



2021-2022

# STUDENT HEALTH INSURANCE PLAN



Baylor  
College of  
Medicine

Student health is essential to academic progress. In order to support this philosophy, Baylor College of Medicine maintains the Student Health Insurance Plan (the SHIP) and requires that all individuals enrolled in any BCM academic program maintain medical coverage. The SHIP provides a benefit for routine care, illness, and injury.

This brochure summarizes enrollment requirements, cost of coverage, how to access information about what is covered and not covered, and out-of-pocket expenses. There is also information about how to apply for a waiver of coverage should you have coverage with another employer-sponsored group health plan that meets the BCM waiver criteria.



## **HUMAN RESOURCES – BENEFITS OFFICE**

[ask-studentinsurance@bcm.edu](mailto:ask-studentinsurance@bcm.edu)  
P: 713.798.1500 | F: 713.798.5141

## **STUDENT ACCOUNT SERVICES**

[sas@bcm.edu](mailto:sas@bcm.edu)  
P: 713.798.4322

Student Account Services administers health care premium charges placed on a student's personal account.

## BENEFITS COVERED UNDER THE STUDENT HEALTH INSURANCE PLAN

The SHIP provides the medically necessary reasonable charge incurred by a covered person for loss due to a covered injury or sickness. If a covered person receives care from a preferred provider,\* any eligible expenses will be paid at the preferred provider level of benefits. Reduced or lower benefits will be provided when a non-preferred provider is used.

The chart below shows how benefits are paid for the major types of health care expenses. In addition to the SHIP's aggregate maximum, the Student Health Insurance Plan's Master Policy (the Policy) may contain benefit level maximums. Please review the entire Summary of Benefits included in the Policy brochure online for any additional benefit level maximums.

\*The "Per Policy Year" deductible applies to all benefits unless otherwise noted

### MEDICAL SUMMARY OF BENEFITS ▼

SERVICES	PREFERRED (In-Network)	NON-PREFERRED (Out -of-Network)
<b>Annual Out-of-Pocket Maximum</b>	\$1,250/Person \$2,500/Family  <i>The network deductible, charges for outpatient prescription drugs, the hospital emergency room copayment, the copayment for doctor and specialist's office visits apply toward the network out-of-pocket maximum.</i>	\$2,500/Person \$5,000/Family
<b>Per Policy Year Deductible</b>	\$0/Person	\$500/Person
<b>Inpatient Hospitalization Benefits</b>	80% of Allowable Amount	60% of Allowable Amount
<b>Mental Illness/ Chemical Dependency</b>	Paid as any other covered sickness	
<b>Prescription Drug Expenses</b>	<b>At pharmacies contracting with Prime Therapeutics Network:</b> Generic: 100% after \$10 copay Preferred Brand Name: 100% after \$40 copay* Non-Preferred Brand Name: 100% after \$60 copay* Mail-Order (90 day supply): Generic - \$30 copay Preferred Brand Name - \$120 copay* Non-Preferred Brand Name - \$180 copay*	<b>Prescriptions dispensed from an Out-of-Network pharmacy</b> Generic: 70% after \$10 copay Preferred Brand Name: 70% after \$40 copay* Non-Preferred Brand Name: 70% after \$60 copay*
<i>Contraceptives are now covered at 100% except for brand drugs with generic equivalents.                      Rx Pre-Certification is now required for certain drugs.                      *Copay plus the cost difference between the brand-name drug or supplies per prescription for which there is a generic drug or supply available.</i>		
<b>Emergency Room Care</b>	80% of Allowable Amount after \$100 copay	
<b>Physician Office Visit</b>	Preferred Primary Care Practitioner: 100% of Allowable Amount after \$10 copay Specialty Care Practitioner: 100% of Allowable Amount after \$10 copay <i>Preventive services per ACA guidelines are covered at 100% with no copayments or coinsurance</i>	70% of Allowable Amount
<b>Ambulance Expenses</b>	80% of the Allowable Amount	80% of the Allowable Amount
<b>Surgical Expenses</b>	80% of the Allowable Amount	60% of the Allowable Amount

## DENTAL COVERAGE

Dental Coverage is available for students and dependent children up to age 19 only.

Policy Year Maximum	\$1,000	
	Preferred Care	Non-Preferred Care
<b>Annual Deductible</b>	Individual: <b>\$75</b>   Family: <b>\$75</b>	Individual: <b>\$75</b>   Family: <b>\$75</b>
<b>Preventive Services</b>	90% of the Allowable Amount	90% of the Allowable Amount
<b>Basic Services</b>	70% of the Allowable Amount	70% of the Allowable Amount
<b>Major Services</b>	50% of the Allowable Amount	50% of the Allowable Amount
<b>Orthodontics</b>	Not covered	Not covered

## COST OF COVERAGE

**The 2021-2022 monthly premium for Student Only coverage is \$467.25.**

For some students, the monthly premium for the student is covered by BCM.

	WHO PAYS?	PREMIUM PERIOD
<b>School of Health Professions Students</b> (except for Genetic Counseling Students)	Paid by student	12 months
<b>Psychology Interns</b>	Paid by department	12 months
<b>Medical Students</b>	Paid by student	11 months for the 1st year
<b>Graduate Students</b>	1st year paid by Graduate School. All other years paid by department	11 months for the 1st year
<b>Genetic Counseling Students</b>	Paid by student	11 months for the 1st year
<b>DNP Students</b>	Paid by student	6 months for the 1st year

You may add eligible dependents to the SHIP. Please see the chart below for coverage levels and monthly premium costs

Coverage Level	Monthly Premium
Student Only	\$467.25
Student & Spouse/Domestic Partner	\$934.50
Student & One Child	\$913.59
Student & Two or More Children	\$1,359.93
Student & Spouse/Domestic Partner & One Child	\$1,380.84
Student & Spouse/Domestic Partner & Two or More Children	\$1,827.18

## VALUE-ADDED BENEFITS

Students enrolled in the SHIP are automatically covered by value-added benefits such as Travel Assistance and Accidental Death and Dismemberment insurance.

Information regarding these benefits is available at <https://bcm.myahpcare.com>.

## ELIGIBILITY AND ENROLLMENT

All incoming students must complete the enrollment process administered by Academic HealthPlans (AHP) or waive the SHIP if they have an individual policy that meets all of the BCM waiver criteria. If you wish to have coverage for your eligible family members, you must also complete the online dependent enrollment process during your initial enrollment period as indicated below:

If no action is taken during the initial enrollment period, you will be automatically enrolled in the SHIP. To avoid unnecessary charges or delay of health insurance coverage, complete your online enrollment or waiver as soon as possible during the specific enrollment period for your group as stated in the chart below. Psychology Interns have a paper enrollment/waiver process for which details will be discussed at orientation.

	Start Date	End Date
School of Health Professions (except for Genetic Counseling)	June 21, 2021	July 7, 2021
Psychology Interns	July 1, 2021	July 16, 2021
Medical Students	July 23, 2021	August 13, 2021
Graduate Students	July 23, 2021	August 13, 2021
Genetic Counseling Students	July 23, 2021	August 13, 2021
DNP Students	January 3, 2022	January 21, 2022

## DEPENDENT ENROLLMENT

You must enroll yourself and your family members during the enrollment period specified above. Enrollment of family members at any other time is possible only in limited circumstances. **Eligible family members include your spouse or domestic partner, and dependent children through age 25.**

Coverage for enrolled dependents of School of Health Professions Students (except Genetic Counseling) will be effective 6/21/2021. Coverage for enrolled dependents of Medical, Graduate and Genetic Counseling Students will be 7/23/2021. Payment arrangements for dependent coverage must be made through Academic HealthPlans. You can authorize quarterly credit card payments or opt for a one-time credit card charge for the entire coverage period. Please review the Academic HealthPlans (AHP) online information about enrolling dependents.

## ID CARDS

You will receive an insurance card in the mail. A few days after you enroll, you should create a profile on the Blue Cross and Blue Shield (BCBS) website and then print your ID card. You can download the BCBS App to your smart phone where your ID card can be displayed at the click of a button.

## MAKING A CHANGE TO YOUR COVERAGE

Should you experience a Qualified Change in Status, you have 31 days from the date of the qualifying event to notify the Human Resources – Benefits Office. A qualified change in status includes, but is not limited to, the birth of a child, marriage, divorce, or loss of dependent status. Upon request, the Human Resources – Benefits Office will provide a list of other qualifying events. Documentation of the event is required. Please note, the only changes allowed while on the Student Health Insurance Plan would be enrollment, waiver submission or adding a dependent during the academic year. All subject to review by the Human Resources – Benefits Office.

## WAIVING MEDICAL COVERAGE

Students may apply to waive participation in the SHIP if the student has alternate coverage that meets all the criteria listed below. **Waivers are approved for the current academic year only. You MUST apply for a waiver of coverage each academic Student Health Insurance Annual Change Period.**

Incoming students must apply for a waiver of medical coverage online at <https://bcm.myahpcare.com> within your assigned initial enrollment period. Once your waiver is submitted, your alternate coverage will be verified to ensure it meets the BCM waiver criteria. If your waiver is denied after the initial review, a second review will be conducted by a Human Resources – Benefits Representative. If your alternate coverage does not meet the BCM waiver criteria, you will be contacted by the Human Resources – Benefits Office and enrolled into the SHIP. You will then be responsible for paying the related premiums.

Students must maintain alternative coverage that meets the criteria below:

- Plan provides in-network coverage in the greater Houston metropolitan area (unless you are a Distance Education Student, then your plan must provide in-network coverage in the area in which you reside).
- Plan does not provide emergency-only coverage.
- In-network individual annual out-of-pocket maximum of \$8,150 or less
- Plan has at least bronze medal status under the Affordable Care Act and is ACA compliant. Short Term medical and Grandfathered ACA plans may not meet this criteria.
- Plan provides coverage for prescription drugs (prescription discount cards will not be accepted as coverage).

**IMPORTANT: By waiving the Program's coverage, BCM is released from any financial liability regarding the SHIP's charges related to health care services incurred during the period of time the waiver of coverage is in effect.**

If you become ineligible or lose your alternate coverage, you must contact the BCM Human Resources – Benefits Office immediately. You must enroll in the SHIP upon loss of your alternate coverage or obtain a new alternate policy that meets the above mentioned criteria. If another alternate policy is obtained, it is the responsibility of the student to submit a new waiver that includes the new policy information.

Once submitted, you will be notified by the Human Resources - Benefits Office of the approval or denial of your waiver. No adjustments or refunds will be made if coverage is later verified (after the deadline date) based upon additional information provided by you.



## FREQUENTLY ASKED QUESTIONS

**Q:** How do I access the Academic HealthPlans Website to make my waiver/enrollment election?

- A:**
- Go to <https://bcm.myahpcare.com/waiver>
  - Select the “Waiver” tab
  - Select the “Click Here to Waive or Enroll” link
  - Your 6-digit BCM ID with 2 leading zeros is your Login. Your date of birth in MMDDYYYY format will be your initial password
  - Select “Sign In”
  - Select the green “Enroll” button to enroll or the red button to “Waive”
  - Fill out all required information and click submit

**Q:** Why does the website say that I am not eligible to waive the SHIP?

**A:** Make sure you have entered your 6 digit BCM ID with 2 leading zeros. Your date of birth in MMDDYYYY format will be your initial password. If you are still experiencing the same issue, contact Academic HealthPlans at 1.855.856.4117.

**Q:** What do I need to have before I log on to waive the SHIP?

- A:**
1. An electronic copy of the front and back of your alternative coverage insurance card.
  2. An electronic copy of a Summary of Benefits and Coverage or other policy documentation for your alternative coverage.

**Q:** If I waive the SHIP when should I see a credit to my student account?

**A:** This process is administered by the Student Account Services Office. Please contact this office for information concerning when you can expect to see the credit for health insurance on your student account.

**Q:** Who should I contact with additional questions?

	ACADEMIC HEALTHPLANS	BCM HUMAN RESOURCES - BENEFITS OFFICE	BCM STUDENT ACCOUNT SERVICES
Type of question	Claim questions, coverage questions, ID card requests, website issues other than those discussed above	Waiver failures, when you are unable to log on, cost of coverage, change of status	Account credits for waived health insurance, when tuition is due
Phone	855.856.4117	713.798.1500	713.798.4322
Email or Website	<a href="https://bcm.myahpcare.com">https://bcm.myahpcare.com</a>	<a href="mailto:ask-studentinsurance@bcm.edu">ask-studentinsurance@bcm.edu</a>	<a href="mailto:sas@bcm.edu">sas@bcm.edu</a>

**HUMAN RESOURCES — BENEFITS OFFICE**

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