



North
Carolina

StudentBlueNC.com/#/WFU

Pending NC Department of Insurance Approval

Student BlueSM

Health Plan for Wake Forest University Students | 2025-2026



Student Blue

A healthy plan for a successful future

Wake Forest University (WFU) selected Student Blue to provide you with quality health insurance coverage from Blue Cross and Blue Shield of North Carolina (Blue Cross NC). With Student Blue, you have low out-of-pocket costs and worldwide coverage.¹

2025-2026 Medical Plan	
Mandatory Hard Waiver	Annual ^{2,3}
Student	\$2,842.00*

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

Blue Options® benefit highlights

Services*	In-Network	Out-of-Network
All dollar amounts and percentages are what you, as a plan member, would pay.		
Lifetime Maximum, Deductibles and Total Out-Of-Pocket Maximums The following deductibles and Total Out-of-Pocket Maximum also apply to Behavioral Health and Substance Use Services.		
Lifetime Maximum	Unlimited	Unlimited
Deductibles Individual (per benefit period)	\$200	\$400
Total Out-of-Pocket Maximum Individual (per benefit period)	\$5,000	\$10,000
Physician Office Services (See “Outpatient Clinic Services” for outpatient clinic or hospital-based services.)		
Office Visits Office visit copayment includes evaluation and consultation services only. All other services performed in the office are subject to deductible (out-of-network) and coinsurance.	Primary Care Provider: \$30 copayment, 20% coinsurance for all other services Specialist: \$45 copayment 20% coinsurance for all other services	Primary Care Provider: 30% after deductible Specialist: 30% after deductible
Preventive Care** Routine examinations, well-child care, immunizations, gynecological exams, cervical cancer screening, ovarian cancer screening, screening mammograms, colorectal screening, bone mass measurement, newborn hearing screening and prostate specific antigen tests (PSAs). Pap smears, mammograms and PSAs are covered out-of-network.	Primary Care Provider and/or Specialist: No charge	Primary Care Provider and/or Specialist: 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.	Primary Care Provider: \$30 copayment 20% coinsurance for all other services	Primary Care Provider: 30% after deductible

* Please consult your benefit booklet for coverage details. In the event of conflict, the terms of your benefit booklet apply.

** Preventive care services, as defined by federal regulations, are covered at no charge in-network. Federally- and state-mandated preventive services are available out-of-network, for which members will pay deductible and coinsurance, plus charges over the allowed amount. Visit BlueCrossNC.com/Preventive for more details.

Continued

Blue Options benefit highlights (continued)

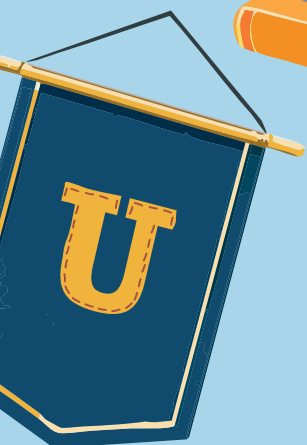
Services*	In-Network	Out-of-Network
All dollar amounts and percentages are what you, as a plan member, would pay.		
Urgent Care Centers, Ambulance and Emergency Room		
Urgent care centers	\$45 copayment 20% after deductible	\$90 copayment 30% after deductible
Emergency room visit (Copay waived and inpatient hospital benefits apply if admitted. If held for observation, outpatient benefits apply. See “Inpatient and Outpatient Hospital Services.”)	\$200 copayment 20% after deductible	\$200 copayment 20% after deductible
Ambulatory Surgical Center	20% after deductible	30% after deductible
Inpatient and Outpatient Hospital Services (\$250 per inpatient admission) Hospital, hospital-based services and outpatient clinic services	20% after deductible	30% after deductible
Professional services	20% after deductible	30% after deductible
Hospital and Professional		
Outpatient labs	20% after deductible	30% after deductible
Outpatient diagnostic mammography	No charge	30% after deductible
Outpatient X-rays, ultrasounds and other diagnostic tests, such as EEGs and EKGs	20% after deductible	30% after deductible
CT scans, MRIs, MRAs and PET scans in any location, including physician’s office	20% after deductible	30% after deductible
Other Services		
Skilled nursing facility (60 days per benefit period)	20% after deductible	30% after deductible
Home health care, durable medical equipment and hospice	20% after deductible	30% after deductible

Continued

Blue Options benefit highlights (continued)

Services*	In-Network	Out-of-Network
All dollar amounts and percentages are what you, as a plan member, would pay.		
Maternity (Maternity delivery includes prenatal and post-delivery care)		
Hospital services (Delivery)	20% after deductible	30% after deductible
Professional services (Delivery)	20% after deductible	30% after deductible
Vision Care		
Routine eye exam	No charge	Not applicable
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
Dental Services		
Exam	No charge	30% after deductible
Basic/major	20% after deductible	30% after deductible
Behavioral Health and Substance Use Services Inpatient/outpatient certification is required.		
Office visits	\$10 copayment	30% after deductible
Inpatient/outpatient	20% after deductible	30% after deductible
Prescription Drugs		
Up to 30-day supply. 31-60 day supply is two copayments, and 61-90 day supply is three copayments. Your prescription may be available at the WFU Deacon Health Pharmacy. If your prescription is available, you may receive it at little to no cost. Special order medication not stocked at the WFU Deacon Health Pharmacy may be covered based upon the tier level of the medication and include a copay. Learn more at wfu.edu/shs .	Tier 1: \$4 copayment Tier 2: \$25 copayment Tier 3: \$35 copayment Tier 4: \$75 copayment Tier 5***: 25% coinsurance	Copayment + charge over in-network allowed amount

*** There is a \$100 per drug minimum for each 30-day supply of Tier 5 drugs. There is a \$200 per drug maximum for each 30-day supply of Tier 5 drugs.



Additional Information about Blue Options from Blue Cross NC

Health and wellness programs

Because we want to help you stay healthy, we offer a variety of wellness benefits and services. You can take advantage of Health Line BlueSM, our 24-hour health information service; 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](https://www.bluecrossnc.com). With our programs, you can get health advice any time you need it, so you can learn how to take charge of your health.

What is not covered?

The following is a summary of some of the coverage restrictions. A full explanation and listing of restrictions will be found in your benefit booklet

- For treatment that is 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
- For custodial care, domiciliary care or rest cures
- For treatment of obesity, except for surgical treatment of morbid obesity, or as specifically covered by your health benefit plan
- For reversal of sterilization
- For treatment of sexual dysfunction not related to organic disease
- For conception by artificial means
- For self-injectable drugs in the provider's office

The benefit highlights is a summary of Blue Options benefits. This is meant only to be a summary. Final interpretation and a complete listing of benefits and what is not covered are found in and governed by the group contract and benefit booklet. You may preview the benefit booklet by requesting a copy of the Blue Options benefit booklet from Blue Cross NC Customer Service.

Important legal notices for students

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.

Special enrollment

If you are declining enrollment for yourself or your dependents (including your spouse/domestic partner) because of other health insurance, including Medicaid, Children's Health Insurance Program (CHIP) or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within 30 days after your or your dependents' other coverage ends (other than Medicaid or CHIP), or if the employer stops contributing toward your or your dependents' other coverage and within 60 days after the loss of Medicaid or CHIP eligibility. In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption or foster care, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption or placement for adoption or foster care, except when adding a dependent child will not change your coverage type or premiums that are owed.

For questions or to obtain more information, contact:

Blue Cross and Blue Shield of North Carolina
P.O. Box 2073, Durham, NC 27702, or call 800-579-8022.

Policy dates are 08/01/25 - 07/31/26

- 1 GeoBlue® travel insurance is covered in 190 countries and territories worldwide through the GeoBlue program. Blue Cross and Blue Shield Association Internal Data: about.geo-blue.com/ (Accessed October 2024).
- 2 A portion of the cost of the Student Insurance Program is retained by Wake Forest University to pay for student health services supplied by Wake Forest University and administrative costs. All charges for the Student Insurance Program, including reserve funds, are retained by Wake Forest University solely for the purposes of funding plan expenses and/or for the equitable and nondiscriminatory benefit of plan participants.
- 3 Premium due for student coverage must be paid through the student's Wake Forest University account.

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.



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