



**Blue Care
Network
of Michigan**



UNIVERSITY OF
**DETROIT
MERCY**
Build A Boundless Future

2023-2024 University of Detroit Mercy Student Health Plan Blue Elect PlusSM POS

About this plan

Blue Elect Plus POS makes finding care easy. You get access to Blue Care Network's large network of health care providers as well as the flexibility of choosing one in or out of network.

Once enrolled, you can go to any physician or specialist without a referral. However, you must first select a BCN-participating primary care provider to be your ongoing health care partner.

Learn more

Read all the plan documents before you enroll. You'll learn about the full plan benefits, enrollment and waiver dates, plus eligibility rules.

For more information and to enroll, visit <https://yourstudenthealthplan.com/udmercy> or call Blue Water Benefits Administrators at **947-941-1388**.

How much does it cost?		
Coverage period	Coverage dates	Student
Annual	08/19/23 - 08/18/24	\$3,159

Coverage for your eligible family members is also available. Please refer to the full eligibility/enrollment details.

Benefits at a Glance 2023-2024

Member's responsibility (deductibles, copays, coinsurance and dollar maximums)		
Benefits	In network	Out of network
Deductible (Coinsurance applies once the deductible has been met.) Note: The deductible will apply to certain services as defined below.	\$350 per member/\$700 per family per benefit year	\$8,150 per member/\$16,300 per family per benefit year
Fixed dollar copays	\$20 for office visits \$35 for urgent care visits \$100 for emergency room visits \$50 for ambulance service \$40 for specialist visits \$150 for high-tech imaging	\$35 for urgent care visits \$100 for emergency room visits \$50 for ambulance service
Coinsurance Note: Coinsurance applies once the deductible has been met	25% for selected services 50% for selected services	50% for selected services
Coinsurance Maximum	None	None
Out of Pocket Maximum - applies to deductibles, copays and coinsurance amounts for all covered services	\$6,350 per member/\$12,700 per family per benefit year	\$12,700 per member/\$25,400 per family per benefit year



Preferred generic	\$6 copay	Not covered
Preferred brand	\$60 copay	Not covered
Preferred specialty	20% coinsurance (max \$200)	Not covered

This is intended as an easy-to-read summary and provides only a general overview of your benefits. It isn't a contract. Additional limitations and exclusions may apply to covered services. For a complete description of benefits, please see the applicable Blue Care Network certificates and riders. Payment amounts are based on the Blue Care Network approved amount, less any applicable deductible, coinsurance and/or copay amounts required by the plan. If there is a discrepancy between this Benefits-at-a-Glance and any applicable plan documents, the plan document will control. This coverage is provided pursuant to a contract entered into in the state of Michigan and shall be construed under the jurisdiction and according to the laws of the state of Michigan.



Blue Water Benefits Administrators is an independent company providing third-party administration of Student Health Plans to eligible Blue Care Network members.
Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.

