

University of New Mexico Student Health Plan



AcademicBlueSM

Agenda

- ▶ Your Insurance Team
- ▶ Understanding Your Benefits
- ▶ Enrollment & Cost
- ▶ Insurance In Action
- ▶ Student Health and Counseling Center (SHAC)
- ▶ Pediatric Dental
- ▶ Pediatric Vision
- ▶ Optional Adult Dental
- ▶ Academic Health Plans Portal
- ▶ Academic Emergency Services (AES)
- ▶ Health Plan Tips
- ▶ ID Cards
- ▶ Questions

Your Insurance Team

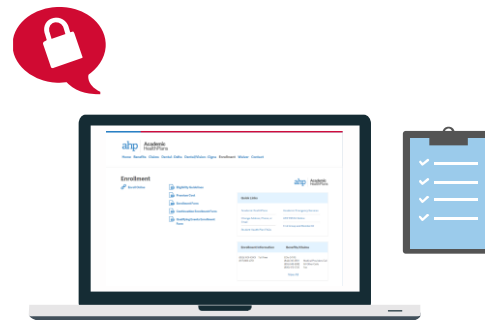
➤ **Academic HealthPlans (AHP)** is your plan administrator.

- Website
- Plan Materials
- Waiver
- Enrollment
- Billing



➤ **UNM Team Health** is your customer service.

- Benefit & Claim Inquiries
- Referral assistance
- ID Card Requests
- Pre-authorization
- Appeals



➤ **Blue Cross and Blue Shield of New Mexico (BCBSNM)** is your insurance carrier.

- Claims Administration
- Distribution of ID Cards
- Access to a Large Network of Providers
- Blue 365 Discounts



Understanding your benefits



Pre-existing condition exclusions: None Lifetime Maximum: Unlimited	UNM Student Health & Counseling (SHAC) Network	UNM Team Health Network	BCBSNM PPO Network
Plan Year Maximum	Unlimited		
Deductible per Individual	\$0		\$250
Deductible per Family	Not Available		\$500
Out-of-Pocket Maximum Individual (Includes Deductible, Coinsurance, and Copays)		\$6,350	
Out-of-Pocket Maximum Family (Includes Deductible)		\$12,700	
Inpatient Hospital Expenses	Not Available	20% Coinsurance	20% Coinsurance
Outpatient Hospital Expenses	Not Available	20% Coinsurance	20% Coinsurance
X-ray and Lab	20% Coinsurance	20% Coinsurance	20% Coinsurance
Primary Care Office Visit	\$5 Copay	\$15 Copay	\$25 Copay
Specialist Office Visit	\$10 Copay	\$25 Copay	\$35 Copay
Emergency Services**	Not Available	20% Coinsurance	20% Coinsurance
Urgent Care Visit	Not Available	\$15 Copay	\$25 Copay
Urgent Care Expenses	Not Available	20% Coinsurance	\$20% Coinsurance
Preventative Care Services	No Copay	No Copay	No Copay
Prescription Drugs			
Generic	\$10 Copay	\$20 Copay	\$20 Copay
Preferred Brand***	\$20 Copay	\$40 Copay	\$40 Copay
Non-Preferred Brand***	\$30 Copay	\$60 Copay	\$60 Copay
Specialty	\$100 Copay	\$100 Copay	\$100 Copay

Out-of-Pocket Maximum:
The amount you will be responsible for before the insurance company begins to pay claims at 100%.

Copayment:
The amount you will have to pay when services are received.

Deductible:

The amount you will pay out-of-pocket before the insurance company begins to pay. (This does not apply to In-Network doctor's visits and prescription drugs.)

Co-insurance:

The percentage that you will pay for the listed services, after you meet your deductible and before your out-of-pocket max. is met. (SHAC & UNM Health Network saves you money!)

**Emergency Services and Ambulance for Out of Network pay at the BCBSNM PPO level

***Copayment plus the cost difference between the brand-name drug or supplies per prescription for which there is a generic drug or supply available.



Understanding your enrollment and cost

GA, Returning Medical Students, Med. Prof	Fall	Spring/Summer	Summer
Open Enrollment	08/12/2019-09/14/2019	01/13/2020-02/08/2020	06/01/2020-06/21/2020
Waiver Deadline	09/14/2019	02/8/2020	06/21/2020
Dates Covered	08/19/2019-01/19/2020	01/20/2020-08/16/2020	06/01/2020-08/16/2020
Student Rate	\$1,129.85	\$1,581.79	\$677.91
Spouse/Domestic Partner	\$1,129.85	\$1,581.79	\$677.91
Each Child	\$1,129.85	\$1,581.79	\$677.91
MD and Pharm D Students	Fall	Spring	
Dates Covered	07/01/2019-12/31/2019	01/01/2020-06/30/2020	
Student Rate	\$1,355.82	\$1,355.82	
Spouse/Domestic Partner	\$1,355.82	\$1,355.82	
Each Child	\$1,355.82	\$1,355.82	

Open Enrollment:
Dates during which you can enroll dependents in the plan.

Waiver Deadlines: Last day to waive coverage for each semester.

Coverage Period:
The dates that your health insurance will pay your claims for the current plan year.

UNM Pays 100% of the premium for Assistant Recipients **ONLY**. Medical and other Health Profession students are eligible to enroll and responsible for the cost of coverage.

Premium:
The amount that you will pay per semester for your coverage.



Insurance in Action



Javier has been having issues with his stomach for two months so he visits his on-campus Student Health & Counseling Center (SHAC).



SHAC refers Javier to an **in-network** gastroenterologist, which he found using the provider search on unm.myahpcare.com.



When Javier arrives at the specialist's office, he shows his insurance card and pays a \$25 Specialist copay for UNM Health Network or a \$35 copay for BCBSNM Specialist.



Javier's ongoing pain concerns the doctor, so he orders an ultrasound.

Remember!

Your insurance provides coverage wherever you go, just be sure to find an in-network provider. **There are no out-of-network benefits unless services are for a true emergency.**



Insurance in Action



Javier later gets a bill for the full negotiated rate (since he has not yet met his \$250 deductible) for the ultrasound. However, since he chose an in-network physician, he was still able to save money.



Javier paid the provider \$250 out-of-pocket for the ultrasound (this met his deductible) so now the next time he gets a procedure done, his health insurance will pay the co-insurance and he will only have to pay a small percentage of the costs.



The ultrasound looks fine but since Javier has developed a fever, his doctor thinks he has an infection. He is prescribed antibiotics which he picks up for a small copay at the SHAC pharmacy or any in-network pharmacy. A week later Javier is happy and healthy!

Student Health & Counseling Center (SHAC)



- ▶ Provides both primary and preventative health care to students only who have paid the required medical services fee.
- ▶ Services include:
 - ▶ Well-woman exams and check-ups
 - ▶ Treatment for illnesses like colds or flu
 - ▶ Treatment for minor injuries such as sprains
 - ▶ Fill prescriptions
 - ▶ Certain immunizations
 - ▶ Allergy injections



Pediatric Dental Plan

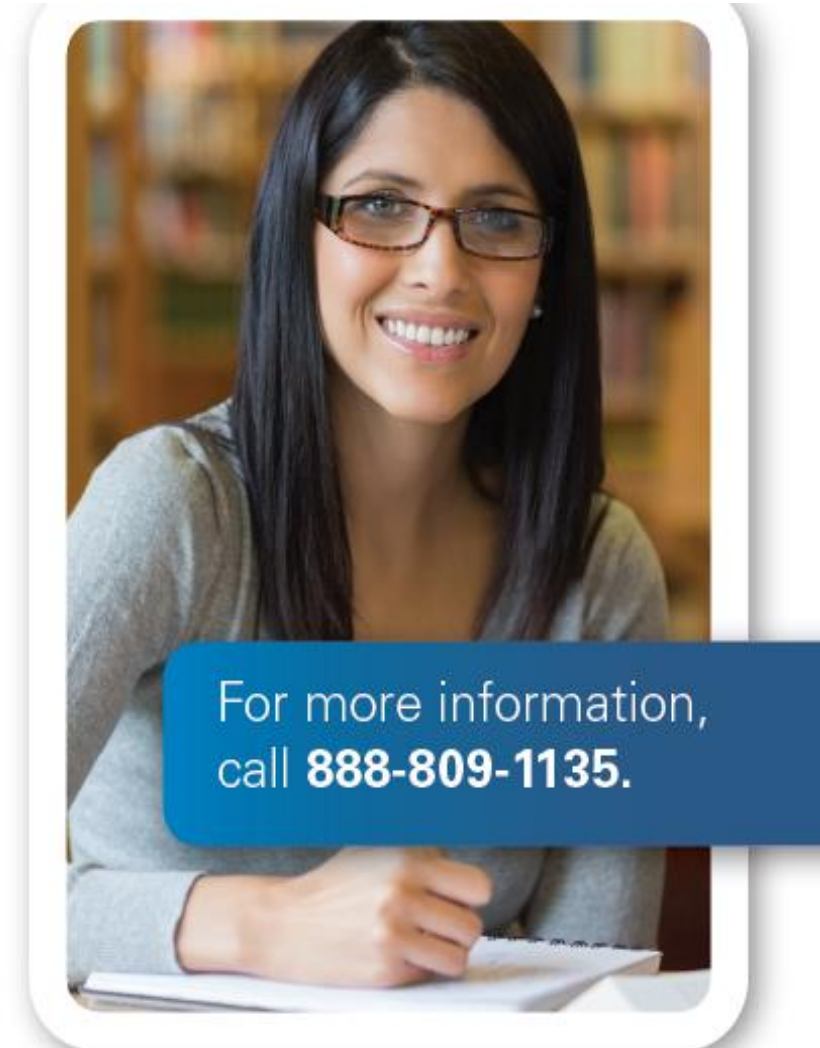


Benefits covered:

- Up to age 21
- Pediatric dental includes: Unlimited maximums (annual and/or orthodontia lifetime; in-network and out-of-network)
 - Individual deductible \$75/family deductible \$225
 - Yearly out-of-pocket maximum of \$350 for one child, \$700 for two or more children

Routine Dental Services	Benefit
Diagnostic Evaluations (deductible waived)	80%
Diagnostic Radiographs (deductible waived)	80%
Preventive Services (deductible waived)	80%
Basic Dental Care	
Miscellaneous Preventive Services	80%
Basic Restorative	50%
Non-Surgical Extractions	50%
Non-Surgical Periodontal	50%
Adjunctive Services	50%
Endodontics	50%
Oral Surgery	50%
Implants	50%
Surgical Periodontal Services	50%
Major Dental Care	
Major Restorative	50%
Prosthodontics	50%
Misc Restorative & Prosthodontic Services	50%
Medically Necessary Orthodontia (deductible waived)	50%

1. This document does not contain a complete listing of the exclusions, limitations and conditions that apply to the benefits shown. For more information, call 855-267-0214.
2. The benefit ends the last day of the month in which the members turns 21.



For more information,
call **888-809-1135.**

Pediatric Vision Plan



Eye exam and vision hardware discount fee schedule

Members¹ can receive the following benefits:

- The EyeMed Vision Care network consists of major national and regional retail locations such as LensCrafters®, Pearle Vision, Sears® Optical, Target Optical® and JCPenney Optical, as well as independent optometrists and ophthalmologists.
- Members who use an EyeMed Vision Care contracted provider for products and services can receive an eye exam at no additional charge, and discounted prices on select frames, lenses and contacts by presenting their BCBSNM member ID card.
- For a list of EyeMed Vision Care contracted providers, visit eyemedvisioncare.com/BCBSNM and use their Enhanced Provider Search tool.

In-Network Benefits ²			
Benefit Frequency	Once every		
Eye Examination (inclusive of dilation when professionally indicated)	12 Months		
Spectacle Lenses	12 Months		
Frame	12 Months		
Contact Lens (CL) Evaluation, Fitting and Follow-Up Care	12 Months		
Contact Lenses (instead of eyeglasses)	12 Months		
Examinations	Member Cost		
Eye Examination	\$0 Copay		
Eyeglass Benefit - Frame	Member Cost		
Provider Designated Frames	\$0 Copay		
Eyeglass Benefit - Spectacle Lenses	Member Cost		
Standard Plastic Lenses			
Single Vision	\$0 Copay		
Bifocal	\$0 Copay		
Trifocal	\$0 Copay		
Lenticular	\$0 Copay		
Standard Progressive Lens	\$65 Copay		
Premium Progressive Lens Tier 1	\$85 Copay		
Premium Progressive Lens Tier 2	\$95 Copay		
Premium Progressive Lens Tier 3	\$110 Copay		
Premium Progressive Lens Tier 4	\$65 copay, 80% of charge less \$120 Allowance		
Lens Options			
UV Treatment	\$0 Copay		
Tint (Fashion & Gradient & Glass-Grey)	\$0 Copay		
Standard Plastic Scratch Coating	\$0 Copay		
Standard Polycarbonate - Kids under 19	\$0 Copay		
Standard Anti-Reflective Coating	\$45		
Premium Anti-Reflective Coating Tier 1	\$57		
Premium Anti-Reflective Coating Tier 2	\$68		
Premium Anti-Reflective Coating Tier 3	20% off Retail Price		
Polarized	20% off Retail Price		
Glass	\$0 Copay		
Photochromic / Transitions Plastic	\$75 Copay		
Oversized	\$0 Copay		
Contact Lens Benefit (in lieu of spectacle lenses)			
Provider Conventional Contact Lenses (\$150 allowance, 15% off balance over \$150)	\$0 Copay/1 pair per benefit year		
Medically Necessary Contact Lenses	\$0 Copay/Paid in Full		
Out-of-Network Reimbursement Schedule (Maximum Reimbursement)			
Eye Examination: \$30	Frames: \$75	Single Vision Lenses: \$25	Bifocal Lenses: \$40
Trifocal Lenses: \$55	Lenticular Lenses: \$55	Elective Contact Lenses: \$150	Medically Necessary CL: \$210

¹The benefit ends the last day of the month in which the member turns 19.

²This document does not contain a complete listing of the benefits, exclusions, limitations and conditions that apply to the benefits shown. For more information, please contact BCBSNM at 855-267-0214.

Optional Adult Dental Plan

- If you are enrolled in the UNM student health insurance plan, you have the option to purchase dental coverage from Blue Cross and Blue Shield of New Mexico.
- You can choose your dentist from our statewide provider network.
- Out-of network benefits are available but non-contracting dentist may balance bill you for charges above the allowable amounts.

Premium paid to AHP upon enrollment - **\$121.44** per person per semester
 Summer Semester - **\$51.76**

BlueCare DentalSM for Student Health

If you are enrolled in the AcademicBlueSM student health insurance plan available at your University, you have the option to purchase dental coverage from Blue Cross and Blue Shield of New Mexico. You can choose your dentist from our statewide provider network.*

With our BlueCare Dental plan, you'll save money on things like:

- Exams
- Cleanings
- Fillings
- Crowns

By using our network dentists, you get:

- Coverage on the most used preventive services
- Savings on all dental procedures

2019-2020 New Mexico Student Health Dental Plan¹

The benefits on this chart represent what the member will pay.

BlueCare Dental 1B Age 21 and Older	In-network Benefit	Out-of-network Benefit
Deductible	\$75	\$75
Annual Maximum	\$1,000	
Diagnostic Evaluations² (deductible waived) Oral examinations (2 every 12 months)	10%	30%
Preventive Services² (deductible waived) Prophylaxis (2 cleanings every 12 months)	10%	30%
Diagnostic Radiographs² (deductible waived) Dental X-rays, full mouth (1 every 36 months)	10%	30%
Miscellaneous Preventive Services Sealants/Space maintainers	10%	30%
Basic Restorative Services Services for restorations necessary to repair damage caused by basic dental decay, including tooth preparation, all adhesives, bases, liners and polishing; routine fillings (amalgam and resin-based composite)	30%	50%
Non-Surgical Extractions Removal of erupted tooth	30%	50%
Non-Surgical Periodontal Periodic scaling and planing	30%	50%
Adjunctive Services Services for palliative treatment (emergency) of dental pain, when not performed in conjunction with planned treatment; general anesthesia	30%	50%
Endodontic Services Services for treatment related to dental disease of the tooth pulp	50%	70%
Oral Surgery Services Surgical tooth extractions	50%	70%
Surgical Periodontal³ Gingivectomy/gingivoplasty/Osseous surgery and grafts	50%	70%
Major Restorative Services³ Services to restore tooth structures lost as a result of decay or fracture; single-crown restorations; inlay/onlay restorations	50%	70%
Prosthodontic Services³ Bridges/Full and partial dentures	50%	70%
Misc Restorative & Prosthodontic Services³ Recementation of crowns, inlays, onlays/Crown repair	50%	70%



Important notes:

All benefits are based upon the allowable amount, which is the amount determined by BCBSNM as the maximum amount eligible for payment of benefits. A contracting dentist cannot bill for charges in excess of the allowable amount. Benefits for services provided by a non-contracting dentist will be based upon the same allowable amount, and it is likely that the non-contracting dentist will bill for amounts above this, resulting in higher out-of-pocket expenses.

1. This document does not contain a complete listing of the exclusions, limitations and conditions that apply to the benefits shown.
2. Deductible is waived.
3. A 12-month waiting period may apply. Prior continuous coverage in this plan can be applied to the waiting period requirement.

*** You must have purchased AcademicBlue health insurance in order to be eligible to purchase BlueCare Dental coverage. If elected, the dental cost will be paid directly to AHP.**

AcademicBlueSM is offered by Blue Cross and Blue Shield of New Mexico, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association.

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 New Mexico.

Blue Cross and Blue Shield of New Mexico complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sexual orientation, gender identity or sex.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-710-6984 (TTY: 711).

Dii baa akó nínizín: Dii saad bee yánlit'í'go Diné Bizaad, saad bee áká'anida'áwo'de'e", t'áá jik'eh, éí ná hólo', kojí' hódilnih 1-855-710-6984 (TTY: 711).

unm.myahpcare.com



[Home](#) [Benefits](#) [Claims](#) [Cost](#) [Enrollment](#) [Waiver](#) [Parent Information](#) [Previous Year](#) [Contact](#)

Benefits

- Plan details
- How your plan works
- Academic Emergency Services
- Dental Insurance

Enrollment

- Dependent enrollment deadlines
- Qualifying events
- Continuation Coverage

Waiver

- Links to submit your waiver
- Training on using waiver system

University of New Mexico

2019-2020

Welcome to your AcademicBlueSM Student Health Plan brought to you by Blue Cross Blue Shield of New Mexico.



Welcome to My AHP Care! Your one stop to find information about the insurance your school provides.

Quick Links

- | | |
|--|---|
| UNM HR Benefits | Temporary ID Card Login |
| Student Health and Counseling (SHAC) | Find a Doctor or Hospital |
| Create an AHP Account | Find a Pharmacy |
| Change Address, Phone, or Email | Find a Dental Provider |
| Single Sign On Brochure | UNM Privacy Notice |
| Find Group and Member ID | Nondiscrimination Notice |
| Blue Access for Members (BAM) | BCBS Quick Start Guide |

Provider Search

Enrollment/Waiver line

Claims information line

Enrollment/Waivers

support@ahpcare.com

Toll Free
1-855-865-0352

Fax
1-855-858-1964

UNM Team Health

Customer Service - Benefits Questions
1-844-866-2224

[View All](#)

Academic Emergency Services

Academic Emergency Services (AES) provides immediate access to assistance if you experience a travel related crisis while traveling over 100 miles from home or outside your home country.



Emergency Medical Evacuation, Repatriation and Emergency Family Assistance Services

- Emergency Medical Evacuation, Unlimited
- Medically Advisable Repatriation, Unlimited
- Return of Deceased Remains, Unlimited
- Visit by Family Member or Friend, up to \$5,000 with 3 day hospitalization
- Return of Dependent Children, up to \$5,000, if left unattended
- Emergency Return Home, up to \$2,500, in the event of illness or death of family member
- Bereavement Reunion, up to \$2,500, in the event of death of the student
- Return of Personal Belongings, up to \$1,000 in the event of evacuation or death
- Accidental Death and Dismemberment, \$25,000



Medical, Travel, Safety, and Legal Assistance

- Pre-travel information portal
- Physician referrals outside of the U.S.
- Medical monitoring during an emergency evacuation to ensure adequate care
- Prescription assistance
- Luggage lost in transit
- Passport replacement assistance
- Emergency travel arrangements
- Emergency translation assistance and/or interpreter referral
- Legal referral



Additional Benefits

- Security/Political Evacuation Coverage
- Natural Disaster Evacuation Coverage
- Emergency Reunion 3 Day Threshold

aes Academic Emergency Services

Group ID: GHS9999AHPCO
MEMBERSHIP TYPE
Global Medical and Travel Assistance Services

To contact Academic Emergency Services from the U.S. or Canada, call toll-free: (855) 873-3555

To contact Academic Emergency Services from outside the U.S. or Canada, dial the country access code followed by: 1 (610) 263-4660

AT&T country access codes can be found through local directory assistance or https://www.att.com/support_media/images/pdf/Country_Code_List.pdf. If there is no access code, proceed with calling direct to: 1 (610) 263-4660

AES SUPPORT
TOLL FREE 1(855) 873-3555
OUTSIDE THE US 1(610) 263-4660
EMAIL assistance@ahpcare.com

If you need medical or travel assistance, regardless of the nature or severity of your situation, please contact AES 24 hours a day/7 days a week.

Cut along the dotted line, then fold in half

To obtain additional pre-travel information or advice, or in the event of a medical, travel or security crisis, call Academic Emergency Services immediately.

For more details, visit unm.myahpcare.com.

Academic Emergency Services are available to you 24 hours a day, 7 days a week. Simply call the number on the membership card to get access to knowledgeable assistance coordinators who will help you navigate any unfamiliar cultures or circumstances.

Health Plan Tips



1. Save the customer care line, [1-877-865-0352](tel:1-877-865-0352), on your phone.
2. Notify Academic Health Plans and your school of any address changes.
3. Use the Emergency Room for emergency situations only.
4. Use the free 24/7 Nurseline to find the best plan of action for medical treatment.
5. Keep receipts of all payments made for medical services and prescriptions.
6. Always choose an in-network physician.
7. Use web tools located at unm.myahpcare.com to find a provider.
8. Check online reviews before choosing a physician.
9. Request generic drugs to save money.
10. If you need more information on your plan, unm.myahpcare.com should be your first stop.
11. Create an account by going unm.myahpcare.com and click on the Blue Access for Members (BAM) to access important healthcare information such as your insurance card and available discount programs.
12. Always carry your ID card with you.

ID Cards



- ▶ Returning Students continuing coverage will not receive a new ID card
- ▶ Request ID card
 - ▶ Go to unm.myahpcare.com and select “Find Group and Member ID” under Quick Links.
 - ▶ Go to bcbsnm.com/member.
 - ▶ Click Log In and Register Now.
- ▶ Contact UNM Team Health Customer Service at (844) 866-2224

The image shows the front and back of a BlueCross BlueShield ID card. The front side (left) features the BlueCross BlueShield logo, the UNM logo, and the following information: Subscriber Name: [Redacted], Identification Number: [Redacted], Group Number: 190482, PCP/SP SHAC \$5/10, PCP,SP T2/3 \$15,25/\$25,35, Urgent Care T2/3 \$15/25 (20%), RX SHAC \$10/20/30, RX T2/3 \$20/40/60, RxBIN: 011552, RxPCN: NMDR, and PPO. The back side (right) features the website www.bcbsnm.com, a barcode, the BlueCross BlueShield of New Mexico logo, contact information for Customer Service, Preauth-Medical, Preauth-MH/CD, and Rx Cust Service, and a disclaimer about group contracts and claims processing. The PRIME logo is also visible at the bottom.

03112 01252328 0000 0000001 010 1 117

BlueCross BlueShield

UNM

Subscriber Name: [Redacted]

UNM Student Health Plan
In Association with UNM Health

Identification Number: [Redacted]

Group Number: 190482

PCP/SP SHAC \$5/10

PCP,SP T2/3 \$15,25/\$25,35

Urgent Care T2/3 \$15/25 (20%)

RX SHAC \$10/20/30

RX T2/3 \$20/40/60

RxBIN: 011552

RxPCN: NMDR

PPO

PRIME

www.bcbsnm.com

BlueCross BlueShield of New Mexico

CUSTOMER SERVICE INQUIRIES Blue Cross and Blue Shield of New Mexico ATTN: NMBB P.O. Box 27630 Albuquerque, NM 871 25-7630
Providers: File claims with your local Blue Cross and Blue Shield plan.

Customer Service* 1-844-866-2224
Preauth-Medical* 1-844-866-2224
Preauth-MH/CD 1-888-898-0070
Rx Cust Service 1-800-423-1973
24/7 Nurseline 1-800-973-6329

*Group contracts directly

BlueCross BlueShield of New Mexico, an independent Licensee of BlueCross BlueShield Association, provides claims processing only and assumes no financial risk for claims.

Pharmacy Benefits Manager

Questions?

Contact us

Enrollment Information:

Academic HealthPlans

1-877-865-0352

support@ahpcare.com

Claims & Benefit Information:

UNM Team Health

1-844-866-2224

