

## 2018-2019 Student Health Insurance Policy In Network Benefits – PLAN 2

<b>Plan Cost and Effective Dates for 2018-2019</b>	<b>\$2,180 Annual 08/01/2018 – 08/14/2019</b> <b>\$885 Fall semester 08/01/2018 - 12/31/2018</b> <b>\$1,295 Spring semester 01/01/2019 – 08/14/2019</b>
<b>Annual Maximum</b>	<b>Unlimited</b>
<b>Annual Out-Of-Pocket Maximum (Individual)</b>	<b>\$7,150</b>
<b>Annual Deductible (Individual)</b>	<b>\$500</b>
<b>Your Plan Pays</b>	<b>80% after co-pay and/or deductible, if applicable</b>

### Services You May Need

### Your Cost

<b>Physician or Specialist Office Visit</b>	\$25 per visit co-pay <b>and</b> 20% of Negotiated Charge <i>Deductible <u>does not</u> apply</i>
<b>Inpatient Hospitalization</b>	20% of Negotiated Charge <i>Deductible <u>applies</u></i>
<b>Urgent Care</b>	\$35 per visit copay <b>and</b> 20% of Negotiated Charge <i>Deductible <u>does not</u> apply</i>
<b>Emergency Room</b>	20% of Negotiated Charge <i>Deductible <u>applies</u></i> <b>Note: You will receive separate bills for physician charges, laboratory and x-rays.</b>
<b>X-ray and Lab</b>	20% of Negotiated Charge <i>Deductible <u>does not</u> apply</i>
<b>Prescription Drug Co-Pays</b>	\$15/\$30/\$45/\$100 <i>Deductible <u>does not</u> apply</i> <b>Refer to Plan Benefits Summary</b>
<b>Physical Therapy</b>	20% of Negotiated Charge <i>Deductible <u>applies</u></i>
<b>Immunizations and Well Visits</b>	See Attached List

To receive the highest level of benefit, be sure to visit a preferred (In-network) provider. To locate a preferred provider, go to [www.aetnastudenthealth.com/bgsu](http://www.aetnastudenthealth.com/bgsu). For out of network benefits please refer to your 2018-2019 Plan Design and Benefits Summary available online at [www.aetnastudenthealth.com/bgsu](http://www.aetnastudenthealth.com/bgsu) or at the BGSU Student Insurance webpage, [www.bgsu.edu/studentinsurance](http://www.bgsu.edu/studentinsurance).

PLEASE READ CAREFULLY BEFORE DECIDING WHETHER THIS PLAN IS RIGHT FOR YOU.

- Please read the Bowling Green State University Summary of Benefits at [www.aetnastudenthealth.com/bgsu](http://www.aetnastudenthealth.com/bgsu) carefully before enrolling. While this document and the Bowling Green State University brochure describe important features of the plan, there may be other specifics of the plan that are important to you and some limit what the plan will pay.
- Please view your full plan description, which is contained in the Master Policy issued to the school, you may view it at [www.aetnastudenthealth.com/bgsu](http://www.aetnastudenthealth.com/bgsu) or contact us at (877) 373-3737.

\*\* Aetna cannot pay for health care services provided in a country under sanction by the U.S. unless permitted under an Office of Foreign Asset Control (OFAC) license.

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The services listed below are covered by the Plan at 100% when you see an in-network provider:

**This includes routine screenings and checkups. It also includes counseling you get to prevent illness, disease or other health problems.**

Many of these services are covered as part of physical exams. These include regular checkups, and routine gynecological and well-child exams. You won't have to pay out of pocket for these preventive visits, when provided in network.

But these services are generally not preventive if you get them as part of a visit to diagnose, monitor or treat an illness or injury. Then copays, coinsurance and deductibles may apply.

Aetna follows the recommendations of national medical societies about how often children, men and women need these services. Be sure to talk with your doctor about which services are right for your age, gender and health status.

#### **Screenings for:**

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- Blood pressure
- Cholesterol (for adults of certain ages or at higher risk)
- Colorectal cancer (for adults over age 50)
- Depression
- Type 2 diabetes (for adults with high blood pressure)
- Human immunodeficiency virus (HIV)
- Obesity
- Tobacco use
- Lung cancer (for adults age 55 and over with history of smoking), effective January 1, 2015
- Syphilis (for all adults at higher risk)

#### **Medication and supplements:**

- Aspirin for men and women age 45 and older with certain cardiovascular risk factors
- Vitamin D supplements for adults age 65 and older with certain conditions
- Tobacco cessation medications approved by the U.S. Food and Drug Administration (FDA), including over-the-counter medications when prescribed by a health care provider and filled at a participating pharmacy

#### **Counseling for:**

- Alcohol misuse
- Diet (for adults with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease)
- Obesity
- Sexually transmitted infection (STI) prevention (for adults at higher risk)
- Tobacco use (including programs to help you stop using tobacco)

#### **Immunizations (Doses, recommended ages and recommended populations vary):**

- Diphtheria, pertussis, tetanus (DPT)
- Hepatitis A and B
- Herpes zoster
- Human papillomavirus (HPV)
- Influenza
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Varicella (chickenpox)

#### **Covered preventive services for women**

##### **Screenings and counseling for:**

- BRCA (counseling and genetic testing for women of high risk with no personal history of breast and/or ovarian cancer)
- Breast cancer chemoprevention (for women at higher risk)
- Breast cancer (mammography every 1 to 2 years for women over 40)
- Cervical cancer (for sexually active women)
- Chlamydia infection (for younger women and other women at higher risk)
- Gonorrhea (for all women at higher risk)
- Interpersonal or domestic violence
- Osteoporosis (for women over age 60 depending on risk factors)

##### **Medication and supplements:**

- Folic acid supplements (for women of child-bearing ages)
- Risk-reducing medications such as tamoxifen and raloxifene, for women age 35 and older at increased risk for breast cancer, effective October 1, 2014

##### **Contraceptive products and services:**

- Prescribed FDA-approved female over-the-counter or generic contraceptives<sup>1</sup> when filled at an in-network pharmacy
- Two visits a year for patient education and counseling on contraceptives is also covered under your Aetna medical plan

#### **Covered preventive services for pregnant women**

- Routine prenatal visits (you pay your normal cost share for delivery, postpartum care, ultrasounds or other maternity procedures, specialist visits and certain lab tests)
- Anemia screenings
- Diabetes screenings
- Bacteriuria urinary tract or other infection screenings
- Rh incompatibility screening, with follow-up testing for women at higher risk
- Hepatitis B counseling (at the first prenatal visit)
- Expanded counseling on tobacco use
- Breastfeeding interventions to support and promote breastfeeding after delivery, including up to six visits with a lactation consultant

#### **Covered preventive supplies for pregnant women**

- Certain standard electric breastfeeding pumps (non-hospital-grade) anytime during pregnancy or while you are breastfeeding, once every three years
- Manual breast pump any time during pregnancy or after delivery for the duration of breastfeeding
- Breast pump supplies, if you get pregnant again before you are eligible for a new pump. For more information, go to [www.aetna.com](http://www.aetna.com) and search for "breast pumps." Or call Member Services for details on how to use this benefit.

<sup>1</sup>Brand-name contraceptive drugs, methods or devices only covered with no member cost sharing under certain limited circumstances when required by your doctor due to medical necessity.