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The University Of Alabama -Systems Office HDHP  
BlueCard® PPO - HSA Qualified HDHP  
Effective January 01, 2022

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
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**OUTPATIENT HOSPITAL BENEFITS**  
**(Includes Mental Health Disorders and Substance Abuse)**

Precertification is required for some outpatient hospital benefits and provider-administered drugs; visit [AlabamaBlue.com/ProviderAdministeredPrecertificationDrugList](http://AlabamaBlue.com/ProviderAdministeredPrecertificationDrugList). Please see your benefit booklet.  
 If precertification is not obtained, no benefits are available.

Outpatient Surgery (Including Ambulatory Surgical Centers)	Covered at 80% of the allowed amount, subject to calendar year deductible	Covered at 60% of the allowed amount, subject to calendar year deductible
Emergency Room (Medical Emergency)	Covered at 80% of the allowed amount, subject to calendar year deductible	Covered at 80% of the allowed amount, subject to calendar year deductible  Mental Health Disorders and Substance Abuse Services apply to the in-network - out-of-pocket maximum

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Maternity Care	Covered at 80% of the allowed amount, subject to calendar year deductible	In Alabama, covered at 50% of the allowed amount, subject to calendar year deductible  Outside Alabama, covered at 60% of the allowed amount, subject to calendar year deductible
Diagnostic Lab & X-ray	Covered at 80% of the allowed amount, subject to calendar year deductible	In Alabama, covered at 50% of the allowed amount, subject to calendar year deductible  Outside Alabama, covered at 60% of the allowed amount, subject to calendar year deductible
Nurse Practitioner/Nurse Midwife	Covered at 80% of the allowed amount, subject to calendar year deductible	In Alabama, covered at 50% of the allowed amount, subject to calendar year deductible  Outside Alabama, covered at 60% of the allowed amount, subject to calendar year deductible
Applied Behavioral Analysis (ABA) Therapy Limited to ages 0-18 for autism spectrum disorder. Ages 0-9 limited to an annual maximum of \$20,000, ages 10-13 limited to an annual maximum of \$15,000 and ages 14-18 limited to an annual maximum of \$10,000. Note: Home based therapy is excluded.	Covered at 80% of the allowed amount, subject to calendar year deductible	Covered at 60% of the allowed amount, subject to calendar year deductible

**TELEHEALTH SERVICES**

Benefits are provided for Telehealth Services subject to applicable cost-sharing for In-network and Out-of-network services, when services rendered are performed within the scope of the health care providers license and deemed medically necessary.

**PREVENTIVE CARE BENEFITS**

(Includes Mental Health Disorders and Substance Abuse)

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
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**PRESCRIPTION DRUG BENEFITS**  
**(Includes Mental Health Disorders and Substance Abuse)**

Precertification is required for some drugs; if precertification is not obtained, no benefits are available.

**Retail Prescription Drug Card Benefits**

- The pharmacy network for the plan is Prime Participating Network

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BENEFIT

IN-NETWORK

OUT-OF-NETWORK

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
<b>HEALTH MANAGEMENT BENEFITS</b> (Includes Mental Health Disorders and Substance Abuse)		
Individual Case Management	Coordinates care in event of catastrophic or lengthy illness or injury. For more information, please call 1-800-821-7231.	
Chronic Condition Management	Coordinates care for chronic conditions such as asthma, diabetes, coronary artery disease, congestive heart failure and chronic obstructive pulmonary disease and other specialized conditions.	
Contraceptive Management	Covers prescription contraceptives, which include: birth control pills, injectables, diaphragms, IUDs and other non-experimental FDA approved contraceptives; subject to applicable deductibles, copays and coinsurance.	
Baby Yourself ®	A maternity program; For more information, please call 1-800-222-4379. You can also enroll online at <a href="http://AlabamaBlue.com/BabyYourself">AlabamaBlue.com/BabyYourself</a> .	
Quit for Life Tobacco Cessation Program	A tobacco cessation program for subscriber, spouse and dependents that provides support to participants through telephone-based counseling and nicotine replacement therapy. Call 1-888-768-7848 for participation information.	

***Useful Information to Maximize Benefits***

- To maximize your benefits, always use in-network providers for services covered by your health benefit plan. To find in-