

2013 – 2014

STUDENT
MEDICAL

Insurance Plan



ROLLINS



Collegiate Risk Management

(800) 922-3420

www.collegiaterisk.com

Florida Blue  

In the pursuit of health®

Health Care Reform Required Notice:

Your student health insurance coverage, offered by Florida Blue, may not meet the minimum standards required by the health care reform law for the restrictions on annual dollar limits. The annual dollar limits ensure that consumers have sufficient access to medical benefits throughout the annual term of the policy. Restrictions for annual dollar limits for group and individual health insurance coverage are \$1.25 million for policy years before September 23, 2012; and \$2 million for policy years beginning on or after September 23, 2012 but before January 1, 2014. Restrictions for annual dollar limits for student health insurance coverage are \$100,000 for policy years before September 23, 2012, and \$500,000 for policy years beginning on or after September 23, 2012, but before January 1, 2014. Your student health insurance coverage put an annual limit of: \$500,000 on covered benefits. If you have any questions or concerns about this notice, contact Florida Blue at (800) 664-5295. Be advised that you may be eligible for coverage under a group health plan of a parent's employer or under a parent's individual health insurance policy if you are under the age of 26. Contact the plan administrator of the parent's employer plan or the parent's individual health insurance issuer for more information.



Student Medical Insurance Plan

Florida Blue is pleased to offer this summary brochure of the Blanket Accident and Sickness Medical Expense benefits available for Rollins College students and their eligible dependents. This brochure is not an insurance contract and nothing in this brochure shall override the actual benefits or eligibility criteria under the Rollins College Student Medical Insurance Plan. You may contact Florida Blue's Customer Service Department at 800-664-5295 or Collegiate Risk Management at www.collegiaterisk.com for a copy of the complete benefit booklet. References to "we", "us" and "our" throughout refer to Florida Blue.

Eligibility for Coverage

All full-time undergraduate Arts & Sciences (A&S) and College of Professional Studies (CPS) students at Rollins College taking a minimum of 12 credit hours, and International students in F-1 or J-1 non-immigrant status in all programs, are automatically enrolled in the Rollins Student Medical Insurance Plan unless they return the Insurance Waiver Form and show proof of comparable insurance coverage prior to the waiver deadline established by the College. (The Federal Visa regulations require International students to maintain comparable health insurance throughout their stay in the United States.)

All other registered full-time and part-time students enrolled at Rollins College, including graduate students, are eligible to enroll in the Student Medical Insurance Plan on a voluntary basis. Each student enrolling on a voluntary basis shall be entitled to apply for coverage with us under this Plan during open enrollment. **The premium must be received within 31 days following the beginning of the Fall semester, or the Spring/Summer semester, for your particular area of study.**

In order to be eligible to enroll as a covered student, an individual must be an eligible student. An eligible student must meet each of the following requirements:

1. Is one of the following types of students:
 - a. a full-time undergraduate Arts & Sciences or CPS student taking a minimum of 12 credit hours;
 - b. an International student in F-1 or J-1 non-immigrant status in any program;
 - c. a full-time or part-time student who is not an Arts & Sciences or CPS or International student, including graduate students;and
2. Must actively attend classes for at least the first 31 days after the date for which coverage is purchased. Home study, correspondence, Internet, and television (TV) courses do not fulfill the eligibility requirement that the student actively attend classes. Florida Blue maintains its right to investigate student status and attendance records to verify that the policy eligibility requirements have been met. If the eligibility requirements are not met, our only obligation is to refund the premium, less any claims paid.

Eligibility Requirements for Dependent(s)

Eligible students who enroll in Rollins College Student Medical Insurance Plan may also insure their dependents. Dependents of International students in J-1 non-immigrant status are required by federal immigration regulations to have insurance coverage that meets federal guidelines. An individual who meets the eligibility criteria listed below and as specified in the benefit booklet is considered an eligible dependent and may apply for coverage under this Plan:

1. The Covered Student's spouse under a legally valid, existing marriage;
2. The Covered Student's natural, newborn, adopted, Foster, or step child(ren), (or a child

for whom the covered student has been court-appointed as legal guardian or legal custodian) until the end of the calendar year in which the child reaches age 26 (or in the case of a Foster Child, is no longer eligible under the Foster Child Program); or

3. The newborn child of a covered dependent child. Coverage for such newborn child will automatically terminate 18 months after the birth of the newborn child.

Note: It is your sole responsibility as the covered student to establish that a child meets the applicable requirements for eligibility. Eligibility will terminate on the date in which the child no longer meets the eligibility criteria required to be an eligible dependent.

General Rules for Enrollment

Eligible students and eligible dependents may enroll for coverage according to the provisions specified in the benefit booklet. Any eligible student or eligible dependent that is not properly enrolled with us will not be covered under this Plan. We will have no obligation whatsoever to any individual who is not properly enrolled.

1. All Rollins College full-time Arts & Sciences and CPS students and International students in F-1 or J-1 non-immigrant status will be automatically enrolled in the Rollins College Student Medical Insurance Plan upon registration. Coverage can be waived if evidence of other comparable coverage is presented prior to the **July 31, 2013** waiver deadline for the Fall semester and **December 31, 2013** for the Spring term. See the Waiver Procedure section below and in the benefit booklet for more information.
2. Students who have previously waived participation in the Plan may enroll after the deadline only if there has been a significant life change (i.e. loss of prior coverage) and should contact Collegiate Risk Management at 1-800-922-3420. Students who waived coverage in the Fall may enroll in the Spring.

3. All other eligible students may enroll on a voluntary basis by submitting the attached Student Health and Accident Blanket Insurance Application ("Enrollment Form") with the appropriate premium or by completing the online enrollment application at Collegiate Risk Management's website at www.collegiaterisk.com. For further information, contact:

Collegiate Risk Management
110 Athens Street
Tarpon Springs, FL 34689
1-800-922-3420
www.collegiaterisk.com

or at Rollins College, contact:

Ms. Oriana Jimenez
Human Resources Associate
1000 Holt Ave, CB#2718
Winter Park, FL 32789
1-407-646-2356

4. All eligible students who wish to apply for coverage for their eligible dependents under the Rollins College Student Medical Insurance Plan may do so by completing a Student Health and Accident Blanket Insurance Application ("Enrollment Form") or by enrolling online at the Collegiate Risk Management website, www.collegiaterisk.com. The application and premium should be remitted to Collegiate Risk Management within 31 days following the beginning of the period for which the student is enrolling.
Please note: The period for which a dependent is enrolled must be the same as the insured student, and their coverage will expire concurrently with that of the student. It is the student's responsibility for timely renewal enrollments and payments for their dependents.
5. All factual representations on the Enrollment Forms must be accurate and complete. Any false, incomplete, or misleading information provided during the enrollment process, or at any other time, may result, in addition to any other legal right(s) we may have, in disqualification for, termination, or rescission of coverage.

6. We will not provide coverage and benefits to any individual who would not have been entitled to enroll with us, had accurate and complete information been provided on a timely basis. In such cases, we may require you or an individual legally responsible for you, to reimburse us for any payments we made on your behalf.

Electing Coverage

When applying for coverage, a student may elect one of the four coverage levels available. The student must be enrolled in the Student Medical Insurance Plan for the dependents to be covered:

Student Only Coverage - covers the eligible student only.

Student/Spouse Coverage - covers the eligible student and the student's spouse under a legally valid, existing marriage.

Student/Child(ren) Coverage - covers the eligible student and the student's eligible child or children only.

Student/Spouse/Child(ren) Coverage - covers the eligible student and the student's eligible dependents.

Enrollment Periods

The enrollment periods that apply for coverage are as follows:

Open Enrollment Period

The period of time during which each eligible student or eligible dependent that is enrolling on a voluntary basis is given to select coverage. Enrollment deadlines are based on 31 days either from the start date of your program or the start date of the medical Plan, whichever is later. If the Enrollment Form is submitted after the applicable deadline, it will not be accepted in the absence of a significant life change and the student (or dependent) will have to wait until the next open enrollment period to apply.

Waiver Procedure

All Rollins College full-time Arts & Sciences and CPS students and International students in F-1 or J-1 non-immigrant status who have other comparable coverage must show proof of comparable insurance coverage and submit a waiver form to the Bursar's Office in order to waive participation in the Student Medical Insurance Plan. **Waiver forms will not be accepted after July 31, 2013** for the Fall semester **and December 31, 2013** for the Spring term.

For questions, contact the Bursar's Office at (407) 646-2252.

If the waiver information has not been received by the indicated deadline, the student will remain enrolled in the Rollins College Student Medical Insurance Plan and the charge for the Student Medical Insurance Plan cannot be removed.

The student health insurance waiver must be filled out online through Foxlink at: <http://myfoxlink.rollins.edu/cp/home/loginf>. Navigation: Foxlink> StudentTab>Scroll down to "Student Forms"

International students can access the waiver form at: http://www.rollins.edu/bursar/forms/International_Health_Insurance.pdf. This waiver must be filled out by the insurance agent and returned to the Office of the Bursar before the deadline.

Termination of a Covered Student's Coverage

If you withdraw from Rollins College within the first 31 calendar days of the semester, you will receive a full refund of the insurance premium unless you or your covered dependent files a medical claim. If you withdraw from Rollins College after the first 31 calendar days of the semester, your coverage will remain in effect until the end of the term for which you have paid premium. **No refunds will be granted after the first 31 calendar days of the semester.**

This also applies to students on leave of absence for medical or academic reasons, graduating students, and students choosing to enroll in a separate, comparable, or better plan during the policy period.

A covered person entering the armed forces of any country will not be covered under the Plan as of the date of such entry. A pro-rata refund of premium will be made for such person, and any of the student's covered dependents, upon written request submitted through Collegiate Risk Management and received by us within 90 days of withdrawal from the school.

A covered student's coverage will automatically terminate at 12:01 a.m.:

1. on the date the College's Master Policy terminates;
2. on the last day of the period for which you have paid premium;
3. on the date the covered student's coverage is terminated for cause (see the Termination of Coverage for Cause subsection of the benefit booklet);
4. on the date specified by the College that the covered student's coverage terminates; or
5. on the date the covered student enters the armed forces of any country. A pro rata refund of premium will be made for such student upon written request, if the referenced request is made within 90 days of the withdrawal from the College.

Termination of a Covered Dependent's Coverage

A covered dependent's coverage will automatically terminate at 12:01 a.m.:

1. on the date the College's Master Policy terminates;
2. on the date the covered student's coverage terminates for any reason;

3. on the date the covered dependent fails to meet any of the applicable eligibility requirements (e.g., a child reaches the limiting age, or a spouse is divorced from the covered student)
4. on the date we specify that the covered dependent's coverage is terminated by us for cause;
5. on the date specified by the College that the covered dependent's coverage terminates; or
6. on the date the covered dependent enters the armed forces. A pro rata refund of premium will be made for such dependent upon written request, if the referenced request is made within 90 days of the dependent's entry in the armed forces.

Termination of Coverage for Cause

If, in our opinion, any of the following events occur, we may terminate an individual's coverage for cause:

1. fraud, material misrepresentation or omission in applying for coverage or benefits;
2. the knowing misrepresentation, omission or the giving of false information by or on your behalf; or
3. misuse of the identification card.

Rollins Wellness Center

Please refer to the Rollins Wellness Center website at www.rollins.edu/wellness for hours of operation, contact information or to make an appointment. Services at the Rollins Wellness Center are not available to the students' dependents.

Florida Blue Physicians, Hospitals, and Other Providers

Introduction

It is important for you to understand how the Florida Blue provider you select and the setting in which you receive health care services affects how much you are responsible for paying under this plan. The benefit booklet, along with the schedule of benefits and our provider directory, describes the health care provider options available to you and our payment rules for services you receive.

As used throughout this section, “out-of-pocket expenses” or “out-of-pocket” refers to the amounts you are required to pay, including any applicable copayments, the benefit period deductible and/or coinsurance amounts for covered services.

You are entitled to preferred provider type benefits when you receive covered services from in-network providers. You are entitled to traditional program type benefits at the point of service when you receive covered services from traditional program providers.

Provider Participation Status

In order to help control health care costs, we have entered into contracts with certain providers to participate in BlueOptions, one of our preferred provider networks. We have also entered into contracts with certain providers to participate in our traditional program. The allowances we establish are called allowed amounts. The amount you are responsible for paying out-of-pocket for a particular covered service is based on our allowed amount for that covered service. Your schedule of benefits designates the panel of BlueOptions providers who are participating for your specific plan of coverage. This is important because these providers are considered your in-network providers for purposes of this coverage.

For additional information regarding BlueOptions and traditional program providers, refer to the benefit booklet.

To verify if a Provider is In-Network for your plan you can

Access the BlueOptions provider directory on our website at www.floridablue.com

In-Network Providers

When you use in-network providers, your out-of-pocket expenses for covered services will be lower. We will base our payment on the allowed amount at the coinsurance percentage listed in the schedule of benefits.

Out-of-Network Providers

When you use out-of-network providers, your out-of-pocket expenses for covered services will be higher. We will base our payment on the allowed amount at the coinsurance percentage listed in the schedule of benefits. Further, if the out-of-network provider is a traditional program provider, our payment to such provider may be under the terms of that provider’s contract.

Providers Outside the State of Florida

In most cases when you travel outside the state of Florida, you can take advantage of savings the local Blue Plan has negotiated with doctors and hospitals in the area. For covered services, you should not have to pay any amount above these negotiated rates. To find nearby doctors and hospitals outside Florida, call BlueCard® Access at 1-800-810-BLUE (2583) or visit the BlueCard Doctor and Hospital Finder at www.bcbs.com. When calling from abroad please call collect 1-804-673-1777.

Medical Transportation Benefits provided through the BlueCard Worldwide® program.

Repatriation Benefit \$10,000

If the insured dies while insured under the plan, benefits will be paid up to a maximum of \$10,000 for preparing and transporting the remains of the deceased body to a funeral facility in the home country of the deceased, or home state if an out-of-state student. This includes: a) cost of the embalming; b) coffin; and c) transportation of remains. ("Repatriation of Remains") This benefit does not include the transportation expense of anyone accompanying the deceased. If the covered person requires treatment as a result of a covered injury or illness and wishes to return to their home country for ongoing treatment after stabilization, benefits will be paid up to \$10,000 for transporting the person back to the home country. ("Medical Repatriation" or "Repatriation of the Person") This benefit is limited to the maximum benefit specified above. No additional benefits will be paid under the Student Medical Insurance Plan for Repatriation. All medical transportation services must be authorized in advance by calling collect 1-804-673-1177, also available when calling from abroad.

Medical Evacuation Benefit \$10,000

In the event a covered person requires treatment as a result of a covered injury or illness and the appropriate medical facility is not locally available for medically necessary treatment, or if the local medical facility can no longer provide the medically necessary treatment, the covered person will be evacuated to the nearest appropriate medical facility. Expenses for evacuation, accompanying physician or nurse, services or supplies which are medically necessary for evacuation, and fees necessary to arrange for the evacuation, are covered up to \$10,000. The attending physician must certify in writing that the evacuation is medically necessary. The initial air or ground ambulance to a medical facility is not included in this benefit. All medical evacuation services must be authorized in advance by calling collect 1-804-673-1177, also available when calling from abroad.

U.S. Benefits for International Students

State and federal law requires that all International students be covered for medical evacuation and repatriation services when studying in the U.S. International students have this coverage through the BlueCard® Worldwide Program if they are enrolled in the Rollins College Student Medical Insurance Plan with Florida Blue. All medical evacuation services must be authorized in advance by calling collect to 1-804-673-1177.

International Benefits for Domestic Students

BlueCard® Worldwide has you covered when you travel or study abroad. Through the BlueCard® Worldwide Program, you have access to doctors and hospitals in more than 200 countries and territories around the world. All medical services and medical transportation must be authorized in advance by calling 1-800-810-2583. When calling from abroad, please call collect 1-804-673-1177.

Pre-Existing Conditions Limitations

Pre-Existing Conditions Limitations apply (not applicable to anyone under age 19): We will not pay benefits for a condition for the first 12 months of coverage which a covered person received medical treatment, care, or advise within 6 months prior to enrolling in this plan. Prior coverage credit can be provided if the student submits proof of prior coverage as outlined in the master policy.

This Pre-Existing Condition Limitation provision does not apply to:

- (1) Genetic information in the absence of a diagnosis of the condition related to such information;
- (2) a Covered Person who, as of the last day of the 30-day period beginning with the date of birth, was covered under prior creditable coverage;
- (3) a Covered Person who has prior coverage without a lapse of 62 days or more;
- (4) a child who is adopted or placed for adoption before attaining 18 years of age; and as of the last day of the 30-day period beginning on the date of adoption or placement for adoption, is covered under creditable coverage;
- (5) pregnancy.

Schedule of Benefits

This is not a contract. This is a summary of benefits only.

Refer to the Master Policy, it's terms prevail.

Benefit for Covered Services	Rollins Wellness Center
Maximum Benefit Paid	Benefit Period Max \$500,000 Applies per person per benefit period
Deductible (DED)	\$0 per benefit period
Coinsurance	100%
Repatriation/Medical Evacuation	N/A
INPATIENT	
Pre Admission Certification	N/A
Room & Board	N/A
Hospital Expense	N/A
Intensive Care	N/A
Routine Newborn (Nursery charges)	N/A
Physiotherapy	N/A
Surgeon's Fees	N/A
Assistant Surgeon	N/A
Anesthetist	N/A
Physician's Visits	N/A
Pre-Admission Testing (standard pre-admit testing)	N/A

In-Network*	Out-of-Network**
Benefit Period Maximum \$500,000 Applies per person per benefit period	
\$250 per person per benefit period	\$500 per person per benefit period
80%	50%
\$10,000 / \$10,000	
Network participating providers are responsible for providing admission notification for any inpatient admission to acute care facilities.	
\$250 Copay + DED + 80% of allowed amount	\$250 Copay + DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
Multiple surgical procedures will be based on 50% of the allowed amount.	
DED + 80% of allowed amount	DED + 50% of allowed amount*
Surgical Assistant allowed amount is limited to 20% of the surgical procedures allowed amount	
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*

Benefit for Covered Services	Rollins Wellness Center
Psychotherapy	N/A
Substance Abuse	N/A
OUTPATIENT	
Surgeon's Fees	N/A
Day Surgery Miscellaneous	N/A
Day Surgery ASC = Ambulatory Surgical Center	NA
Assistant Surgeon	N/A
Anesthetist	N/A
Medical Emergency Expenses	N/A
Urgent Care Centers	N/A
X-Rays	N/A
Test & Procedures	\$15 Copay Copay is waived for A&S and CPS students
Independent Clinical Lab	Paid 100%
Injections <i>Immunizations subject to Adult Wellness benefit</i>	\$15 Copay Copay is waived for A&S and CPS students
Radiation Therapy/ Chemotherapy	N/A
Physician's Visits - Health Practitioner	\$15 Copay Copay is waived for A&S and CPS students

In-Network	Out-of-Network
DED + 80% of allowed amount	DED + 50% of allowed amount*
No limit to days	
DED + 80% of allowed amount	DED + 50% of allowed amount*
No limit to days	
OUTPATIENT	
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
Hospital Facility: DED + 80% of allowed amount; ASC facility: \$100 Copay	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
Surgical Assistant allowed amount is limited to 20% of the surgical procedures's allowed amount	
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + \$250 Copay + 80% of allowed amount* ER Copay waived if admitted	
\$50 Copay (DED waived)	DED + \$50 Copay + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
\$0 Copay (DED waived)	DED + 50% of allowed amount*
DED + 80% of allowed amount	DED + 50% of allowed amount*
Office location: Included in applicable DED + Copay + 80% of allowed amount Other locations: DED + 80% of allowed amount	DED + 50% of allowed amount*
Office: Family Physician \$25 Copay only (DED waived) Specialist \$40 Copay only (DED waived) Other locations: DED + 80% of allowed amount	Office: Family Physician \$25 Copay DED + coinsurance Specialist \$40 Copay + DED + coinsurance Other locations: DED + 80% of allowed amount

Benefit for Covered Services	Rollins Wellness Center
<p>Outpatient Therapies <i>(Combined: Speech, Occupational, Cardiac, Pulmonary, Physical, Spinal Manipulations & Massage Therapies)</i> 15 Visits</p>	N/A
<p>Prescription Drugs <i>(up to \$500,000 annual max)</i> <i>The open formulary, prior authorization, responsible quantity and responsible step programs apply.</i></p>	\$15 Copay Generic Only
<p>Mental Health Counseling Substance Abuse Therapy <i>After 8 visits authorization required (medical necessity)</i></p>	\$15 Copay Copay is waived for A&S and CPS students
Other	
Ambulance Services	N/A
Durable Medical Equipment	N/A
Consultant Physician Fees	N/A
Dental Treatment	N/A

In-Network	Out-of-Network
<p>Office: Family Physician \$25 Copay only (DED waived) Specialist \$40 Copay only (DED waived) Other locations: DED + 80% of allowed amount</p>	<p>Office: Family Physician \$25 Copay DED + coinsurance Specialist \$40 Copay + DED + coinsurance Other locations: DED + 80% of allowed amount</p>
Spinal Manipulations limited to 4 modalities per day	
<p>Generic \$15 Copay (no deductible) \$300 brand deductible (per benefit period) + \$50 Copay brand/\$80 Copay non-preferred</p>	Member pays full cost, submits claim; reimbursed 50% of the allowed amount + \$300 brand deductible (per benefit period)
<p>Office: Family Physician \$25 Copay (DED waived) Specialist \$40 Copay (DED waived) Other locations: DED + 80% of allowed amount</p>	<p>Office: Family Physician \$25 Copay (DED waived) Specialist \$40 Copay + DED + coinsurance Other locations: DED + 80% of allowed amount</p>
DED + 80% of allowed amount	DED + 80% of allowed amount
Ground/Air/Water combined: \$5,500 per day	
DED + 80% of allowed amount	DED + 50% of allowed amount*
<p>Office: Family Physician \$25 Copay only (DED waived) Specialist \$40 Copay only (DED waived) Other locations: DED + 80% of allowed amount</p>	<p>Office: Family Physician \$25 Copay DED + coinsurance Specialist \$40 Copay + DED + coinsurance Other locations: DED + 80% of allowed amount</p>
<p>Dependent on location of service. Limited to care and treatment initiated within 62 days of an accidental dental injury to a sound, natural tooth</p>	

Benefit for Covered Services	Rollins Wellness Center
Maternity/Complications of Pregnancy/Elective Abortion	N/A
Child Health Supervision Services/Well Child	N/A
Wellness <i>(includes new Women's Wellness guidelines per Federal Health Care Reform)</i>	100% of allowed amount
Hospice	N/A
Skilled Nursing Facility	N/A

In-Network	Out-of-Network
DED + 80% of allowed amount	DED + 50% of allowed amount*
100% of allowed amount	Waive DED; 50% of allowed amount*
100% of allowed amount	Waive DED; 50% of allowed amount*
Unlimited	
60 days per benefit period	

*Out-of-Network reimbursement based on participating allowed amount, balance billing protection if provider participates in our Traditional or BlueCard program.

Premium Rates

	Annual 08/15/2013 – 08/14/2014
Student	\$1,598
Spouse	\$3,538
Per Child	\$1,591

Spring/Summer 01/06/2014 – 08/14/2014
\$981
\$2,172
\$977

Where to Find Help

Enrollment and Pre-Enrollment Benefit Questions

Collegiate Risk Management
110 Athens Street
Tarpon Springs, FL 34689
1-800-922-3420
www.collegiaterisk.com

Florida Blue BlueOptions Provider Directory

www.floridablue.com

Rollins College

Ms. Oriana Jimenez
Human Resources Associate
1000 Holt Ave, CB#2718
Winter Park, FL 32789
1-407-646-2356
ojimenez@rollins.edu

For a copy of your Summary of Benefits and Coverage (SBC) please visit www.floridablue.com/sbc. A paper copy is also available, free of charge, by calling 800-664-5295. TTY/TDD dial 1-800-955-8771.

Florida Blue Group #66965

Florida Blue 

In the pursuit of health[®]

Florida Blue is a trade name of Blue Cross and Blue Shield of Florida Inc.,
an Independent Licensee of the Blue Cross and Blue Shield Association.

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