

BENEFIT Highlights

for Appalachian State University

Effective: 8/1/2023

CALL 1-888-351-8283

VISIT StudentBlueNC.com/ASU



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This brochure is a general summary of the insurance plan offered by Blue Cross and Blue Shield of North Carolina (Blue Cross NC) which includes an overview regarding the following topics:

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Important Numbers

For questions about:	We can help:
<ul style="list-style-type: none"> Waiver/enrollment process Benefits Claims 	<p>Student Blue 1-888-351-8283 email@studentbluenc.com StudentBlueNC.com/ASU</p>
<ul style="list-style-type: none"> On-campus medical care and services 	<p>Mary S. Shook Student Health Service 1-828-262-3100</p>
<ul style="list-style-type: none"> Benefit status Claims history Find Care tool Pharmacy Search tool Exclusive member discounts 	<p>Blue ConnectSM BlueConnectNC.com Blue Connect MobileSM</p>

Key Dates for Waiver/Enrollment Period

All students eligible for the UNC System Hard Waiver Plan must either enroll or waive insurance coverage during the open enrollment period each semester. The deadline to enroll or waive is **September 11, 2023, for Fall** and **January 31, 2024, for Spring/Summer**. The 2023-2024 policy year runs from August 1, 2023, through July 31, 2024.

Health Care on Campus

This plan provides **100% coverage for most medical services** and a **\$15 copayment on prescriptions** at your Student Health Center. For information on covered services, refer to the UNC Student booklet.

Location: Miles Annas Student Services Building

Hours: Mon. – Fri., 8 a.m. to 4 p.m., except Wed., 9 a.m. to 4 p.m. ET

After Hours Care: Sat. and Sun., 8 a.m. to 11 a.m. ET

Telephone: 1-828-262-3100

Web: healthservices.appstate.edu/

Eligibility

For the most current information, refer to the UNC Student booklet section, “When Coverage Begins and Ends.” A student is defined as eligible under the Hard Waiver requirement and is eligible for the Hard Waiver plan as follows:

Undergraduate Students

- Enrolled in a minimum of six credit hours per semester, and
- Enrolled in a degree-seeking program, and
- Eligible to pay the university Student Health Fee

Graduate Students

- Enrolled in a minimum of six credit hours per semester, and
- Enrolled in a degree-seeking program, and
- Eligible to pay the university Student Health Fee

Graduate students with three hours of thesis, dissertation or internship should contact The Graduate School for verification of eligibility.

Special Student Populations

- International students: All international students in some non-immigrant visa categories have health insurance stipulations mandated by federal regulation (e.g., medical evacuation, repatriation and other requirements)
- All degree-seeking international students, regardless of semester credit hour level, are eligible to purchase the Hard Waiver rated plan
- Students in non-degree programs: Participants in non-degree seeking programs* are eligible for the Hard Waiver rated plan if:
 - The program is sponsored by the campus, and
 - Participants pay the campus Student Health Fee, and
 - All program participants are required by the campus to have health insurance
- Study abroad: Degree-seeking students participating in a UNC campus-sponsored study abroad program and earning at least six semester credit hours are eligible for, but are not required to have, the UNC System Student Health Insurance Plan (SHIP). The campus Student Health Fee criterion does not apply for eligibility. Such students may purchase the plan for the entire semester or for the portion of the semester when the student is not in study abroad. Call **1-888-351-8283**, or email at **email@studentbluenc.com** to learn more.

*Note: Student athletes who have graduated but are enrolled in post-baccalaureate studies in accordance with NCAA eligibility rules are covered.

Effective and Termination Dates

The policy on file at the university becomes effective at 12:01 a.m. on August 1, 2023, and terminates at 11:59 p.m. on July 31, 2024. Coverage will be effective on the effective date of the coverage period enrolled (i.e., Fall, Spring/Summer). Insurance will end for the covered person on the earliest of: (1) the date they become full-time active duty in any Armed Forces, or (2) the end of the period for which the premium was paid.

2023-2024 Premiums for UNC System Student Health Insurance Plan

Mandatory Hard Waiver Plan

MEDICAL PLAN RATES* Billed on a semester basis	FALL SEMESTER Effective Dates 08/01/23 – 12/31/23	SPRING/SUMMER SEMESTER Effective Dates 01/01/24 – 07/31/24
Student	\$1,392.40	\$1,392.40

**A portion of the Student Health Insurance Plan premium rate is retained by Appalachian State University to pay for administrative costs.*

Claims and Pre-Notification Procedures

Certain services and procedures may require prior review. Please consult your benefit booklet for more information.

Blue Options® Benefit Highlights (PPO)

Services	In-Network	Out-of-Network
	All dollar amounts and percentages are what you, as a plan member, would pay.	
Lifetime Maximum, Deductibles, Coinsurance Maximums and Plan Maximums		
The following deductibles and coinsurance maximums apply to Mental Health and Substance Use services below.		
Lifetime Benefit Maximum	Unlimited	Unlimited
Deductibles Individual (per benefit period)	\$500	\$1,000
Out-of-pocket limits Individual (per benefit period)	\$4,000	\$8,000
Physician Office Services (See "Outpatient Clinic Services" for outpatient clinic or hospital-based services.)		
Office Visits Includes office surgery, consultation, X-ray and lab, and benefit period maximum of four office visits for the assessment of obesity in- and out-of-network. (See "Inpatient and Outpatient Services.")*	Student Health Center: No charge Primary Care Provider: \$35 copayment Specialist: \$70 copayment	Student Health Center: Not applicable Primary Care Provider and/or Specialist: 50% after deductible
Preventive Care This benefit is only for services that your provider indicates a primary diagnosis of preventive or wellness on the claim that is submitted to Blue Cross NC. Gynecological exams, cervical cancer screening, ovarian cancer screening, screening mammograms, colorectal screening, bone mass measurement, newborn hearing screening and prostate specific antigen tests (PSAs) are covered out-of-network.	Student Health Center: No charge Primary Care Provider and/or Specialist: No charge Outpatient Clinic: No charge	Student Health Center: Not applicable Primary Care Provider and/or Specialist: 30% after deductible Outpatient Clinic: 30% after deductible
Therapies Rehabilitative therapy has a benefit period maximum of 30 visits for physical/occupational therapy (including chiropractic services) and 30 visits for speech therapy. Habilitative services has a benefit period maximum of 30 visits for physical/occupational therapy (including chiropractic services) and 30 visits for speech therapy.	Primary Care Provider: \$35 copayment Specialist: \$70 copayment	Primary Care Provider and/or Specialist: 50% after deductible
Urgent Care Centers and Emergency Room		
Urgent Care Centers Copayment waived if referred to Emergency Room.	\$75 copayment	\$150 copayment
Emergency Room Visit Inpatient hospital benefits apply if admitted. If held for observation, outpatient benefits apply. (See "Inpatient and Outpatient Hospital Services.")	\$500 copayment	\$500 copayment
Ambulatory Surgical Center	30% after deductible	50% after deductible
Inpatient and Outpatient Hospital Services		
Hospital and Hospital-Based Services	30% after deductible	50% after deductible
Outpatient Clinic Services (other than Preventive Care above)	30% after deductible	50% after deductible

*Some services and supplies received by students in an office setting or in connection with an office visit are in fact outpatient hospital-based services provided by hospital-owned or -operated practices. These services and supplies may be subject to your deductible and coinsurance. Please see the Blue Cross NC provider listing to identify these providers. Information contained in this brochure does not apply to those plans. Certain preventive care services are only covered in-network.

Blue Options Benefit Highlights (PPO) *(Continued)*

Services	In-Network	Out-of-Network
	All dollar amounts and percentages are what you, as a plan member, would pay.	
Hospital and Professional		
Outpatient lab tests	30% after deductible	50% after deductible
Outpatient diagnostic mammograms	No charge	30% after deductible
Outpatient X-rays, ultrasounds and other diagnostic tests, such as EEGs and EKGs	30% after deductible	50% after deductible
CT scans, MRIs, MRAs and PET scans in any location, including physician's office	30% after deductible	50% after deductible
Other Services		
Skilled nursing facility (60 days per benefit period)	30% after deductible	50% after deductible
Home health care, durable medical equipment and hospice	30% after deductible	50% after deductible
Ambulance	30% after deductible	30% after deductible
Maternity (maternity delivery includes prenatal and post-delivery care)		
Hospital services (delivery)	30% after deductible	50% after deductible
Professional services (delivery)	30% after deductible	50% after deductible
Transplants		
Hospital services	30% after deductible	50% after deductible
Professional services	30% after deductible	50% after deductible
Infertility services	Primary Care Provider: \$35 copayment Specialist: \$70 copayment	Primary Care Provider and/or Specialist: 50% after deductible
Hospital services	30% after deductible	50% after deductible
Inpatient and outpatient professional services	30% after deductible	50% after deductible
Mental health and substance use services		
Office visits	\$10 copayment	50% after deductible
Inpatient/outpatient	30% after deductible	50% after deductible
Prescription Drugs Up to 30 day supply. 31-60 day supply is two copayments, and 61-90 day supply is three copayments. Prescriptions filled by Student Health are covered at a \$15 copayment per prescription or refill. There is \$100 per drug minimum and \$300 per drug maximum for each 30-day supply of Tier 5 drugs.	Tier 1: \$20 copayment Tier 2: \$35 copayment Tier 3: \$45 copayment Tier 4: \$90 copayment Tier 5: 25% coinsurance	Copayment + charge over in-network allowed amount
Lens and Frame Coverage Prescribed Eyeglass Lens and Frame Benefit Period Maximum – Blue Cross NC will reimburse you up to the Benefit Period Maximum for glasses, hard, soft or disposable contact lenses.		\$200

Health Line Blue

Because we want to help you stay healthy, we offer a variety of wellness benefits and services. You can take advantage of Health Line Blue, our 24-hour health information service that you can call anytime at **1-877-477-2424**. With our program, you can get health advice any time you need it, so you can learn how to take charge of your health.

Additional Information About Blue Options From Blue Cross NC

Benefit Period

The period of time, usually 12 months as stated in the group contract, during which charges for covered services provided to a member must be incurred in order to be eligible for payment by Blue Cross NC. A charge shall be considered incurred on the date the service or supply was provided to a member.

Allowed Amount

The maximum amount that Blue Cross NC determines is to be paid for covered services provided to a member.

Out-of-Pocket Maximum

The dollar amount of out-of-pocket costs.

Day and Visit Maximums

All day and visit maximums are on a combined in- and out-of-network basis.

Utilization Management

To make sure you have access to high-quality, cost-effective health care, we manage utilization through a variety of programs including certification, transplant management, concurrent and retrospective review. If you have a concern regarding the final determination of your care, you have the right to appeal the decision. If you would like a copy of a benefit booklet providing more information about our Utilization Management programs, call the toll-free number listed in your information packet.

Certification

Certification is a program designed to make sure that your care is given in a cost-effective setting and efficient manner. If you need to be hospitalized, you must obtain certification. Non-emergency and non-maternity hospital admissions must be certified prior to the hospitalization. If the admission is not certified, a penalty will be applied. For maternity admissions, your provider is not required to obtain certification from Blue Cross NC for prescribing a length of stay up to 48 hours for a normal vaginal delivery, or up to 96 hours for delivery by cesarean section. You or your provider must request certification for coverage for additional days, which will be given by Blue Cross NC, if medically necessary.

Office visits do not require certification. In-network providers are responsible for obtaining certifications. The member will bear no financial penalties if the in-network provider fails to obtain the appropriate authorization. The member is responsible for obtaining certification for services rendered by an out-of-network or out-of-state provider.

Health and Wellness Program

Our program includes a health topics library; asthma and diabetes management; and a prenatal program. You will also have access to online health and wellness information at BlueCrossNC.com. With our program you can get health advice any time you need it, so you can learn how to take charge of your health.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) provides free aids to service people with disabilities as well as free language services for people whose primary language is not English. Please contact the number on the back of your ID card for assistance.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) proporciona asistencia gratuita a las personas con discapacidades, así como servicios lingüísticos gratuitos para las personas cuyo idioma principal no es el inglés. Comuníquese con el número que aparece en el reverso de su tarjeta del seguro para obtener ayuda.

What is Not Covered?

The following are summaries of some of the coverage restrictions. A full explanation and listing of restrictions can be found in your benefit booklet. Your health benefit plan does not cover services, supplies, drugs or charges that are:

- Not medically necessary
- For injury or illness resulting from an act of war
- For personal hygiene and convenience items
- For inpatient admissions that are primarily for diagnostic studies
- For palliative or cosmetic foot care
- For investigative or experimental purposes
- For cosmetic services or cosmetic surgery including treatment of or surgery for gynecomastia
- For custodial care, domiciliary care or rest cures
- For reversal of sterilization
- For conception by artificial means or diagnosis and treatment of infertility
- For self-injectable drugs in the provider's office

This Benefit Highlights is a summary of Blue Options benefits. This is meant only to be a summary. A final interpretation, and a complete listing of benefits and exclusions, is found in and governed by the group contract and benefit booklet. You may preview the benefit booklet by accessing a copy of the Blue Options benefit booklet from your campus website.

Deductibles, coinsurance, limitations and exclusions apply to this coverage. Further details of coverage, limitations and exclusions, and terms under which the policy can be continued in force will be provided in your benefit booklet.

Blue Cross NC offers several decision support tools to aid you in making decisions around your health care experience. These tools are offered for your convenience and should be used only as reference tools. You should consult your own legal counsel, tax advisor or personal physician as applicable throughout your health care experience.

Blue Cross NC provides the Health Line Blue program for your convenience. Blue Cross NC is not liable in any way for the goods or services received through Health Line Blue. Blue Cross NC reserves the right to discontinue or change the program at any time without prior notice. Decisions regarding your care should be made with the advice of a doctor. Depending on your plan, selected programs may not be available to you at this time. Check with your benefits administrator or Blue Cross NC Customer Service to determine your eligibility. Blue Cross NC has contracted with a third-party vendor independent from Blue Cross NC to bring you Health Line Blue.

The Blue Cross NC Utilization Management (UM) program works to ensure you get the care you need in the appropriate health care setting. Find details about our UM processes and how you can appeal a denied service at BlueCrossNC.com/UMdetails.

Blue Cross NC offers wellness programs as a convenience to aid members in improving their health; results are not guaranteed. Blue Cross NC may contract with independent third-party vendors for the provision of certain aspects of our wellness programs and is not liable in any way for goods or services received from them. These vendors do not offer Blue Cross or Blue Shield products or services. Blue Cross NC reserves the right to discontinue or change our wellness programs at any time. These programs are educational in nature. They are intended to help members make informed decisions about their health and comply with their doctor's plan of care. Decisions regarding care should be made with the advice of a doctor.

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