Frequently Asked Question Topics

If you have a question that is not addressed in these FAQs, please contact BCBSNC at 1-888-351-8283 or email@studentbluenc.com.

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A. **Enrollment**

1. **How can eligible students enroll in the UNC System Student Health Insurance Plan (SHIP)?**

   The FAQs below explain the eligibility criteria for enrolling in either the Hard Waiver or Voluntary versions of the UNC SHIP. After determining which SHIP you are eligible for, go to [www.bcbsnc.com/student](http://www.bcbsnc.com/student) to enroll.

2. **What happens if a student does not waive out of the UNC System Hard Waiver SHIP?**

   Students who meet the three eligibility criteria for the Hard Waiver SHIP and do not successfully waive out of it through the secure BCBSNC web portal by the deadline (i.e., September 10, 2015 for fall semester and January 30, 2016 for spring / summer semester) will be automatically enrolled in the UNC System Hard Waiver SHIP each semester, and are obligated for the cost of the plan's premium for that semester. The UNC System Hard Waiver SHIP's premium is included in the "cost of attendance" used for need-based financial aid consideration.

3. **When will I receive my insurance card?**

   ID cards will be issued for those who have enrolled as of the August 1st policy begin date. If you enroll after August 1, insurance cards will be mailed within 3-5 business days of your enrollment at [www.bcbsnc.com/student](http://www.bcbsnc.com/student) or when your university notifies BCBSNC of your SHIP enrollment. If you do not receive your card in accordance with the timeline above, contact us at email@studentbluenc.com or call 1-888-351-8283.

4. **How do I request ID cards, view benefits, and check the status of claims?**
Once you have been enrolled, you can access BlueConnectSM from the menu on your school’s home page at www.bcbsnc.com/student. You will need to register to access this information.

5. How do I update my address?

You may contact Student Blue at 1-888-351-8283 or email@studentbluenc.com to update your address. It is important to maintain a current address with Student Blue in order to receive information related to your health insurance plan in a timely manner.

B. Hard Waiver

1. What does "hard waiver" mean?

The term "hard waiver" means that any student meeting three specific criteria (see criteria) is required to show evidence of an existing creditable coverage health insurance policy OR enroll in the UNC System Hard Waiver SHIP. "Hard waiver" does not mean a student must enroll in the UNC System Hard Waiver SHIP; it means the Hard Waiver SHIP will be charged to the student's university account and can only be removed if the student shows evidence of an existing creditable coverage health insurance by submitting that information through the secure web portal at www.bcbsnc.com/student.

A student is encouraged to compare the UNC System Hard Waiver SHIP with other health insurance options (e.g., being a dependent on a parent's health insurance plan, an employer's health insurance plan, or having individual plan coverage through another source) before making a decision to waive out of the Hard Waiver SHIP or not.

2. Why does the UNC System require Student Health Insurance?

In August 2009, the UNC Board of Governors approved the implementation of a "hard waiver" student health insurance plan on all sixteen 4-year campuses beginning in fall semester 2010. Prior to that time, eleven of the sixteen campuses already had hard waiver plans. By creating a single, system-wide plan, campuses were able to leverage collectively their “market muscle” to establish a quality plan at a very competitive premium.

The term "hard waiver" means any student meeting three specific criteria (see FAQ B.3.a and B.3.b) is required to show evidence of an existing creditable coverage health insurance policy OR enroll in the UNC System SHIP. "Hard waiver" does not mean a student must enroll in the UNC System Hard Waiver SHIP; it means a student must show evidence of creditable coverage health insurance, and enrolling in the UNC System Hard Waiver SHIP is one means to meet that requirement.

A student is encouraged to compare the UNC System Hard Waiver SHIP against other options, e.g., being a dependent on a parent's health insurance plan, or having an employer's health insurance plan, having individual plan coverage through another source. The UNC System Hard Waiver SHIP provides a common set of benefits across
all sixteen campuses. The UNC System Hard Waiver SHIP policy is in effect from August 1st - July 31st. A student eligible for the UNC System Hard Waiver SHIP is billed on the student’s university account by semester (defined as August 1st - December 31st and January 1st - July 31st). For more information, please visit your campus’ student health insurance page at www.bcbsnc.com/student.

3. What are the eligibility requirements for the UNC System Student Health Insurance Plan?

For the most current information, refer to the UNC Student booklet section, “When Coverage Begins and Ends”. A student is defined as eligible for coverage under the Hard Waiver requirement. If you have any questions, please contact BCBSNC at 1-888-351-8283 or email@studentbluenc.com.

4. How does a student waive out of coverage under the UNC System Hard Waiver SHIP?

Any student meeting all three criteria who has an existing creditable coverage health insurance policy has the option to easily and quickly waive out of the UNC System Hard Waiver SHIP on-line through the BCBSNC secure web portal. No paperwork is required. The web portal to waive out of the UNC System Hard Waiver SHIP is located at www.bcbsnc.com/student.

Students will receive an email from BCBSNC immediately after submitting a waiver request and it will include a confirmation number which provides proof of the student’s waiver submission. Later, a Verification Email will be sent to the student after the student’s submitted waiver request is verified. If BCBSNC believes there is an issue with any of the information in the student’s waiver submission, then BCBSNC will contact the student. The waiver and enrollment period for fall semester will end on September 10, 2015 and on January 30, 2016 for spring / summer semester.

If you do not meet the eligibility requirements for the UNC System Hard Waiver SHIP, then do not submit an online waiver request providing proof of an existing creditable coverage health insurance since the Hard Waiver rules do not apply to you.

5. The waiver requirement calls for "existing Creditable Coverage". What does Creditable Coverage mean?

Creditable Coverage means coverage under any of the following: (a) a self-funded employer group health plan under the Employee Retirement Income Security Act of 1974; (b) group or individual health insurance coverage; (c) part A or part B of title XVIII of the Social Security Act; (d) Title XIX of the Social Security Act, other than coverage consisting solely of benefits under section 1928; (e) Chapter 55 of Title 10, United States Code; (f) a medical care program of the Indian Health Service or of a tribal organization; (g) a state health benefits risk pool; (h) a health plan offered under chapter 89 of Title 5, United States Code; (i) a public health plan (as defined by federal regulations); (j) a health benefit plan under section 5(e) of the Peace Corps Act (22 U.S.C. § 2504(e));
(k) the Health Insurance Program for Children established in Part 8 of Chapter 108A of the General Statutes, or any successor program.

You are encouraged to check with your health insurance company to find out if your coverage is defined as "creditable coverage" under ERISA. Creditable Coverage includes continuation or conversion coverage but does not include accident only, credit, coverage for onsite medical clinics, disability income, Medicare supplement, long-term care insurance, dental, vision, coverage issued as a supplement to liability insurance, insurance arising out of a workers’ compensation or similar law, automobile medical payment insurance, or insurance under which benefits are payable with or without regard to fault and that is statutorily required to be contained in any liability insurance policy or equivalent self-insurance.

6. Does a student need to waive every semester?

In each semester in which a student meets the eligibility requirements for the UNC System Hard Waiver SHIP, then the option to waive out of the UNC SHIP is available. However, during the waiver submission process for the fall semester, a student will be able to select ‘Yes’ or ‘No’ during the online waiver process and that will determine if BCBSNC will again use the student’s fall semester waiver request information for the spring / summer semester.

If a student selects 'Yes', then the information will automatically be submitted for verification again for the spring / summer semester. Therefore, the student completes the online waiver request form once a school year, but it is verified each semester. However, if your fall semester information changes before January 30, 2016, then a student should resubmit a waiver request with the correct information about the student’s existing credible coverage health insurance.

If a student selects 'No', it will be the student's responsibility to resubmit or renew the spring / summer semester waiver request during the waiver period that ends January 30, 2016.

If you have questions about the waiver process, contact Student Blue at 1-888-351-8283 or email@studentbluenc.com.

7. Can a student enroll in the UNC System Hard Waiver SHIP after successfully waiving out?

Yes, under the following conditions. The UNC System requires a student who meets the Hard Waiver eligibility requirements to have health insurance each semester while enrolled at a UNC System campus. A student who successfully waived coverage under the UNC System Hard Waiver SHIP but subsequently experiences ineligibility under another creditable coverage health insurance plan may elect to enroll for coverage under the UNC System Hard Waiver SHIP within 31 days of the date of ineligibility under the other creditable plan by contacting BCBSNC at 1-888-351-8283 or email@studentbluenc.com.
8. What is “ineligibility” and what is a “qualifying event”?

Ineligibility may come in many forms, such as aging off a parent’s group plan; a student gets married and is not eligible to continue on the parent’s plan; or, exhausting COBRA. However, there are other forms of qualifying events. They are: if you are a new freshman or transfer student to the campus, birth or adoption of a child, and if a student, spouse, same sex domestic partner, or a child arrives in the country. Please remember, with every qualifying event, students’ spouses / same sex domestic partners and/ or child(ren) have 31 days of eligibility to enroll in the UNC System SHIP. For more information concerning qualifying events send an email to email@studentbluenc.com.

C. Using My Benefits

1. What should I do if I need to see a doctor?

If the student has paid the campus Student Health Services Fee for the current semester, we recommend that the student first visit the campus Student Health Center in order to receive the highest level of benefits available in the plan. If you are out of the area or your campus student health center is closed, we recommend you see an in-network provider.

2. How can I locate in-network providers?

You may locate in-network providers within North Carolina, outside of North Carolina, and on a worldwide basis by using the Provider Search Tool. If searching for a provider in North Carolina, be sure to select “Blue Options (Group PPO Plan)” from the “Choose a Plan” dropdown.

3. How do I file a medical claim?

If you see an in-network provider in the U.S., the provider will file the claim for you. Please be sure to present your insurance card at the time of service so the claim can be filed under your plan.

If a provider is out-of-network and does not file a medical claim for you, you will be responsible for filing the claim. There is an 18-month timely filing limit for medical claims. You will need to print and complete the member claim form. You will also need to attach an itemized receipt for the service that includes the subscriber name, subscriber number, provider name, provider identification number, procedure code(s), diagnosis code(s), and charged amount(s). Please note that credit card receipts are not itemized receipts. We highly recommend that you maintain a copy of the claim form and receipt for your records.

4. How do I file a prescription claim?

You should present your insurance card each time you fill a prescription. If the pharmacy is out-of-network and does not file a prescription claim for you, you will be responsible for filing the claim. There is a one-year timely filing limit for prescription claims. You will
need to print and fill out the prescription claim form. You will also need to include an itemized receipt for your purchase. Please see page two of the claim form to find a list of items that your receipt must include. Please note that credit card receipts are not itemized receipts. We highly recommend that you maintain a copy of the claim form and receipt for your records.

5. **Under which tier is my prescription categorized?**

To determine what your prescription’s tier is, you may enter the prescription name here. Please see the Summary of Benefits for information regarding your benefits for prescriptions.

6. **What about injections and immunizations -- are they covered under the UNC SHIP?**

Yes. There is no injection or immunization benefit maximum, however, please check www.healthcare.gov to check the list of injections/immunizations covered under the UNC SHIP’s Preventative Care/Wellness Benefit with no cost sharing. Eligible expenses for injections and immunizations are covered at 100% only if administered by your Student Health Center and 80% if not administered by your Student Health Center. Deductibles and co-pays are waived only when services are rendered at your Student Health Center for the injection/immunization benefit, and will apply to all services received outside your Student Health Center.

7. **What if I have a medical question in the middle of the night?**

If you have a non-life threatening question, you can call your primary care physician or you can call Health Line BlueSM at 1-877-477-2424. This 24-hour, health information line allows you to have a confidential conversation about your health questions with a registered nurse any time of day or night.

If you have a life threatening emergency, please call 9-1-1.

8. **Is emergency care covered?**

BCBSNC provides benefits for the treatment of an emergency. If you go to an emergency room for treatment of an emergency, your benefits will be the same regardless of whether you use an in-network or out-of-network provider. Please see your plan’s Summary of Benefits on your campus page at www.bcbsnc.com/student for a description of emergency room benefits.

If you are admitted to the hospital from the emergency room or held for observation, your initial hospital admission is eligible for in-network benefits and any applicable emergency room co-payment will be waived. If you are held for observation, outpatient benefits will apply and any applicable emergency room co-payment will be waived. Once you are admitted as a hospital inpatient, your benefits will be paid like any other inpatient facility or professional charges. However, you may need to transfer to a participating hospital.
once your condition has been stabilized in order to continue receiving in-network benefits.

9. What happens if I do not go to my Student Health Center first for treatment?

Deductibles and co-pays are waived only when services are rendered at your Student Health Center. Deductibles and co-pays do apply to all services received outside your Student Health Center. If a student goes to an off-campus medical provider, the student will be responsible for co-pays, deductibles, and any portion of the bill not covered by Student Blue. Preventive services are provided at 100% benefit at Student Health Services and BCBSNC in-network providers.

10. If I am already established with my own provider, what do I need to do?

Check to see if your provider is in-network by going to www.bcbsnc.com/student.

11. What benefits are mandated by the State of North Carolina?

State of North Carolina regulations mandate coverage for certain services and procedures. Please refer to the North Carolina Department of Insurance site for the latest information: http://www.ncdoi.com/_Publications/Consumer%20Guide%20To%20Health%20Insurance_CHE1_SmPU.pdf.

12. What does my wellness benefit cover?

"Wellness Services" include, but are not limited to, routine doctor’s visits, routine physical examinations, prescription vitamins, preventive laboratory (examples: STI screening, Comprehensive Metabolic Panel, Basic Metabolic Panel, Electrolyte Panel, Liver Panel, Lipid Profile), preventive x-ray services, weight counseling, testing for ADD and ADHD, testing for allergies, and prescriptions for smoking cessation. The plan will pay as defined in the plan summary for your campus. The charges must be incurred while the student is insured.

13. How can I find out if specific treatments or services are covered?

Go to your campus’ student health insurance page at www.bcbsnc.com/student and review the Plan Benefits or email us at email@studentbluenc.com, or call 1-888-351-8283.

14. Is any continuation of coverage available after I leave a UNC campus?

No.

15. Is the UNC System Hard Waiver SHIP primary coverage?

Yes, a student’s UNC System SHIP is primary coverage.
16. What if I am enrolled in two or more UNC institutions?

If a student is enrolled at two or more UNC institutions simultaneously, enrollment in the UNC System Hard Waiver SHIP is through the campus where the Student Health Services Fee is paid.

17. What is “prior review”?

Some in-network providers will request prior review when necessary, and it is your responsibility to ensure that out-of-state providers and out-of-network providers request prior review and receive certification. Providers will need to call BCBSNC using the number on the back of your ID card for prior review and to obtain certification.

E. What is the Student Blue Student Assistance Program (SAP)?

Through the Student Blue Student Assistance Program, Master's-level clinical professionals are available 24/7, 365 days a year to offer students confidential counseling, education, and referral assistance. In addition to these core services, SAP also offers:

- Work/life services, such as information and referrals for academic service providers in the area.
- Chronic disease management to help students manage a chronic condition such as migraines, diabetes or asthma while away from home.
- Access to discount programs featuring retailers offering deals on gym memberships and fitness gear.
- Online health assessment to allowing students to assess overall health and general risks.
- Weight management program such as online support, resources and tools to help students manage their weight.

Students can access this free service online through [http://www.bcbsnc.com/student](http://www.bcbsnc.com/student) or by calling 1-855-577-7651.

H. Traveling in the US and Abroad

1. Does my policy cover me outside of North Carolina?

Yes. Student Blue is a worldwide policy, so you will have coverage wherever you travel. The plan does have in-network providers around the world. You may search for providers outside of North Carolina on our website. If you visit an in-network provider in another state, you will need to make sure the provider files the claim to the BCBS of the state in which services are received. For example, if you see an in-network provider in Florida, the provider will need to file a claim to Blue Cross and Blue Shield of Florida. Providers should be sure to include the alpha prefix (three letters preceding the W on
your BCBSNC member ID card) when filing claims to the local BCBS. Visit us at www.bcbsnc.com/student.

If you are on a UNC campus-sponsored study abroad trip, then you must meet the UNC System’s requirements for such activities. Check with your campus Study Abroad Office for the details.

2. How do I file an international claim?

If you receive a bill for inpatient, outpatient, or professional medical care received outside the United States, please send the itemized bill with an international claim form to our foreign claims center at:

BlueCard Worldwide Service Center
P. O. Box 261630
Miami, FL 33126

The BlueCard Worldwide Service Center translates foreign claims and calculates the foreign exchange rate. The Service Center then forwards the claim to BCBSNC to be processed. It is highly recommended that you maintain a copy of the claim form and bill for your records.

3. Does the UNC System SHIP cover immunizations required for international travel?

Injections and immunizations (including flu shots), injections for allergies, and, needle stick HIV testing administered in the doctor's office are covered at your Student Health Center. Deductibles and co-pays are waived only when services are rendered at your Student Health Center, and will apply to all services received outside your Student Health Center.

I. Federal Regulations

1. What does "portability of insurance" mean?

The Health Insurance Portability and Accountability Act (HIPAA) provides rights and protections for participants and beneficiaries in group health plans. HIPAA includes protections for coverage under group health plans that limit exclusions for preexisting conditions; prohibit discrimination against employees and dependents based on their health status; and allow a special opportunity to enroll in a new plan to individuals in certain circumstances. The student is responsible to maintain documentation of continuous coverage.

2. Does UNC consider a "health care sharing ministry" as an acceptable means to meet the hard waiver requirement?

Yes. In accordance with PPACA, a health sharing ministry is defined as an organization described in Section 501(c) of the IRC (including corporations, and any community chest, fund, or foundation, organized and operated exclusively for religious, charitable,
scientific, or testing for public safety) and is exempt from taxation under section 501(a). Members of the ministry share a common set of ethical or religious beliefs and share medical expenses, and retain membership even after they develop a medical condition. The health sharing ministry must have been in existence (and sharing medical expenses) at all times since December 31, 1999, and must conduct an annual audit by an independent certified public accountant, available to the public upon request. BCBSNC, as part of the waiver request process, ensures that any such waiver request that comes from a health sharing ministry meets the above conditions that are found in the PPACA.