



2020-2021 Baylor College of Medicine Student Health Insurance Plan

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

This plan meets or exceeds the ACA Platinum 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
- Access to a broad Participating Provider Option (PPO) Network from BCBSTX
- Access to multilingual 24/7 Nurseline
- Discounts on vision, fitness and much more

Who can enroll?

Baylor College of Medicine (BCM) requires that all active students enrolled in any BCM academic programs are enrolled in the BCM student health insurance plan or enrolled in alternative coverage that meets all the waiver criteria established by the college. For more details, please visit bcm.myahpcare.com.

To waive the student health insurance plan, you must complete the online waiver by the absolute deadlines. If no action is taken to enroll or waive by the deadline you will be automatically enrolled in the Student Health Insurance Plan and will be responsible for any charges incurred.

Dependent coverage is available. Eligible dependents of those enrolled in the plan may participate on a voluntary basis. Payment must be made directly to Academic HealthPlans and may not be billed to the student's account. Dependents will not automatically be re-enrolled. To view rates and enrollment information, please go to bcm.myahpcare.com.

For additional information, go to bcm.myahpcare.com.

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



^{*} Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LLC, separate and independent companies from 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 an independent company that provides program management and administrative services for the student health plans of Blue Cross and Blue Shield of Texas.

This document contains a summary of your school's proposed student health insurance policy benefits, restrictions, and exclusions as of the date of its publication. The final policy is pending approval by applicable federal and state regulatory authorities, which may result in differences between this summary and the actual policy of insurance issued to you. For specific details about your plan, please refer to your policy of insurance.

Baylor College of Medicine 2020-2021 Plan Highlights 1,2

P	enefit Maximum & Deductibles					
Ь	Network Provider	Out-of-Network Provider				
Benefit Maximum	Unlimited	Unlimited				
Deductible (Individual/Family)	N/A	\$500				
Out-of-Pocket Maximum (Individual/Family)	\$1,250/\$2,500	\$2,500/5,000				
Benefit Coverage						
Deductible applies unless noted below:	Network Provider	Out-of-Network Provider				
Inpatient Hospital Expenses	80%	60%				
Surgical Expenses	80%	60%				
Doctor's Visits	100% after copayment \$10 primary care copayment per visit; \$10 specialist copayment per visit (deductible waived)	ent per 70%				
Virtual Visits (through MD Live*)	\$10 copayment per visit (deductible waived)	70%				
Urgent Care Services	100% after copayment \$10 copayment per visit	70%				
Emergency Care and Accidental Injury Facility Services – Copayment is waived if the insured is admitted, inpatient hospital expenses will apply	80% after \$100 copayment (deductible waived)					
Physician Services	80% (deductible waived)					
Diagnostic X-Rays & Laboratory Procedures	80%					
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 Therapeutics ³ , 100% after: • \$10 copayment for each generic drug • \$40 copayment for each preferred brand-name drug** • \$60 copayment for non-preferred brand-name drug**	 70% after: \$10 copayment for each generic drug \$40 copayment for each preferred brand-name drug** \$60 copayment for non-preferred brand-name 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 reimbursement. 				
Preventative Care Services	100% (deductible waived)	70%				

Deadlines, Coverage Periods and Premium Costs***

	Annual Returning Students	Incoming School of Health Professions Students (except Genetic Counseling & DNP Students)	Incoming Medical, Graduate and Genetic Counseling Students	Incoming Psychology Interns	Incoming DNP Students
Change Period/Initial Enrollment Period	5/11/2020 - 5/29/2020	6/22/2020-7/10/2020	7/24/2020-8/14/2020	7/1/2020-7/17/2020	1/4/2021-1/22/2021
Waiver Deadline	5/29/2020	7/10/2020	8/14/2020	7/17/2020	1/22/2021
Dates Covered	7/1/2020 - 6/30/2021	6/17/2020 - 6/30/2021	7/24/2020 - 6/30/2021	7/1/2020 - 6/30/2021	1/1/2021 - 6/30/2021
Student Rate	\$5,607	\$5,607	\$5,139.75	\$5,607	\$2,803
Spouse Rate	\$5,607	\$5,607	\$5,139.75	\$5,607	\$2,803
Per Child Rate***	\$5,356.08	\$5,356.08	\$4,909.74	\$5,356.08	\$2,678.04

^{***}A \$18 AES fee is included. ****A 2 child maximum

It is the student's responsibility to notify the Baylor College of Medicine 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.

^{*}MDLIVE is a separate company that operates and administers the virtual visits program for Blue Cross and Blue Shield of Texas. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without written permission.

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, sex, gender identity, age, sexual orientation, health status or disability. To get help and information in your language at no cost, please call us at 855-710-6984.
ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 855-710-6984 (TTY: 711). CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 855-710-6984