

SAMFORD UNIVERSITY

Student Health Insurance Plan 2023-2024



Eligibility

All undergraduate students enrolled for nine (9) or more credits and graduate students enrolled for six (6) or more credits (or registered for thesis or dissertation supervision) are eligible to enroll in the health plan on a voluntary basis.

All International, Pharmacy, Nursing and College of Health Sciences students are required to enroll in the health plan unless proof of comparable coverage is provided.

What's Included?

- Access to 24-Hour Medical and Mental Health Telemedicine Services
- Coverage when traveling
- Academic Emergency Services*

More Information

For full details of participation in the health plan, please view the complete Benefit Booklet online at: samford.myahpcare.com

Questions

To view Frequently Asked Questions or submit a request, please visit: help.ahpcare.com

Insurance ID Card

To access your ID card, please visit samford.myahpcare.com/additionalresources

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**.



Blue Cross and Blue Shield of Alabama is an independent licensee of the Blue Cross and Blue Shield Association.

*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LLC, separate and independent companies from Academic HealthPlans, Inc. (AHP). AHP (23) BCBSAL-Samford

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 samford.myahpcare.com.

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Benefits

	IN-NETWORK PROVIDER Payments are based on the Allowed Amount	OUT-OF-NETWORK PROVIDER Payments are based on the Allowed Amount
Benefit Maximum Per Insured Person, per Plan Coverage Period		Unlimited
Deductible Per Insured Person, per Plan Coverage Period	\$ 200	\$ 600
Individual Out-of-Pocket Maximum Per Insured Person, per Plan Coverage Period	\$ 6,850	\$ 15,000
Family Out-of-Pocket Maximum All Insureds in a Family, per Plan Coverage Period	\$ 13,700	N/A
Inpatient Hospital & Residential Treatment Facilities Precertification Required	80%	60% In Alabama: Covered only for medical emergency services and accidental injury
Outpatient Surgery Including Ambulatory Surgical Centers	80%	60% In Alabama: Not Covered
Inpatient Physician Visits & Consultations	80%	60% In Alabama: 50%
Chemotherapy, Diagnostic Lab, Dialysis & IV, Pathology, Radiation Therapy and X-ray (Services provided under physician benefits)	80%	60% In Alabama: 50%
Rehabilitative Occupational, Physical and Speech Therapy	80%	60% In Alabama: 50%
Emergency Room (Medical Emergency) Copay waived if admitted	100% after a \$150 copay (Deductible waived)	100% after a \$150 copay (Deductible waived)
Prescription Drugs Maintenance drugs: up to 90-day supply may be purchased but copay applies for each 30-day supply Prescription drugs (other than maintenance drugs): up to a 30-day supply	Prime Participating Network Pharmacies \$100 Actual Charge after Copay: Tier 1: \$15 copay Tier 2: \$15 copay Tier 3: \$35 copay Tier 4: \$60 copay Tier 5 (Preferred Specialty): \$120 copay Tier 6 (Non-Preferred Specialty): \$120 copay	Not Covered
Preventive Care For more information, please visit AlabamaBlue.com/PreventiveServices	100% (Deductible waived)	Not Covered

Rates & Coverage Periods

	ANNUAL 08/21/23 - 08/20/24	FALL 08/21/23 - 12/31/23	SPRING/SUMMER 01/01/24 - 08/20/24	SUMMER 05/05/24 - 08/20/24
Enrollment Periods	07/06/23 - 09/06/2023	07/06/23 - 09/06/23	11/09/23 - 01/25/24	04/14/24 - 06/06/24
Student	\$ 3,239.10	\$ 1,177.05	\$ 2,062.05	\$ 716.85
Spouse	\$ 3,239.10	\$ 1,177.05	\$ 2,062.05	\$ 716.85
Child ¹	\$ 3,239.10	\$ 1,177.05	\$ 2,062.05	\$ 716.85

¹Coverage for two (2) or more children is calculated at the single child rate multiplied by two (2).

To view all enrollment and coverage periods available, please visit samford.myahpcare.com

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

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: made available in cooperation with Blue Cross and Blue Shield of Alabama. Coverage is provided under insurance policies underwritten by 4 Ever Life Insurance Company, Oakbrook Terrace, IL, NAIC #80985 under policy form series 54.1201.