



Below is a brief summary of the benefits for this plan. For more details, visit hr.msu.edu/benefits/graduate-assistants/index.html or call MSU Human Resources at **517-353-4434** or **1-800-353-4434**.

Your health plan also includes the following:

Comprehensive affordable coverage

- Preventive care covered at 100% with no deductible, copayment or coinsurance
- Prescription coverage
- Low out-of-pocket costs when you get care from MSU Student Health Services at Olin Health Center
- Premiums paid by MSU, with additional annual stipend for dependents

Coverage that travels

- Emergency care anywhere in the world
- BlueCard® access to hospitals and doctors across the country who participate with Blue plans

Online and phone resources

- Tools at bcbsm.com to help you manage your coverage
- Call **1-800-287-4103** to speak with an experienced Blue Care Network Customer Service representative who can answer your benefit questions

Who's eligible for this plan?

MSU will cover the cost of the health plan for the Graduate Assistant. The premium for spouses/other eligible individuals, and eligible dependents of Graduate Assistants are partially funded by Michigan State University. MSU will contribute \$2,500 per academic year toward the cost of a spouse/OEI or child, and \$2,700 per academic year toward the cost of a spouse/OEI and one or more children. The MSU contribution amount is prorated based on dependents enrolled, as well as, the enrollment period.

Enrollment dates			Coverage period	
Enrollment period	Enrollment opens	Enrollment deadline	Effective date	Termination date
Fall	July 26, 2023	Sept. 30, 2023	Aug. 16, 2023	Feb. 15, 2024
Spring I	Dec. 1, 2023	Feb. 28, 2024	Jan. 1, 2024	Aug. 15, 2024
Spring II	Dec. 1, 2023	Feb. 28, 2024	Feb. 16, 2024	Aug. 15, 2024
Spring III	April 17, 2024	June 30, 2024	May 16, 2024	Aug. 15, 2024
First quarter	July 26, 2023	Sept. 30, 2023	Aug. 16, 2023	Nov. 15, 2023
Second quarter	Oct. 17, 2023	Nov. 30, 2023	Nov. 16, 2023	Feb. 15, 2024
Third quarter	Jan. 17, 2024	Feb. 28, 2024	Feb. 16, 2024	May 15, 2024
Fourth quarter	April 17, 2024	June 30, 2024	May 16, 2024	Aug. 15, 2024

Note: Dependent coverage can't exceed the graduate assistant coverage period.

If you have questions about your MSU Student Health Plan, contact any of the following:

<p>Plan eligibility: MSU Human Resources 517-353-4434 Email: SolutionsCenter@hr.msu.edu Web: hr.msu.edu/benefits/graduate-assistants/index.html</p>	<p>Plan coverage: Blue Care Network 1-800-287-4103 Enrollment: bcbsm.com/msu</p>	<p>MSU Olin Student Health Services To schedule an appointment, call: 517-353-4660 Email: olin@msu.edu Web: olin.msu.edu Referrals: 517-884-3556 Billing: 517-355-4516 or 517-355-4517</p>
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Getting care

- **Primary care:** **MSU Student Health Services at Olin Health Center** should be your first stop. The doctors there can provide routine health services or issue a referral for specialty care.
- **Specialty care:** Your MSU Student Health Services doctor will recommend special care should you need it. Check that your doctor is sending you to a specialist in BCN's network to ensure you pay the least for your care. You may need special approval from BCN for certain services and for services from specialists who aren't part of your plan's network.
- **Important note regarding primary and specialty care:** **If you seek any care within 45 miles of the Olin Health Center, you must have a referral from MSU Student Health Services. Without the referral, your care won't be covered. Dependent children under the age of 18 and COBRA members are exempt from the referral requirement.**
- **Women's health services:** Female members won't ever need a referral to see a network gynecologist or obstetrician for annual well-woman visits and obstetrical care. Your plan includes one annual free gynecological examination and mammography service.
- **Behavioral health care:** You're covered for behavioral health, including mental health and substance use disorder care. Also covered are conditions that cause emotional or mental distress, such as life adjustment issues and depression. You can contact a BCN care manager at **1-800-482-5982** (TTY users call **711**) for help getting care. You don't need a referral, but you'll pay the least if you see a doctor in the BCN network.
- **Virtual Care:** When your primary care provider isn't available, you can speak to a U.S. board-certified doctor via your smartphone, tablet or computer anytime, anywhere.* You can also schedule an appointment to video chat with a clinically licensed therapist or psychiatrist if you're struggling with anxiety or grief, among other challenges. Visits to treat minor illnesses and injuries are \$49 or less, based on your out-of-pocket costs. Costs for behavioral health visits vary depending on the type of provider and the services you receive. Prescriptions can also be sent to a local pharmacy, as needed. To sign up, visit **bcbsmonlinevisits.com**, get the BCBSM Online VisitsSM app, or call **1-844-606-1608**. On January 1, 2024 you'll need to sign up with Teladoc HealthTM to receive virtual care. Visit **bcbsm.com/virtualcare**, download the Teladoc HealthTM app, or call **1-855-636-1578**.
- **Urgent care:** To locate an urgent care facility near you, go to **bcbsm.com**, click *Find a Doctor*, then *GET STARTED*. After selecting your plan, type "urgent health care" in the search box and enter your location.
- **Emergency care:** In a life-threatening situation or medical emergency, call **911** or go directly to the nearest hospital emergency room.

CALL US

- **Customer Service**
1-800-287-4103 | TTY users **711**
8 a.m. to 5:30 p.m. Monday through Friday
- **Behavioral health services**
1-800-482-5982
- **BlueCard** care while you travel
1-800-810-BLUE (2583)
- **Diabetic supplies** (J&B Medical Supply Company*)
1-888-896-6233
- **Chronic Condition Management nurse line**
1-800-392-4247
- **Durable medical equipment** (Northwood**)
1-800-667-8496
- **Laboratory** (Joint Venture Hospital Laboratories***)
1-800-445-4979
- **24-Hour Nurse Advice Line**
1-855-624-5214

*J&B Medical Supply Company is an independent company that provides diabetic materials for Blue Care Network.

**Northwood is an independent company that provides durable medical equipment for Blue Care Network.

***JVHL is an independent company that provides lab services for Blue Care Network.

*U.S. only. Remember to coordinate all care through your primary care provider.

We speak your language

If you, or someone you're helping, needs assistance, you have the right to get help and information in your language at no cost. To talk to an interpreter, call the Customer Service number on the back of your card, or 877-469-2583, TTY: 711 if you are not already a member.

Si usted, o alguien a quien usted está ayudando, necesita asistencia, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al número telefónico de Servicio al cliente, que aparece en la parte trasera de su tarjeta, o 877-469-2583, TTY: 711 si usted todavía no es un miembro.

إذا كنت أنت أو شخص آخر تساعد بحاجة لمساعدة، فليك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك دون أية تكلفة. للتحدث إلى مترجم اتصل برقم خدمة العملاء الموجود على ظهر بطاقتك، أو برقم 877-469-2583 TTY:711، إذا لم تكن مشتركاً بالفعل.

如果您，或是您正在協助的對象，需要協助，您有權利免費以您的母語得到幫助和訊息。要洽詢一位翻譯員，請撥在您的卡背面的客戶服務電話：如果您還不是會員，請撥電話 877-469-2583, TTY: 711。

کیا آپ کو یا کسی شخص کو کسی کی زبان کی مدد کی ضرورت ہے، تو آپ کو اپنے زبان میں مدد اور معلومات حاصل کرنے کا حق ہے۔ اپنے زبان میں مدد کے لیے بلا کوئی اضافی خرچہ، اپنے کارڈ کے پیچھے دیے گئے کلائمٹ سروس نمبر پر 877-469-2583 TTY:711 پر کال کریں، اگر آپ ابھی تک ممبر نہیں ہیں۔

Nếu quý vị, hay người mà quý vị đang giúp đỡ, cần trợ giúp, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi số Dịch vụ Khách hàng ở mặt sau thẻ của quý vị, hoặc 877-469-2583, TTY: 711 nếu quý vị chưa phải là một thành viên.

Nëse ju, ose dikush që po ndihmoni, ka nevojë për asistencë, keni të drejtë të merrni ndihmë dhe informacion falas në gjuhën tuaj. Për të folur me një përkthyes, telefononi numrin e Shërbimit të Klientit në anën e pasme të kartës tuaj, ose 877-469-2583, TTY: 711 nëse nuk jeni ende një anëtar.

만약 귀하 또는 귀하가 돕고 있는 사람이 지원이 필요하다면, 귀하는 도움과 정보를 귀하의 언어로 비용 부담 없이 얻을 수 있는 권리가 있습니다. 통역사와 대화하려면 귀하의 카드 뒷면에 있는 고객 서비스 번호로 전화하거나, 이미 회원이 아닌 경우 877-469-2583, TTY: 711로 전화하십시오.

যদি আপনার, বা আপনি সাহায্য করছেন এমন কারো, সাহায্য প্রয়োজন হয়, তাহলে আপনার ভাষায় বিনামূল্যে সাহায্য ও তথ্য পাওয়ার অধিকার আপনার রয়েছে। কোনো একজন দোভাষীর সাথে কথা বলতে, আপনার কার্ডের পেছনে দেওয়া গ্রাহক সহায়তা নম্বরে কল করুন বা 877-469-2583, TTY: 711 যদি ইতোমধ্যে আপনি সদস্য না হয়ে থাকেন।

Jeśli Ty lub osoba, której pomagasz, potrzebujesz pomocy, masz prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer działu obsługi klienta, wskazanym na odwrocie Twojej karty lub pod numer 877-469-2583, TTY: 711, jeżeli jeszcze nie masz członkostwa.

Falls Sie oder jemand, dem Sie helfen, Unterstützung benötigt, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer des Kundendienstes auf der Rückseite Ihrer Karte an oder 877-469-2583, TTY: 711, wenn Sie noch kein Mitglied sind.

Se tu o qualcuno che stai aiutando avete bisogno di assistenza, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, rivolgiti al Servizio Assistenza al numero indicato sul retro della tua scheda o chiama il 877-469-2583, TTY: 711 se non sei ancora membro.

ご本人様、またはお客様の身の回りの方で支援を必要とされる方でご質問がございましたら、ご希望の言語でサポートを受けたり、情報を入力したりすることができます。料金はかかりません。通訳とお話される場合はお持ちのカードの裏面に記載されたカスタマーサービスの電話番号（メンバーでない方は877-469-2583, TTY: 711）までお電話ください。

Если вам или лицу, которому вы помогаете, нужна помощь, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по номеру телефона отдела обслуживания клиентов, указанному на обратной стороне вашей карты, или по номеру 877-469-2583, TTY: 711, если у вас нет членства.

Ukoliko Vama ili nekome kome Vi pomažete treba pomoć, imate pravo da besplatno dobijete pomoć i informacije na svom jeziku. Da biste razgovarali sa prevodiocem, pozovite broj korisničke službe sa zadnje strane kartice ili 877-469-2583, TTY: 711 ako već niste član.

Kung ikaw, o ang iyong tinutulongan, ay nangangailangan ng tulong, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa numero ng Customer Service sa likod ng iyong tarheta, o 877-469-2583, TTY: 711 kung ikaw ay hindi pa isang miyembro.

Important disclosure

Blue Cross Blue Shield of Michigan and Blue Care Network comply with Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. Blue Cross Blue Shield of Michigan and Blue Care Network provide free auxiliary aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and information in other formats. If you need these services, call the Customer Service number on the back of your card, or 877-469-2583, TTY: 711 if you are not already a member. If you believe that Blue Cross Blue Shield of Michigan or Blue Care Network has failed to provide services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance in person, by mail, fax, or email with: Office of Civil Rights Coordinator, 600 E. Lafayette Blvd., MC 1302, Detroit, MI 48226, phone: 888-605-6461, TTY: 711, fax: 866-559-0578, email: CivilRights@bcbsm.com. If you need help filing a grievance, the Office of Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health & Human Services Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail, phone, or email at: U.S. Department of Health & Human Services, 200 Independence Ave, S.W., Washington, D.C. 20201, phone: 800-368-1019, TTD: 800-537-7697, email: OCRComplaint@hhs.gov. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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