# **Fontbonne University**

# International Student Insurance Plan 2023-2024

# Eligibility

The Classes eligible for coverage available under the Certificate are shown below.

**Class I:** An international student, scholar, visiting faculty or other person with a current passport or non-immigrant visa, temporarily located outside his or her Home Country as a non-resident alien and is engaged in educational activities of the Member; has not obtained permanent residency status in the United States; and is not a U.S. Citizen.

Class II. Eligible Dependents of any of the above classes.

The Insurer maintains its right to investigate eligibility or student status and attendance records to verify that the eligibility requirements have been met. If the Insurer discovers that the eligibility requirements have not been met, its only obligation is to refund premium.

### **Benefits**

	BLUE CROSS BLUE SHIELD PPO PROVIDER YOU WILL PAY	OUT-OF-NETWORK PROVIDER YOU WILL PAY AT LEAST <sup>1</sup>		
Deductible	\$0 per Person, per Policy Year			
Office Visit	10%, then \$20 Copay per visit (waived at campus health center)	30%		
Urgent Care	10%, then \$20 Copay per visit	30%		
Hospital Visit	10%, then \$50 Copay per visit	30%		
Emergency Room	10%, then \$150 Copay per visit (Copay waived if admitted)	30%		
Prescription Drugs	\$25 Copay Generic/\$40 Copay Brand Name (contraceptives included) <sup>2</sup>			
Out-of-Pocket Maximum	\$6,500 per Person, per Policy Year			

<sup>&</sup>lt;sup>1</sup>Using Out-of-Network providers may cost you more money! Coinsurance is payable for Reasonable Expenses, the normal cost the provider would charge for services in the absence of insurance. Some Out-of-Network providers charge more than Reasonable Expenses and you will be responsible for these excess amounts over the listed Coinsurance.

#### What's Covered

#### (Treatment must be Medically Necessary)

- \$1,000,000 benefit year maximum for all eligible expenses
- Doctor visits
- Emergency expenses
- Surgery, in- and outpatient
- Tests, procedures, and lab services, such as X-rays and blood draws
- Annual women's cervical cancer screening and a breast exam

- Vaccinations and immunizations
- Routine Preventive Care Services
- Physical therapy, chiropractic care, and acupuncture (20 visits maximum)
- · Pregnancy and maternity
- Prescription drugs



## Questions

Eligibility & Enrollment Academic HealthPlans, Inc. (800) 955-1991

Benefits GeoBlue (844) 268-2686

#### Insurance ID Card

Once you receive a Welcome Email from GeoBlue you can download your ID card. Visit geobluestudents.com to set up an account.

Carry your ID card with you at all times!

# **Getting Care**

Go to the campus health center. If you need to access care away from campus, visit geobluestudents.com or call (844) 268-2686 to find a provider in the Blue Cross Blue Shield PPO Network.

#### More Information

For more information, please visit fontbonne.mycare26.com

Limitations, Deductibles, Coinsurance, and Copays may apply. Please see the Plan Certificate for full benefit details. If there are any discrepancies between this document and the Plan Certificate, the Plan Certificate will govern.

Coinsurance is the cost sharing between what the insurance pays and what you pay. This insurance plan pays 90% when you use Blue Card PPO providers, part of Blue Cross Blue Shield, and 70% when you use Out-of-Network providers.

 $<sup>^{2}</sup>$  If you visit an Out-of-Network pharmacy, you must pay for prescriptions in full, then submit a claim for reimbursement.

# **Rates & Important Dates**

Rates are effective 07/31/2023 to 07/30/2024. Rates include insurance premium and administrative fees.

	STUDENT	SPOUSE/DOMESTIC PARTNER	ONE CHILD	TWO OR MORE CHILDREN
Annual 07/31/2023 to 07/30/2024	\$1,710.44	\$4,995.24	\$3,335.40	\$6,670.20
Fall 07/31/2023 to 12/31/2023	\$712.68	\$2,081.35	\$1,389.75	\$2,779.25
Spring/Summer 01/01/2024 to 07/30/2024	\$997.76	\$2,913.89	\$1,945.65	\$3,890.95
Summer 06/01/2024 to 07/30/2024	\$285.07	\$832.54	\$555.90	\$1,111.70

### What's Included?

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

This document contains a summary of your school's International Student Insurance Plan benefits and restrictions as of the date of its publication; the summary document may differ from the benefits in the approved Certificate of insurance. The final Certificate may be pending approval by applicable federal and state regulatory authorities. The final approved Certificate of insurance is accessible upon approval at **fontbonne.mycare26.com**.

 $A cademic \ Health Plans, \ Inc.\ (AHP) \ is \ an independent \ company \ that \ provides \ program \ management \ and \ administrative \ services \ for \ International \ Student \ Insurance \ Plans.$ 

<sup>\*</sup>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).