



A STUDENT HEALTH PLAN **FOR YOU!**

AM I ELIGIBLE?

All registered students are required to purchase this insurance plan on a mandatory basis.

Eligible students who enroll may also enroll their dependents.

The student must actively attend classes for at least the first 31 days of the applicable plan coverage period. Home study and correspondence do not fulfill the eligibility requirements that the student actively attend classes. Blue Cross and Blue Shield of Alabama maintains the right to investigate eligibility or student status and attendance records to verify that the plan eligibility requirements have been met.

Students have access to Telehealth/Behavioral Health Services through AcademicLiveCare. More information, regarding services, benefits and enrollment is available online at tuskegee.myahpcare.com.



**BlueCross BlueShield
of Alabama**

TUSKEGEE UNIVERSITY 2022-2023

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 Medical Expenses are subject to plan maximums, limitations, and exclusions as described in the Benefit Booklet. **The provider network is BlueCard® PPO.**

Student Health Center (SHC): Services rendered at the SHC are covered at 100% (no copayment or deductible). Students must first use the SHC for outpatient treatment and obtain referrals before using other providers and facilities outside of the SHC. A referral issued by the SHC must be electronically submitted. Only one referral is required for each injury or sickness per plan coverage period. Dependents (Spouse/Children) are not eligible for services at the SHC.

Without a referral, medical care received outside of the SHC is not typically covered. The following are the only exceptions:

- Medical emergency/accident
- SHC is closed
- Medical care rendered during break or vacation periods
- Medical care rendered at a location that is more than 30 miles from campus
- Medical care rendered when student is no longer eligible for coverage
- Maternity, obstetrical and gynecological care
- Mental health and substance use disorder treatment
- All dental care or treatment

BENEFIT MAXIMUMS & DEDUCTIBLES

	In-Network Coverage	Out-of-Network Coverage
Benefit Maximum	Unlimited, per Insured Person, per Plan Coverage Period	
Deductible	\$ 150 per Insured Person, per Plan Coverage Period	\$ 750 per Insured Person, per Plan Coverage Period
Individual Out-of-Pocket Maximum	\$ 6,600 per Insured Person, per Plan Coverage Period	\$ 13,200 per Insured Person, per Plan Coverage Period
Family Out-of-Pocket Maximum	\$ 13,200 for all Insureds in a Family, per Plan Coverage Period	\$ 26,400 for all Insureds in a Family, per Plan Coverage Period

BENEFIT CATEGORY Deductible applies unless otherwise stated below.	In-Network Provider Payments are based on the Allowed Amount	Out-of-Network Provider Payments are based on the Allowed Amount
Inpatient Hospital and Residential Treatment Facilities	90%	70% In Alabama: Only medical emergency services and accidental injury
Outpatient Surgery Including Ambulatory Surgical Centers	90%	70% In Alabama: Not Covered
Office Visits & Consultations	100% after a \$15 copayment (deductible waived)	100% after a \$20 copayment In Alabama: 50%
Chemotherapy, Diagnostic Lab, Dialysis & IV, Pathology, Radiation Therapy and X-ray (performed in physician's office)	90%	70% In Alabama: 50%
Rehabilitative Occupational, Physical and Speech Therapy	90%	70% In Alabama: 50%
Emergency Room (Medical Emergency) Copayment waived if admitted	100% after a \$200 copayment (deductible waived)	100% after a \$200 copayment
Prescription Drugs Maintenance drugs - up to 90-day supply may be purchased, but copayment applies for each 30-day supply. Prescription drugs (other than maintenance drugs) - up to a 30-day supply.	Prime Participating Network Pharmacies 100% after copayment Tier 1 & 2: \$5 copayment Tier 3: \$25 copayment Tier 4: \$40 copayment Tier 5 & 6: \$80 copayment	Not Covered
Preventive Care Services For more information, please visit AlabamaBlue.com/PreventiveServices	100% (deductible waived)	Not Covered

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