



We are pleased to bring you the 2017-2018 Lone Star College System Student Health Insurance Plan

Underwritten by Blue Cross and Blue Shield of Texas (BCBSTX)

This plan meets or exceeds a Gold metal level of coverage.

- Affordable, quality coverage compatible with the Affordable Care Act
- Academic Emergency Services (AES)*
- Covers you at school, at home and while traveling abroad

Who can enroll?

Domestic Students

All registered domestic students taking six (6) or more credit hours are eligible to enroll in the LSCS Student Health Insurance Plan (SHIP) on a voluntary basis.

Payment for the SHIP must be made directly to Academic HealthPlans. Enrollment in the voluntary SHIP may be either annual or by semester. If the student purchases the SHIP on a per semester basis, there is no automatic reenrollment.

The student and their dependent(s) must re-enroll for each semester by the semester deadline. Please see side two of this flier for important dates.

To view rates and enrollment information, please go to **lonestar.myahpcare.com**.

For additional information, go to **lonestar.myahpcare.com** or call **855-825-3980**.

* Academic Emergency Services (AES) is a global emergency services product. These services are provided by a separate and independent company from AES or Academic HealthPlans. AES provides medical, security and natural disaster evacuation services, repatriation of remains, emergency medical and travel assistance, travel information and other services for Academic HealthPlans.

AcademicBlue is offered by 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.

Academic HealthPlans, Inc. (AHP) is a separate company that provides program management and administrative services for the student health plans of Blue Cross and Blue Shield of Texas.

- Access to a broad Participating Provider Option (PPO) Network from BCBSTX
- Access to multilingual 24/7 Nurseline
- Discounts on vision, fitness and much more

You get online access to:

- View and download complete plan description
- Find provider and pharmacy information
- Download eligibility/enrollment information
- Download a temporary ID card
- Customer service, claims and benefit information



Lone Star College System 2017–2018 Plan Highlights^{1,2}

Benefit Maximum & Deductibles					
	Network Provider	Out-of-Network Provider			
Benefit Maximum	Unlimited	Unlimited			
Deductible (Individual/Family)	\$350/\$1,050	\$700/\$2,100			
Out-of-Pocket Maximum (Individual/Family)	\$6,850/\$13,700	700 \$13,700/\$27,400			
Benefit Coverage					
Deductible applies unless noted below:	Network Provider	Out-of-Network Provider			
Hospital Expenses	80%	60%			
Surgical Expenses	80%	60%			
Doctor's Visits	100% after: \$35 primary care physician copayment per visit; \$35 specialist copayment per visit (deductible waived)	60%			
Emergency Care and Accidental Injury Facility Services – Copayment is waived if the insured is admitted, inpatient hospital expenses will apply Physician Services	80% after \$150 copayment (deductible waived) 80%				
Diagnostic X-Rays & Laboratory Procedures	80% 60%				
Prescription Drugs Per 30-day Retail Supply (deductible waived) **Copayment plus the cost difference between the brand-name drug or supplies per prescription for which there is a generic drug or supply available.	 At pharmacies contracting with Prime Therapeutics³, 100% after: \$15 copayment for each generic drug \$30 copayment for each brand- name drug** \$40 copayment for non-preferred brand-name drug** 	 50% after: \$15 copayment for each generic drug \$30 copayment for each brandname drug** \$40 copayment for nonpreferred brandname drug** Please note: You are required to pay the full amount charged at the time of service for all prescriptions dispensed at an out-of-network provider and must file a claim for 			
Preventative Care Services	100% (deductible waived)	reimbursement. 60%			

Deadlines, Coverage Periods and Premium Costs***

	Annual	Fall	Spring/Summer	Summer
Open Enrollment	04/03/2017-10/02/2017	04/03/2017-10/02/2017	11/01/2017-01/31/2018	02/05/2018-06/15/2018
Waiver Deadline	10/02/2017	10/02/2017	01/31/2018	06/15/2018
Dates Covered	08/10/2017-08/09/2018	08/10/2017-12/31/2017	01/01/2018-08/09/2018	06/01/2018-08/09/2018
Student Rate	\$2,258	\$891	\$1,367	\$434
Spouse Rate	\$2,258	\$891	\$1,367	\$434
All Children Rate	\$3,617	\$1,427	\$2,190	\$694

***A \$12 AES fee is included.

Students who are enrolled in health insurance for the fall semester will automatically be re-enrolled in the spring semester. It is the student's responsibility to notify the LSCS Student Insurance Office BEFORE the waiver deadline if there is a reason he or she should not be re-enrolled.

1 This document is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits and programs and does not constitute a contract. Covered expenses are subject to plan maximums, limitations and exclusions as described in the Policy. The PPO network is BCBSTX Participating Provider Option (PPO) Network.

2 Covered charges at in-network and out-of-network providers are based on the allowable amount. For more information, please see your Brochure Booklet or Policy.

3 The relationship between Blue Cross and Blue Shield of Texas (BCBSTX) and contracting pharmacies is that of independent contractors, contracted through a related company, Prime Therapeutics LLC. Prime Therapeutics LLC is a separate company that also administers the pharmacy benefit program. BCBSTX, as well as several other independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

Blue Cross and Blue Shield of Texas complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, or gender identity. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-710-6984 (TTY: 711). CHÚ Ý: Néu ban nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-710-6984 (TTY: 711). For the full list of languages, see your specific school brochure.