

Administration Guide

U.S. INBOUND PROGRAM

Maryville College

2024-2025



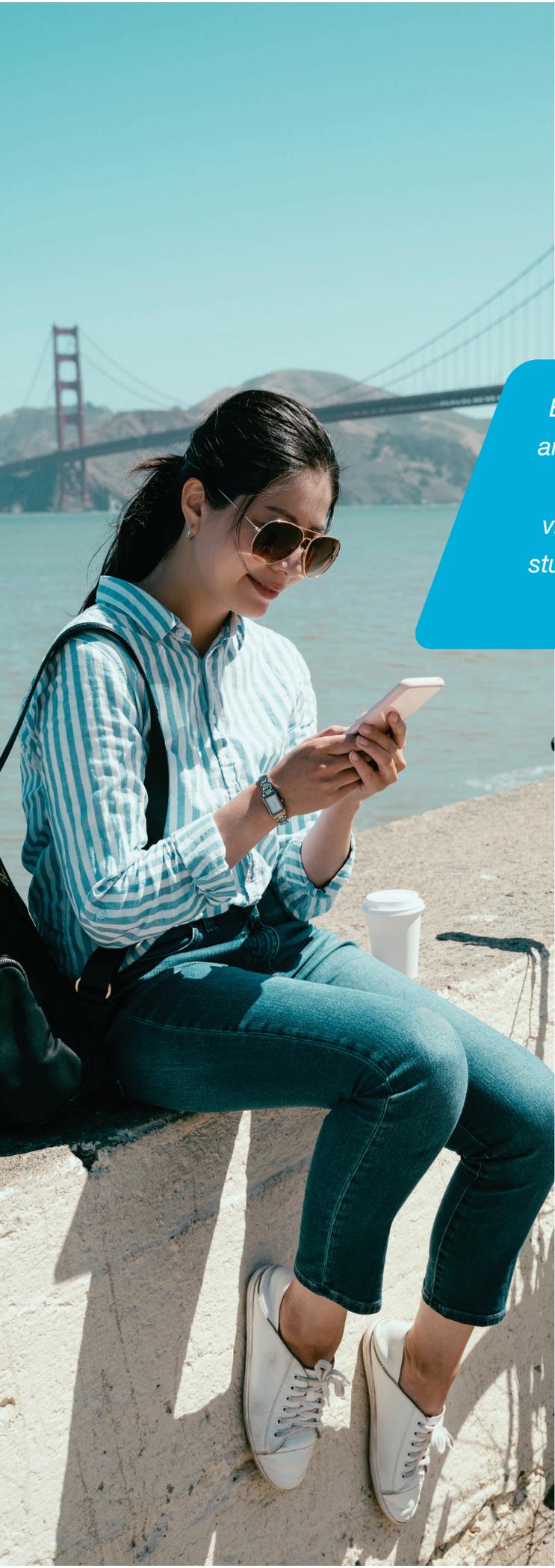


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Embarking on a study abroad program in the U.S. is an exciting venture that opens up the mind and gives students, faculty and staff a broader, more global view of the world. GeoBlue® brings peace of mind to students, parents, faculty and administrators, and lets them focus on experiencing a rich, new culture.

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WELCOME!

Dedicated to simplifying the international healthcare experience for the globally mobile, GeoBlue offers one of the strongest global medical networks available, along with leading digital tools and 24/7/365 world-class medical assistance support and services.



We are here to help you!

You are assigned a dedicated client manager who will support your program and can address any questions related to benefits, escalated claim issues, enrollment, invoicing, renewals or our digital tools. Your client manager will also support any training initiatives offered to program participants and administrators. Our Global Service Center is available 24/7/365 to support members.

Important Contact Information		
Client Manager	Alyssa Binnig	610.254.5879 abinnig@geo-blue.com
Client Specialist		
24/7/365 Global Service Center	General Inquiries, Medical Assistance and Emergency Support for Members	<p>In an emergency situation, members should always seek immediate medical care, then contact us once the situation has stabilized.</p> <p>Medical Assistance: +1-800-257-4823 (Inside the U.S.) +1-610-254-8771 (Outside the U.S.)</p> <p>General Member Service: 1-844-268-2686 (toll-free U.S. domestic calls) +1-610-263-2847 (international collect calls accepted)</p> <p>Members can use the contact form on the GeoBlue mobile app or Member Hub to contact our Global Service Center.</p>

Website Registration

All of the tools you will need to complete administrative functions can be found on our website, www.geobluestudents.com. From the main landing page, click “Log In or Register” and then choose “For Administrators.”





MANAGING GROUP ENROLLMENT

To access www.geobluestudents.com:

- Provide your client manager with your full name, phone number and email address
- Your client manager will set up your account and provide a user name and password
- Tell your client manager which level of access you need
 - **“Full Access”** is needed to submit enrollments, cancellations and make changes
 - **“View Only”** access allows you to view enrollment and/or billing information, but does not allow you to make any changes or add new enrollments

Once on the **“Roster”** page, you can enroll, terminate or edit existing student information or coverage in one of two ways.

Roster Method

For large groups of students

1. From the **“Rosters”** tab, you will first need to download the roster template. This is a Microsoft® Excel® document that you can save to your hard drive.
2. Once you have the roster template, please enter the information as requested. **All highlighted fields are mandatory.**
3. After you have entered the information, save the Excel sheet as a **“text only tab delimited file.”** You can do this by clicking **“Save as”** from the template menu, and changing the file type in the drop down to **“Text (Tab Delimited).”**
4. From the **“Rosters”** tab, click the **“Upload Roster”** link. If you have saved your text file using the name you would like on your roster, you can leave the first option checked. If you would like to change the name of roster without changing the name of the text file, you can choose the **“Create a New Roster Called”** option, and enter the name in the field.
5. The **“Billing Period”** and **“Premium Basis”** will automatically populate.
6. To upload the file, click on **“Choose File,”** locate the text file from the search box and open it. You are now ready to click the orange **“Upload Roster”** box.
7. If a roster is successfully uploaded with no exceptions, a confirmation and link to **“Review Roster Details”** or **“Submit Roster”** will be displayed. You may choose to submit the roster by clicking on the **“Submit Roster”** button, or review/modify roster details by clicking on **“Review Roster Details.”** To ensure your roster was submitted for internal processing, select the **“Rosters”** tab and confirm your roster is NOT showing as **“Open.”** You may also confirm your submission on the **“Submitted Rosters”** page.
8. If a roster is successfully loaded WITH exceptions, a result page will display with the number of rows that were successfully loaded, and a list of the exceptions.
9. Exceptions are categorized as a list of errors associated with an uploaded file. A list of rosters and exceptions can be accessed by clicking **“Upload/Download Roster Template” > and then clicking “Upload Summary.”** To view the exceptions for a particular roster, click **“View Exceptions.”** The **“View Exceptions”** screen displays a summary of roster upload information and a list of errors. The **“Exceptions List”** displays the first name, last name, date of birth, error message, and an option to either update or delete the row. If the row is updated with the correct information, the exception will disappear and the record will be moved to the open current roster. If the row is removed, no information will be moved to the current open roster and the exception will be deleted. All exceptions MUST be handled before a roster can be submitted.
10. Once all exceptions have successfully been resolved, the roster may be submitted by clicking the **“Review Open Roster Details”** button on the roster upload summary page, followed by the **“Submit Roster”** button on the **“Open Roster Details”** page. If you need to add, review or modify any participant, dependent or their payment information, you may do so by selecting the desired user from the **“Open Roster Details”** page.
11. After verifying that the roster data is correct, you may return to the **“Open Roster Details”** page by selecting the **“Back to Current Roster”** button on the participant details page. Next, click the **“Submit Roster”** button on the right side of the page. Once the roster is submitted, a message will appear confirming a successful submission.
12. Electronic ID cards and individual certificate numbers will be available online within 24 hours on the **“Submitted Rosters Tab”** (to access cards for the entire group) or the **“Enrolled Participants Tab”** (for an individual card only).

Individual Method

For small numbers of students

1. From the **“Open Rosters”** tab, select **“Create a New Roster”** (located on the right).
2. Enter your roster name and then click the orange box **“Create a New Roster.”**
3. Next, click the blue **“Add a Participant”** box in the top right.
4. Enter the participant information and then click **“Continue.”** Mandatory fields are marked with an asterisk (*) and are the same as the roster template method explained previously.
5. A summary of the participant information will appear. If all information is accurate, you may click the orange **“Add to the Roster”** box. If you need to make changes or revise the information, you may click on the blue **“Edit Participant”** box.
6. Finally, you may view and then submit your roster.



RENEWING, CHANGING, CANCELING OR EDITING A MEMBERSHIP

1. All changes should be made from the “Enrolled Participants” tab. There are two types of changes: premium related changes and informational changes.
2. Locate the participant you would like to change, and to the right of the name you will see options to “Change,” “Renew” or “Cancel” the policy.
 - a. To renew a policy, click “Renew” under the member name in the “Enrolled Participants Tab” and a new open roster will need to be created. It is recommended using “student name renewal” or a similar name. In the middle of the page you will see a “Valid Through” field. Here you may enter the new “valid through” date. Next, scroll down to the bottom of the page and click “Submit.” Since this created a new open roster, please be sure to submit the roster (as is normally included in the process).
 - b. To cancel a policy, use the “Enrolled Participants” tab, but under the member name select the “Cancel” link instead. In the space labeled, “Please enter the effective cancellation date” add the cancellation date (to void the entire trip, enter the policy start date) and in the “Reason for Change” include the reason. Finally, click the “Send Cancellation Request” tab.
 - c. To submit a premium related change (i.e., insured status, effective date), go to the “Enrolled Participants” tab, and under the member name select “Change,” followed by “Submit a Premium Related Change.” Fill out the requested information and then click “Send Change Request.”
 - d. To submit an informational change (i.e., address, name) go to the “Enrolled Participants” tab and under the member name click “Change,” followed by “Submit an Informational Change.” You will need to create a new roster and then click the “Start Informational Changes” button. After the desired changes have been made, click “Continue.” Since you have created a new roster, be sure to submit it from the “Open Roster” tab.

Renewals

Renewals completed via template should follow the same process as new enrollees, taking care to enter the first and last names, date of birth and student ID number exactly as they are stored in our system.

Backdating Effective Dates

Our standard business rule for backdating effective dates is new members can be backdated to the first day of the previous month that the request is submitted, not exceeding 60 days.

Cancellation Requests and Claims Activity

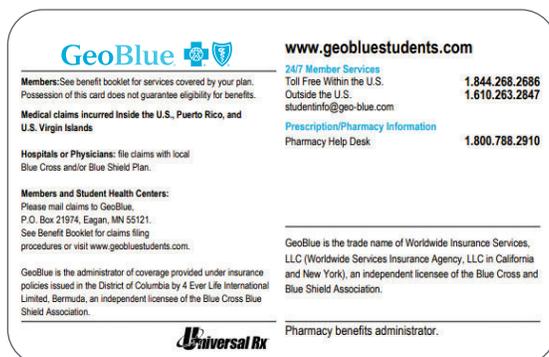
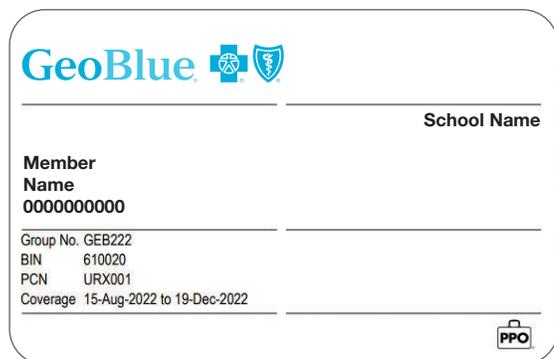
Upon receipt of a cancellation request, we will query our claim system to determine if claims have been processed or are pending payment. If claims have already been paid after the requested termination date, the termination date request will not be honored. If claims are pending, your client manager will discuss options to pay or deny the pending claims, based on the requested termination date. Retroactive termination dates cannot exceed 60 days.





ID CARDS

ID cards will list the certificate number and the names of all covered members on the policy. Coverage dates are listed on the front side. Important phone numbers and claim submission information is on the back of the card.



ID card image is for illustrative purposes only.

Hard Copy ID Cards

Per the school or group's discretion, plastic ID cards, a welcome carrier and a privacy notice will be delivered to enrollees.

Members and up to four (4) dependents will receive two (2) printed ID cards. If a member has over four dependents, two additional ID cards with their names listed will be sent.

Replacing Hard Copy ID Cards

Members can log on to the GeoBlue mobile app or Member Hub and request a replacement card. They can also update their fulfillment address at this time.

Electronic ID Cards

Members can conveniently view, fax or email their ID card through the GeoBlue mobile app. Members can also access an electronic copy of the ID card on the Member Hub at www.geobluestudents.com. The electronic copy of the ID card includes all the same information as the physical copy, and is still valid at providers' offices.





PREMIUM PAYMENT / INVOICING

Invoices can be customized and printed from the administrator’s site; they are generated from roster submissions. The invoice will contain the total amount due, along with the participants’ names, ID numbers, dates of birth and coverage dates. You can also create a custom invoice to include additional details, such as the home country, host country and dependent information. Premiums can be paid by check, up to 30 days after the roster has been submitted.

Sign on to your group’s page, and select the “Invoicing” link.

You will be routed to a list of invoices for your group. You can download or print the invoices as needed.

Payments are due within 30 days of the roster submission. Any credits or cancellations will generate a credit invoice which can be applied to the next invoice, or returned to the group via check (USD).

NOTE: Applied credits are our standard default procedure. If a refund check is needed instead, you must notify your client manager or the finance department.

Demo Admin1 ▾

[Go To Member Portal](#)

Sub-Group Directory | Rosters | Enrolled Participants | **Invoicing** | Plan Information | Claims

GEOBLUE DEMO UNIVERSITY-OB - GBSOB

Group Invoices

[Home](#) / [Invoices](#)

View All View Unpaid / Partially Paid View Paid View Credit

Search only

Invoice Date	Roster ID	Roster Name	Invoice Number	Amount (USD)	Open Amount (USD)	Invoice Reports
05/15/2016	GBSOB-051516-W-554	GBSTO_Prodtest_05-15-16_OB.txt	INV-051516-7323	33.00	33.00	PDF EXCEL CUSTOM
05/15/2016	GBSOB-051516-W-573	jhnat - 05/15/2016 - 01	INV-051516-7328	12.00	12.00	PDF EXCEL CUSTOM
05/15/2016	GBSOB-051516-W-629	GBSTO_Prodtest_05-15-16_OB - pend	INV-051516-7334	11.00	11.00	PDF EXCEL CUSTOM
TOTALS for 3 invoice(s)				\$56.00	\$56.00	

Showing 1-3 of 3

Show entries

To submit payment via ACH or wire, please use this information:

Citizens Bank, Beneficiary Name:
Worldwide Insurance Services, LLC,
ABA: 036076150, Beneficiary Acct: 6233193498,
Swift Code: CTZIUS33 (International User Only)
Federal ID#: 54-1867679

In addition, please send a remittance to ARStudent@geo-blue.com

Checks can be mailed to:

Worldwide Insurance Services, LLC. WIS-S
PO Box 536417 Pittsburgh, PA 15253-5906



NATIONAL NETWORK

U.S. Provider Network

For medical services in the United States, GeoBlue provides access to the Blue Cross® Blue Shield® (BCBS) PPO network; one of the largest hospital and physician networks in the country.

The BCBS provider network is available in both metropolitan and rural markets, and offers unparalleled breadth, depth, stability, accessibility and quality. Through this network, GeoBlue is able to consistently deliver high-quality healthcare benefits wherever members live or travel. In-network providers bill directly to GeoBlue, so members don't have to worry about paying out-of-pocket when seeking care—whether it's inpatient or outpatient.

Accessing Medical Care

With one of the largest PPO networks available, we are able to offer maximum convenience and flexibility for members in need of healthcare services. A robust provider directory is available on the GeoBlue mobile app and the Member Hub at www.geobluestudents.com.

If a member requires assistance finding a provider in our network, they can contact our Global Service Center, available 24/7/365.





MEMBER SUPPORT, MEDICAL AND EMERGENCY ASSISTANCE SERVICES

Appointment Scheduling

To schedule an appointment, members can choose a provider or hospital through the GeoBlue Member Hub on www.geobluestudents.com or mobile app, and contact them directly using the information in their profile.

We encourage members to make their own appointments. If a member is unsure about where to seek care, we can help point them in the right direction. They may have a new diagnosis or be in need of translation services. We can help them find the right options and make introductions.

Customer Service and Medical Assistance

GeoBlue has extensive knowledge of the U.S. healthcare system and understands the confusion experienced by those who are unfamiliar with it. Members can contact our Global Service Center 24/7/365 for assistance with arranging healthcare services or with general questions about their insurance benefits. Our representatives are fluent in a variety of foreign languages, allowing us to discuss coverage and personal health topics with our international members in the language they are most comfortable.

Pre-Departure Program

We can help members managing a chronic condition with pre-trip planning services prior to the beginning of their program. We offer advice on how to navigate the U.S. healthcare system and personalized recommendations based on their specific medical needs. Members can contact our medical assistance team should they require support managing a chronic condition.

Emergency Medical Assistance

When a member is receiving inpatient care, GeoBlue case managers and medical directors will coordinate the assessment of the medical condition with local medical personnel, using the latest medical standards to determine whether the member should be evacuated to a higher level of care.

Medical Evacuation Services

Our medical assistance solution is unique to GeoBlue. Our in-house medical assistance team works together with our operational teams to get members appropriate care in the most efficient way. Our medical assistance team governs any activity delivered by independent assistance vendors and supports positive outcomes for clients and members. Should a member need a medical evacuation, we offer:

- 24/7/365 support from a highly skilled team of doctors and nurses and more than 50 in-house medical assistance specialists
- Resources strategically located around the world to help identify the best local medical care
- A global network of carefully screened and credentialed doctors, hospitals, air ambulance providers and medical escorts
- Seamless coordination and management of all transportation logistics and transfer to receiving facility

Repatriation of Mortal Remains

GeoBlue will coordinate the repatriation of mortal remains to any location around the globe. We will connect with local authorities to ensure that all required documentation is issued in a timely manner and coordinate transportation of the remains to the member's home country, based on family preferences and in conjunction with the receiving facility.





CLAIMS PROCESS AND REIMBURSEMENTS

Methods of Claim Submission

Healthcare providers will normally bill GeoBlue directly for services to members and their enrolled dependents. This is the preferred process as it will not require members to submit a claim form, unless specifically requested by a GeoBlue representative.

If a physician, ambulance company or other provider sends their bill directly to a member, or a member has paid a medical provider at the time the services were rendered, a claim form will need to be submitted for reimbursement. The claim form was specifically developed so that members can notify GeoBlue of any covered health services for which we have not already been billed.

- Claims can be submitted directly online via eClaims, or through the GeoBlue mobile app, or by email, fax or regular mail
- Claims do NOT need to be translated into English prior to submission we accept claims in all languages
- Members can check the status of their claim submissions and view their Explanations of Benefits (EOBs) on the Member Hub

eClaims

For best service, we encourage members to submit claims directly through the GeoBlue mobile app or the Member Hub at www.geobluestudents.com. We've made it easy to follow our guided application and upload supporting documents, view old eClaims and save contact and bank details for future claims.

Paper Claims

Claim forms can be downloaded from the Member Hub on www.geobluestudents.com. Completed forms can be submitted via email, fax or postal mail.

Email: claims@geo-blue.com

Fax: +1-610-482-9623

Postal Mail: GeoBlue, P.O. Box 21974, Eagan, MN 55121

Methods of Reimbursement

Claims payments can be made to members by paper check, in U.S. Dollars. Please allow 7 to 10 business days for checks to reach the member. If a member has questions about the status of their check, they can contact our Global Service Center.

Currency Conversion

We use a reputable currency conversion company to calculate exchange rates. Currency exchange rates are updated daily in our international claims system. Exchange rates are determined based on the date of the service and we accept claims in all currencies.





GEOBLUE MEMBER HUB AND MOBILE APP

Our digital tools provide convenient access to the best local doctors, hospitals and resources anywhere in the world. Members can register online at www.geobluestudents.com or they can download the free GeoBlue mobile app. Once registered, members can access:



Provider Finder

Search providers for medical, dental or mental healthcare and map them using GPS technology.



Medical Translations

Translate medical terms and phrases for many symptoms and situations; use the audio feature to play the translations.



Medicine Equivalents

Find country-specific equivalents for prescription and over-the-counter medications.



News & Safety

View country or city profiles on crime, terrorism and natural disasters.



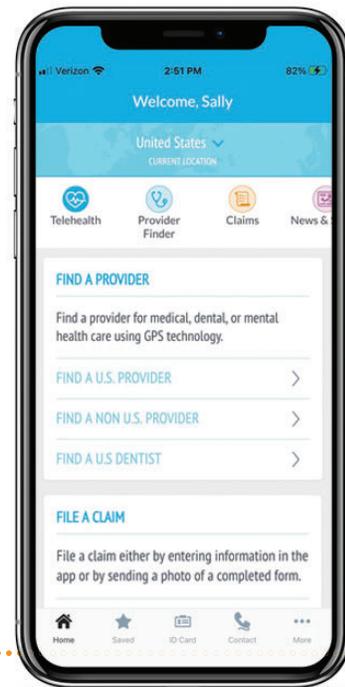
Claim Submission and Status

Submit and track the status of your claims.



Eligibility

Display ID card(s) and share a copy directly to a provider's office.



Members can register on the GeoBlue mobile app or online through the Member Hub. Once registered the log in information will be the same whether using the app or online.



Global TeleMD

Life is demanding. With so much to juggle, finding the healthcare we need, when we need it, should be easy. That's why we offer members a **24/7/365 telemedicine service** as a convenient alternative to seeking in-person care. With Global TeleMD, members have access to:

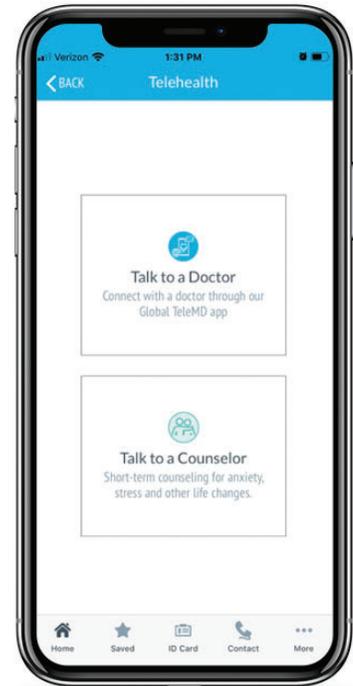
- A global network of doctors
- Medical guidance and consultations (for non-emergencies)
- Same-day virtual appointments by phone or video
- Multiple language options
- Consultation notes sent directly to patient's device
- Prescriptions and referral letters

Global Wellness Assist

An assistance program **available 24/7/365 for students, faculty and staff** participating in an international program. Provides access to six free, confidential counseling services with licensed therapists, available in 70 languages by native speakers. Members also have access to additional resources on the Wellness Portal through the Member Hub at www.geobluestudents.com.

Professionals can assist with a variety of issues. Topics include, but are not limited to:

- Harmony between academic and personal life
- Managing life changes
- Bullying and harassment
- Managing anxiety and depression
- Substance use
- Surviving the loss of a loved one
- Handling stress
- Referrals to local resources, including attorneys, financial professionals and more
- Managing school or workplace pressure





REVIEWING PLAN BENEFITS

**SCHEDULE OF BENEFITS
TABLE 1**

	Limits Individual Insured	Limits Spouse	Limits Dependent Child(ren)
MEDICAL EXPENSES			
Coverage Year Limit	\$500,000	\$500,000	\$500,000
Coverage Year Deductible	\$0 per Coverage Year	\$0 per Coverage Year	\$0 per Coverage Year
Coverage Year Out-of-Pocket Limit The most You pay during a Plan Year in Cost-Sharing before We begin to pay 100% of the Allowed Amount for Covered Services, subject to the limits and provisions of this Certificate	After the Covered Person reaches a \$5,000 Out-of-pocket Limit per Coverage Year, the Insurer pays the Allowed Amount at 100% and up to the applicable maximums in the Tables 2 and 3. Deductibles, Copayments, Prescription Drug Copayments and amounts above the maximums do not apply toward the Out-of-pocket Limit.	After the Covered Person reaches a \$5,000 Out-of-pocket Limit per Coverage Year, the Insurer pays the Allowed Amount at 100% and up to the applicable maximums in the Tables 2 and 3. Deductibles, Copayments, Prescription Drug Copayments and amounts above the maximums do not apply toward the Out-of-pocket Limit.	After the Covered Person reaches a \$5,000 Out-of-pocket Limit per Coverage Year, the Insurer pays the Allowed Amount at 100% and up to the applicable maximums in the Tables 2 and 3. Deductibles, Copayments, Prescription Drug Copayments and amounts above the maximums do not apply toward the Out-of-pocket Limit.

**SCHEDULE OF BENEFITS
TABLE 2
MEDICAL EXPENSE BENEFITS**

MEDICAL EXPENSES	Participating Provider+	Non-Participating Provider
Physician Office Visits	90% of the Allowed Amount after a \$20 Copayment per visit	70% of the Allowed Amount
Treatment at an Urgent Care Facility	90% of the Allowed Amount after a \$35 Copayment per visit	70% of the Allowed Amount
Hospital and Physician Outpatient Services	90% of the Allowed Amount after a \$50 Copayment per visit	70% of the Allowed Amount
Inpatient Hospital Services	90% of the Allowed Amount after a \$50 Copayment per visit	70% of the Allowed Amount
Emergency Hospital Services	90% of the Allowed Amount after a \$100 Copayment per visit. If admitted to Hospital, then 100% of Copayment Waived	70% of the Allowed Amount

+Payment of Covered Medical Expenses for Participating Providers is based on the Allowed Amount. Participating Providers have agreed to accept the Allowed Amount as payment in full.

If a Covered Person requires emergency treatment of an Injury or Sickness and incurs covered expenses at a non-Preferred Provider, Covered Medical Expenses for the Emergency Medical Care rendered during the course of the emergency will be treated as if they had been incurred at a Preferred Provider.

If a Covered Person incurs Covered Medical Expenses for services or supplies that are not of the type provided by any Preferred Provider, these Covered Medical Expenses will be treated as if they had been incurred at a Preferred Provider.

This pamphlet contains a brief summary of the features and benefits for insured participants covered under your school health insurance. This is not a contract of insurance. Coverage is provided under an insurance policy under which your school is a participating school. Coverage is provided under insurance policies issued by 4 Ever Life International Limited, Bermuda. Complete information on the insurance is contained in the Certificate of Insurance which is on file with the school and is made available to all insured participants. If there is a difference between this program description and the certificate wording, the certificate controls.

GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross and Blue Shield Association. GeoBlue is the administrator of coverage provided under insurance policies issued in the District of Columbia by 4 Ever Life International Limited, Bermuda, an independent licensee of the Blue Cross Blue Shield Association. This coverage is offered to the members of the Global Citizens Association, Washington, D.C.



REVIEWING PLAN BENEFITS

**SCHEDULE OF BENEFITS
TABLE 3
MEDICAL EXPENSE BENEFITS**

The benefits listed below are subject to coverage maximums, Deductible, Coinsurance, and Copayments listed in Tables 1 & 2 above.	
MEDICAL EXPENSES	Covered Person
Maternity Care for a Covered Pregnancy	Allowed Amount
Complications of Pregnancy	Allowed Amount
Inpatient treatment of mental and nervous disorders including substance abuse	Allowed Amount up to \$10,000 Maximum per Coverage Year for a maximum period of 30 days per Coverage Year
Outpatient treatment of mental and nervous disorders including substance abuse	Allowed Amount up to \$1,000 Maximum per Coverage Year for a maximum period of 30 visits per Coverage Year.
Treatment of specified therapies, including acupuncture and Physiotherapy	Allowed Amount up to 20 visits per Coverage Year on an Outpatient basis
Routine Preventive Care Services	Allowed Amount up to a Coverage Year Maximum of \$250
Annual cervical cytology screening for women 18 and older	Allowed Amount
Low dose mammography screening, one baseline mammogram and one mammogram per year	Allowed Amount
Colorectal cancer screenings	Allowed Amount
Diabetic Supplies/Education	Allowed Amount
Prostate screening tests	Allowed Amount
Child Preventive and Primary Care Services	Allowed Amount
Breast Reconstruction due to Mastectomy	Allowed Amount
Repairs to sound, natural teeth required due to an Injury	Allowed Amount up to \$500 per Coverage Year maximum
Medical treatment arising from participation in intercollegiate, interscholastic or club sports	Reasonable Expenses up to \$5,000 Maximum per Coverage Year. Injuries from participation in intramural sports are covered the same as any other injury.
Outpatient prescription drugs including oral contraceptives and devices	Prescription Drug Program with the Copayment stated below up to a maximum of \$5,000 per Coverage Year. Limited to a 31-day supply for initial fill or refill.
1. Generic Drugs	All except a \$20 Copayment per prescription
2. Brand Name Drugs	All except a \$50 Copayment per prescription
3. Injectables	All except a \$50 Copayment per prescription

PRE-EXISTING CONDITION LIMITATION

The Certificate does not pay benefits for loss due to a Pre-Existing Condition during the first 6 months of coverage, except as follows: The Certificate will pay for Covered Medical Expenses incurred in connection with a Covered Person's Pre-Existing Condition during the first 6 months of coverage, subject to a maximum benefit of \$5,000. After the Covered Person has been covered under the Certificate for 6 months, Pre-Existing Conditions will be covered the same as any other Injury or Sickness; however, a Pre-Existing Injury or Sickness covered after the Pre-Existing waiting period, will be subject to the same limitations and exclusions as an Injury or Sickness incurred during Coverage under this Certificate. The origin, cause, or nature of the Pre-Existing Injury or Sickness will be used to determine the applicable Coverage, limitations, and exclusions

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REVIEWING PLAN BENEFITS

GENERAL CERTIFICATE EXCLUSIONS

Unless specifically provided for elsewhere under the Certificate, the Certificate does not cover loss caused by or resulting from, nor is any premium charged for, any of the following:

1. Expenses incurred in excess of Reasonable Expenses.
2. Services or supplies that the Insurer considers to be Experimental or Investigative.
3. Expenses incurred prior to the beginning of the current Period of Coverage or after the end of the current Period of Coverage except as described in Covered General Medical Expenses and Limitations and Extension of Benefits.
4. Preventative medicines, routine physical examinations, or any other examination where there are no objective indications of impairment in normal health, unless otherwise noted.
5. Services and supplies not Medically Necessary for the diagnosis or treatment of a Sickness or Injury, unless otherwise noted.
6. Surgery for the correction of refractive error and services and prescriptions for eye examinations, eyeglasses or contact lenses or hearing aids, except when Medically Necessary for the Treatment of an Injury.
7. Cosmetic surgery and therapies. Cosmetic surgery or therapy is defined as surgery or therapy performed to improve or alter appearance or self-esteem or to treat psychological symptomatology or psychosocial complaints related to one's appearance.
8. Surgical breast reduction, breast augmentation, breast implants or breast prosthetic devices, except as specifically provided for in the Certificate.
9. Expenses incurred for elective treatment or elective surgery except as specifically provided elsewhere in the Certificate and performed while the Certificate is in effect.
10. For diagnostic investigation or medical treatment for reproductive services, infertility, fertility, or for male or female voluntary sterilization procedures, or the reversal male or female voluntary sterilization procedures.
11. Expenses incurred for, or related to, sex change surgery.
12. Organ or tissue transplant.
13. Participating in an illegal occupation or committing or attempting to commit a felony.
14. While traveling against the advice of a Physician, while on a waiting list for a specific treatment, or when traveling for the purpose of obtaining medical treatment.
15. The diagnosis or treatment of Congenital Conditions, except for a newborn child insured under the Certificate.
16. Expenses incurred within the Covered Person's Home Country.
17. Treatment to the teeth, gums, jaw or structures directly supporting the teeth, including surgical extraction's of teeth, TMJ dysfunction or skeletal irregularities of one or both jaws including orthognathia and mandibular retrognathia, unless otherwise noted.
18. Expenses incurred in connection with weak, strained or flat feet, corns or calluses.
19. Diagnosis and treatment of acne.
20. Diagnosis and treatment of sleep disorders.
21. Expenses incurred for, or related to, services, treatment, education testing, or training related to learning disabilities or developmental delays.
22. Expenses incurred for the repair or replacement of existing artificial limbs, orthopedic braces, or orthotic devices.
23. Deviated nasal septum, including submucous resection and/or surgical correction, unless treatment is due to or arises from an Injury.
24. Expenses incurred for any services rendered by a family member or a Covered Person's immediate family or a person who lives in the Covered Person's home.
25. Unless specifically provided for elsewhere under the Certificate, the cost of treatment or services that are provided normally without charge by the Member's Student Health Center, covered or provided by the student health fee, rendered by a person employed by the Member, including team Doctor and trainers or any other service performed at no cost.
26. Loss due to an act of war; service in the armed forces of any country or international authority and Participation in a Riot or Civil Commotion.
27. Riding in any aircraft, except as a passenger on a regularly scheduled airline or charter flight.
28. Loss arising from:
 - a. participating in any professional sport competition, contest or competition;
 - b. Racing or speed contests;
 - c. SCUBA diving, sky diving, mountaineering (where ropes or other climbing gear is customarily used), ultra-light aircraft, parasailing, sailplaning/gliders, hang gliding, parachuting, or bungee jumping.
29. Medical Treatment Benefits provision for loss due to or arising from a motor vehicle Accident if the Covered Person operated the vehicle without a

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REVIEWING PLAN BENEFITS

proper license in the jurisdiction where the Accident occurred.

30. Inpatient room and board charges in connection with a Hospital stay primarily for diagnostic tests which could have been performed safely on an outpatient basis.
31. Orthopedic shoes (except when joined to braces) or shoe inserts, including orthotics.
32. Routine hearing tests except as provided under Preventive and Primary Care.
33. Expense covered under any Other Plan.
34. To the extent that such payments would be prohibited by law.

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THANK YOU!



Global Wellness Assist services are provided by WorkPlace Options, an independent company that is not affiliated with GeoBlue and does not provide Blue Cross or Blue Shield products or services. WorkPlace Options is solely responsible for referring participants for counseling, coaching and work-life services by providers who are appropriately licensed by local authorities. The evaluation and efficacy of any service delivered by a provider lies solely with the employee, spouse, dependent or other authorized party who inquires on behalf of the participant. GeoBlue shall have no responsibility or liability whatsoever for any aspect of the provider counseling or the counselor/participant relationship.

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