

2018–2019

**Worcester Polytechnic
Institute**

**Blue Cross Blue Shield of
Massachusetts
Student Blue**



Who is eligible to enroll?

All qualifying registered undergraduate and graduate students are automatically enrolled in this Health Insurance Program at registration, unless proof of comparable coverage is furnished. Eligible students may also insure their Dependents. Eligible Dependents are the student's legal spouse and dependent children under 26 years of age.

Where can I get more information about the benefits available?

Please read the certificate of coverage to determine whether this plan is right for you before you enroll. The certificate of coverage provides details of the coverage including costs, benefits, exclusions, and reductions or limitations and the terms under which the coverage may be continued in force. Copies of the certificate of coverage are available from the Institute and may be viewed at www.crossagency.com/wpi

Who can answer questions I have about the plan?

If you have questions please contact Blue Cross Blue Shield of Massachusetts Customer Service at 1-888-753-6615 or visit the Student Blue web site at www.studentbluema.com

You can also contact the Cross Agency at 1-800-537-6444 or CollegeHealth@crossagency.com.

How much does the plan cost?

Rates	Annual 8/12/18-8/11/19
Student	\$1,252.00
Spouse	\$2,478.84
One Child	\$1,239.42
Family	\$3,730.32

Family = Spouse plus one or more children, or No spouse but more than one child

Finding a doctor is easy and can be done in one of three ways:

- Use our [Find a Doctor](#) tool
- Download the [Find a Doctor app](#)
- Call our Physician Selection Service at **1-800-821-1388**

How to register for On Line Services

Members have online access to their claims status, EOBs, network providers, and coverage account information by logging in to My Blue www.bluecrossma.com/wps/portal/members/home/ To create an online account, select the “Create Account” and follow the simple, onscreen directions.

Highlights of the Coverage and Services offered by BCBSMA Insurance Company		
	In-Network Providers	Out-of-Network Providers
Overall Plan Maximum	There is no overall maximum dollar limit on the policy	
Plan Deductible	\$0 (There is no Plan Deductible.)	
Out-of-Pocket Maximum <i>After the Out-of-Pocket Maximum has been satisfied, Covered Medical Expenses will be paid at 100% for the remainder of the Policy Year subject to any applicable benefit maximums. Refer to the plan certificate for details about how the Out-of-Pocket Maximum applies.</i>	\$5,000 Per Insured Person, Per Policy Year \$10,000 For all Insureds in a Family, Per Policy Year	
Coinsurance <i>Your cost share for services rendered</i>	80% Allowance for Covered Medical Expenses	60% of Usual and Customary Charges for Covered Medical Expenses
Prescription Drugs and medicines lawfully obtainable only upon written prescription of a Physician	\$20 Copay for Tier 1 \$55 Copay for Tier 2 \$75 Copay for Tier 3 Up to a 30-day supply per prescription filled at a Express Scripts Retail Pharmacy or a Participating Specialty Pharmacy	\$50 Copay for Tier 1 \$135 Copay for Tier 2 \$180 Copay for Tier 3 Up to a 90-day supply per prescription filled with Express Scripts Mail Services
Preventive Care Services <i>Including but not limited to: annual physicals, GYN exams, routine screenings and immunizations. No Copay when the services are received from a Preferred Provider. Please see www.healthcare.gov/preventive-care-benefits for complete details of the services provided for specific age and risk groups.</i>	No Charge	20% Coinsurance
The following services have per Service Copays/Coinsurance <i>This list is not all inclusive. Please read the plan certificate for complete listing of Copays/Coinsurance.</i>	Physician's Visits: \$10 Lab: 20% X-rays: 20% Medical Emergency: \$100 (Waived if admitted to the Hospital)	Physician's Visits: 20% coinsurance Lab: 40% X-rays: 40% Medical Emergency: \$100 (Waived if admitted to the Hospital)
Pediatric Dental and Vision Benefits	Refer to the plan certificate for details (age limits apply).	

Additional Benefits

Take advantage of all the benefits available under your Blue Cross Blue Shield Student Blue Plan by learning about the discounts and savings that are available.

Telehealth

Whenever you have urgent healthcare concerns or going to a doctor's office or campus health center isn't convenient telehealth is a cost-effective alternative to face-to-face visits. You have access to medical advice 24/7 365 by contacting telehealth. You can visit the Telehealth web site www.bluecrossma.com/telehealth to connect to your telehealth services powered by American Well's national network of online doctors and therapists. The cost of the call is the same copayment as a medical care visits to your provider.

Fitness Benefit toward membership at a health club or fitness classes

This fitness benefit applies for fees paid to: privately-owned or privately-sponsored health clubs or fitness centers; YMCAs; YWCAs; Jewish Community Centers; and municipal fitness centers. (See your subscriber certificate for details.) Reimbursement for membership fees for up to 3 consecutive months of one annual family or individual membership at a health club or 10 fitness classes, per individual or family per calendar year. Form is included in the Electronic EKit.

Weight Loss Program Benefit toward participation in a qualified weight loss program

This weight loss program benefit applies for fees paid to a qualified hospital-based weight loss program or a Blue Cross Blue Shield of Massachusetts designated weight loss program. (See your subscriber certificate for details.) Reimbursement for up to a 3 months participation fees per individual or family per calendar year. Form is included in the Electronic EKit.

Blue Care Line

A 24-hour nurse line to answer your health care questions – call 1-888-247-BLUE (2583). With the Blue Care Line, you can speak with a registered nurse 24 hour a day, 7 days a week. Experienced professionals are always available to offer you expert answers to your questions. Simply explain the situation, detail your symptoms, and our nurses will tell you whether you should see your doctor, go to the emergency room, or care for yourself at home. This services is no additional charge.

Electronic Enrollment Kit

A customized kit which allows you easy access to your benefit summaries, discount and pharmacy information. Visit the EKit at https://planinfo.bluecrossma.com/ekit/2018-worcesterpolytechnicinstitutestudentplan-en_US.pdf

