

2023-24 Insurance Plan Highlights

Please view the complete brochure online at maryville.myahpcare.com for full details of participation in the plan.

COVERAGE & COST

Monthly 08/01/23 - 07/31/24

Student \$161.06 Spouse \$475.11 Child \$239.61 Children \$475.22

WHAT'S INCLUDED

- Access to Telehealth through AcademicLiveCare
- Access to ASAP Academic Student Assistance Program
- Coverage when traveling or studying over 100 miles away from home through Academic Emergency Services*

*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LLC, separated and independent companies from Academic HealthPlans.



Coverage Overview

This 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 Blue Cross Blue Shield PPO.

MAXIMUMS & DEDUCTIBLES	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
Coverage Year Limit per Covered Person, per Coverage Year	\$500,000	
Deductible per Covered Person, per Coverage Year	None	
Out-of -Pocket Limit per Covered Person, per Coverage Year	\$5,000	
BENEFITS Deductible applies unless otherwise stated below.	IN-NETWORK PROVIDER Payments are base	OUT-OF-NETWORK PROVIDER ed on the allowed amount.
Physician Office Visits	90% after a \$20 Copayment	70%
Treatment at an Urgent Care Facility	90% after a \$35 Copayment	70%
Hospital and Physician Outpatient Services	90% after a \$50 Copayment	70%
Inpatient Hospital Services	90% after a \$50 Copayment	70%
Emergency Hospital Services copayment waived if admitted	90% after a \$100 Copayment	70%
Routine Preventative Care Services	100% up to a Coverage Year Maximum of \$250	
Prescription Drugs Prescription Drug Program with the Copayment listed up to a maximum of \$5,000 per Coverage Year.	Generic Drugs: \$20 Copayment Brand Name Drugs: \$50 Copayment	Generic Drugs: \$20 Copayment Brand Name Drugs: \$50 Copayment
Limited to a 31 day supply for initial fill or refill.	Injectables: \$50 Copayment	Injectables: \$50 Copayment

This document contains a summary of your school's student health insurance policy benefits and restrictions as of the date of its publication; the summary document may differ from the benefits in the approved policy of insurance. The final policy may be pending approval by applicable federal and state regulatory authorities. The final approved policy of insurance is accessible upon approval at maryville.myahpcare.com.

Academic HealthPlans, Inc. (AHP) is an independent company that provides program management and administrative services for the student health plans of GeoBlue