The Texas A&M University System
FAQs 2015-2016

How do I know if I am eligible for the Student Health Insurance Plan?
ANY ENROLLED Texas A&M University System student taking at least six (6) credit hours of classes is eligible to enroll in this insurance plan. Students who are enrolled in special classes and take less than six (6) credit/contact hours of classwork will be determined eligible for this Student Health Insurance Plan if the reduced coursework meets the criteria for the completion of a degree plan or international program as defined and approved by The Texas A&M University System.

INTERNATIONAL STUDENTS (those who are not United States citizens or permanent residents of the United States) ARE REQUIRED to maintain approved health insurance coverage continuously while enrolled and attending a Texas A&M System institution, unless the student provides proof of coverage that meets the Texas A&M University System waiver requirements.

All registered and enrolled Texas A&M University System GRADUATE STUDENTS employed by The System are eligible to enroll in this insurance plan (no minimum hour requirement).

What is my Policy number?
Your Policy number is located on your plan brochure and ID card. The Student Health Insurance Policy number is 115183 for Medical.

Does this plan meet the new Health Care Reform requirements?
This Student Health Insurance Plan meets the Final Rules related to Student Health Insurance coverage as defined by the U.S. Department of Health and Human Services and the Centers for Medicare and Medicaid Services which were published on March 16, 2012.

What does the insurance cover?
The Student Health Insurance Plan covers Injury and Sickness. Some of the benefits include but are not limited to inpatient hospitalization, outpatient doctor’s visits, X-rays, laboratory charges, surgery and emergency care. There are limitations and maximums that may apply. Please refer to the “Schedule of Benefits” section in the Student Health Insurance Plan brochure. This will provide specific details regarding your Policy.
How do I update my contact information?
It is very important to make sure that your address, phone number, and email address on file at the school are current and accurate. If not, ID cards, explanation of benefits and other notifications about your student health insurance plan may not get to you. If you have moved or your contact information has changed, please make sure you update your contact information with your school. Additionally, please notify us at support@ahpcare.com so we can update our records as well. Please include “Contact information update” in the subject line and your first and last name, and student ID as well your new contact information in the email message.

How do I get an ID card?
After your enrollment, you should receive an ID card in a few weeks. If you lose your card, you can download a temporary ID card by visiting tamus.myahpcare.com and clicking on your campus. You can also email a request for a replacement card at info@ahpcare.com or call Academic HealthPlans at (855) 624-7911.

Can I go to any Doctor?
The Student Health Insurance Plan uses Blue Cross and Blue Shield of Texas BlueChoice® PPO Network for its Preferred Provider Organization (PPO) Network. The network consist of facilities and Doctors who have joined together to offer their services at reduced rates. Expenses may be less in the PPO Network than charges from Non-Preferred Providers. For a list of Doctors please go to tamus.myahpcare.com and click on your campus.

Where do I get a claim form?
Claims forms are not required.

How do I file a claim?
Submit all prescription drug receipts (for providers outside of the Student Health Center pharmacy and those contracting with Prime Therapeutics), medical and Hospital bills incurred to Blue Cross and Blue Shield of Texas, P.O. Box 660044, Dallas, TX 75266 for processing, within 90 days of treatment, or as soon as reasonably possible. The claim procedure is listed on the back of your ID card.

Does this Policy pay all medical bills in full?
Covered benefits for the Policy year are payable at 80% (Network Provider) or 60% (Out of Network), unless otherwise specified in the Policy, up to the Policy maximum. There are specific benefit limitations and exclusions on the Policy as well. Please go to tamus.myahpcare.com and click on your campus to review the brochure for more details.

If I have questions, who should I call?
If you have questions regarding enrollment and premium, please call Academic HealthPlans at (855) 624-7911. For claims and benefits, please call Blue Cross and Blue Shield of Texas at (855) 267-0214.