

# Snapshot

## CALIFORNIA POLYTECHNIC STATE UNIVERSITY, SAN LUIS OBISPO J-1 SCHOLARS INTERNATIONAL SCHOLAR INSURANCE PLAN

### Rates and Important Dates

Rates are effective 09/08/2020 to 09/07/2021. Rates include insurance premium and administrative fees.

	Student	Spouse/ Domestic Partner	Each Child	Two or More Children
<b>Monthly</b> 09/08/2020 to 09/07/2021	\$ 149.00	\$ 149.00	\$ 149.00	\$ 298.00

### What's Covered (Treatment must be Medically Necessary)

- Doctor visits
- Emergency expenses
- Surgery, in- and out-patient
- Physical therapy, chiropractic care, acupuncture
- Preventive care
- Tests, procedures, and lab services, such as X-rays and blood draws
- Pregnancy and maternity
- Prescription drugs

**Limitations, deductibles, coinsurance, and copays may apply.** Please see the Plan Certificate for full benefit details.

**Coinsurance** is the cost sharing between what the insurance pays and what you pay. This insurance plan pays 100% when you use Blue Card PPO providers, part of Blue Cross Blue Shield, and 70% when you use out-of-network providers.

### Benefits

	Blue Cross Blue Shield PPO Provider You Will Pay:	Out-of-Network Provider You Will Pay At Least: <sup>†</sup>
<b>Deductible</b>	\$150 per person, per policy year	\$150 per person, per policy year
<b>Office Visit</b>	\$10 copay per visit (deductible waived)	30%
<b>Urgent Care Facility</b>	\$0	30%*
<b>Urgent Care Physician Visit</b>	\$10 copay per visit (deductible waived)	30%*
<b>Emergency Room</b>	\$150 copay per visit (waived if admitted)	30% after \$150 copay per visit* (waived if admitted)
<b>Prescription Drugs</b>	\$15 Generic / \$30 Brand-Name (deductible waived)	\$15 Generic / \$30 Brand-Name (deductible applies)
<b>Out-of-Pocket Maximum</b>	\$5,000 per person, per policy year	\$5,000 per person, per policy year

<sup>†</sup> Using out-of-network providers will cost you more money! Coinsurance is payable for Reimbursable Charges, the normal cost the provider would charge for services in the absence of insurance. Some out-of-network providers charge more than Reimbursable Charges and you will be responsible for these excess amounts over the listed coinsurance.

\* If true emergency, the benefit will be paid at the Blue Card PPO rate.

2020–2021



### Questions

**Enrollment & Eligibility**  
Relation Insurance Services  
(800) 537-1777

**Benefits**  
GeoBlue  
(844) 268-2686

**Plan Materials & Information**  
[www.4studenthealth.com/calpoly-scholars](http://www.4studenthealth.com/calpoly-scholars)

### Insurance ID Card

Once you receive a Welcome Email from GeoBlue you can download your ID card. Visit [www.geobluestudents.com](http://www.geobluestudents.com) to set up an account! For help, contact Relation at (800) 537-1777.

**Carry your ID card  
with you at all times!**

### Getting Care

Visit [www.geobluestudents.com](http://www.geobluestudents.com) or call (844) 268-2686 to find a **Blue Cross Blue Shield PPO** doctor, urgent care center or hospital.

*Revised June 9, 2020 3:00 PM*

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If there are any discrepancies between this document and the Plan Certificate, the Plan Certificate will govern.