

# 2023-2024

## The University of Oklahoma (OU) Health Sciences Center - Spring/Summer Self-Funded Student Health Plan

Administered by Blue Cross and Blue Shield of Oklahoma (BCBSOK)

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

- Affordable, quality coverage compatible with the Affordable Care Act
- Coverage when traveling
- Access to a broad Participating Provider Option (PPO) Network from BCBSTX
- Bilingual 24/7 Nurseline, telehealth and behavioral health program
- Discounts on vision, fitness and many more products and services

### Who can enroll?

As part of the acceptance criteria for The University of Oklahoma Health Sciences Center (HSC) programs, all students are required to have medical coverage prior to the start of their academic program and coverage must be maintained as long as the student is enrolled in HSC programs.

The University of Oklahoma Regent's Policy requires students enrolled in HSC programs to submit proof of health insurance to Academic HealthPlans via the Waiver System. You can submit a waiver by going online to [ouhsc.myahpcare.com](http://ouhsc.myahpcare.com) and clicking on the "Waiver" tab. At the beginning of each academic year, and periodically thereafter, students may be asked to show proof of health insurance coverage.

Eligible students who enroll may also enroll their spouses and dependents.

This plan is also available to The University of Oklahoma-Tulsa Schusterman Center-Campus students in health sciences degree programs (College of Allied Health, College of Nursing, College of Public Health programs and School of Community Medicine (MD and PA)).

Please view the complete policy on-line at [ouhsc.myahpcare.com](http://ouhsc.myahpcare.com) for full details of participation in the plan.

### You get online access to:

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

For additional information, go to  
[ouhsc.myahpcare.com](http://ouhsc.myahpcare.com).



\*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 Oklahoma, 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 Oklahoma.

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# The University of Oklahoma Health Sciences Center 2023-2024 Plan Highlights<sup>1,2</sup>

## Plan Coverage

	OU Physicians Student Health & Wellness Clinic ** (OKC) Student Health Clinic** (Tulsa)	In-Network Providers	Out-of-Network Providers
Doctor's Visits	100%	100% after a \$35 copayment per visit	60% after deductible
Specialists Office Visit	100%	100% after a \$50 copayment per visit	60% after deductible
Coinsurance	100%	80% after deductible	60% after deductible
Plan Deductible	\$0	\$500	\$1,500
Out-of-Pocket Maximum (unless otherwise noted)	No maximum	\$6,600	\$15,000

## Benefits

Benefit Category	OU Physicians Student Health & Wellness Clinic ** (OKC) Student Health Clinic** (Tulsa)	In-Network Providers	Out-of-Network Providers
Preventative Care Services	100%	100%	Not covered
Prescription Drugs <i>Per 30-day Retail Supply</i>	100% after: <ul style="list-style-type: none"> <li>\$15 copayment per generic drug</li> <li>\$50 copayment per brand name drug</li> </ul> Contraceptives are covered at 100% (No copayment) <i>(deductible waived)</i>	At pharmacies contracting with Prime Therapeutics <sup>3</sup> , 100% after: <ul style="list-style-type: none"> <li>\$15 copayment for each generic drug</li> <li>\$50 copayment for each brand-name drug</li> <li>\$100 annual prescription deductible applies</li> </ul>	Not covered

\*\*Access to on-campus health services locations is based on your campus enrollment. This plan includes Needlestick benefits.

## Deadlines, Coverage Periods and Premium Costs<sup>\*\*\*</sup>

	Spring	Spring/Summer	Summer
Open Enrollment & Waiver Deadlines	12/8/2023 - 1/26/2024	12/8/2023 - 1/26/2024	5/3/2024 - 6/10/2024
Dates Covered	1/1/2024 - 5/31/2024	1/1/2024 - 6/30/2024	6/1/2024 - 6/30/2024
Student	\$1,516	\$1,815	\$299
Student & Spouse	\$3,037	\$3,636	\$599
Student & Child	\$2,773	\$3,320	\$547
Student, Spouse, Child(ren)	\$4,294	\$5,141	\$847

\*\*\*A \$5.00 AES fee is included in the Spring Premium. A \$6.00 AES fee is included in the Spring/Summer Premium. A \$1.00 AES fee is included in the Summer Premium.

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 BCBSOK 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 Oklahoma (BCBSOK) 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. BCBSOK, 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 Oklahoma 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 (TTY: 711).

For the full list of languages, see your specific school brochure.