye exam:</b> \$25 copayment, 20% after deductible	<b>Diagnostic eye exam:</b> \$25 copayment, 30% after deductible
<b>Other services</b> Skilled Nursing Facility (60 days per Benefit Period), Home Health Care, Durable Medical Equipment and Hospice, Maternity (Maternity Delivery includes Prenatal and Post-Delivery Care), Transplants	20% after deductible	30% after deductible



# ENROLL or waive coverage today!

## Fall 2019 open enrollment period ends 09/10/19

All students eligible for the UNC System Hard Waiver Plan MUST enroll or waive coverage during the open enrollment period. Students who are enrolled by default will receive a policy with limited abortion benefits. In order to select additional benefits, you must actively enroll or call the number on your ID to change policies prior to receiving services. No applications posted after September 10 will be accepted without a qualifying event. Please refer to the online Student Blue benefit booklet for a complete list of qualifying events, as well as eligibility requirements and benefits.

## Deadlines for Waive/Enroll/Renew

**Fall Semester** 09/10/19

**Spring Semester** 01/31/20



**CALL** 1-888-351-8283



**VISIT** [StudentBlueNC.com/UNCCH](http://StudentBlueNC.com/UNCCH)



**CONNECT** @BCBSNCStudent

Deductibles, coinsurance, limitations and exclusions apply to this coverage. Further details of coverage, limitations and exclusions, and terms under which the policy can be continued in force will be provided in your benefit booklet. StdGrp 4/18.

### What is Not Covered

The following are summaries of some of the coverage restrictions. A full explanation and listing of restrictions will be found in your benefit booklet, which can be found at [StudentBlueNC.com/UNCCH](http://StudentBlueNC.com/UNCCH). Your health benefit plan does not cover services, supplies, drugs or charges that are:

- + Not medically necessary
- + For injury or illness resulting from an act of war
- + For personal hygiene and convenience items
- + For inpatient admissions that are primarily for diagnostic studies
- + For palliative or cosmetic foot care
- + For investigative or experimental purposes
- + For cosmetic services or cosmetic surgery including treatment of or surgery for gynecomastia
- + For custodial care, domiciliary care or rest cures
- + For reversal of sterilization
- + For treatment of sexual dysfunction not related to organic disease
- + For self-injectable drugs in the provider's office

1 Members are covered in more than 200 countries and territories around the world through Blue Cross Blue Shield Global® Core. Blue Cross and Blue Shield Association. Online: [www.bcbsglobalcore.com](http://www.bcbsglobalcore.com) (accessed April 2018).

2 Premium due for the mandatory hard waiver plan must be paid through the student's UNC System school account.

3 MDLIVE® telehealth services include evaluation, management and consultation services for nonemergency medical issues with a Provider via an interactive audio/video telecommunications system. See MDLIVE in "Who to Contact?" to access a Doctor who can diagnose and recommend treatment. Telehealth services from MDLIVE will be subject to your PCP copayment and/or coinsurance and any applicable deductible. You can also check with your Provider to see if telehealth services are available; your benefit will depend on the type of Provider supplying these services.

MDLIVE is an independent company that is solely responsible for the telehealth services it is providing. MDLIVE does not offer Blue Cross or Blue Shield products or services. Availability depends on location at the time of consultation. Telehealth services are subject to the terms and conditions of the member's health plan, including benefits, limitations and exclusions. Telehealth services are not a substitute for emergency care. MDLIVE does not replace your primary care doctor and is not an insurance product. MDLIVE may not be available in certain states and is subject to state regulations. MDLIVE does not prescribe DEA-controlled substances and may not prescribe non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. MDLIVE does not guarantee patients will receive a prescription. Health care professionals using the platform have the right to deny care if, based on professional judgment, a case is inappropriate for telehealth or for misuse of services. MDLIVE and the MDLIVE logo are registered trademarks of MDLIVE, Inc. and may not be used without written permission. For complete terms of use, visit <https://welcome.mdlive.com/terms-of-use>.

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