2024-2025
STUDENT HEALTH BENEFIT PLAN
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WELCOME

The University of Minnesota is pleased to offer the University-sponsored Student Health Benefit Plan (SHBP) administered by the Office of Student Health Benefits.

Health plan network and claims administration services are provided by Blue Cross and Blue Shield of Minnesota (Blue Cross), giving you access to thousands of providers and hospitals in their worldwide network.

INSURANCE REQUIREMENT

The University requires students to have health insurance, to ensure that all students have access to medical care and can maintain good health, which is essential for academic success.

BENEFIT HIGHLIGHTS

- 100% coverage of essential benefits as outlined in the Affordable Care Act
- $250 deductible
- 80% coverage of eligible expenses after deductible
- Access to the Blue Cross and Blue Shield worldwide network
- Preventive and periodontal dental benefits
- Year-round coverage when enrolled in both Fall and Spring semesters

Our office looks forward to working with you!

Detailed information can be found on the Office of Student Health Benefits website: shb.umn.edu

Office of Student Health Benefits
University of Minnesota
410 Church Street S.E., N323
Minneapolis, MN 55455
Phone: 612-624-0627 or 1-800-232-9017
Fax: 612-626-5183 or 1-800-624-9881
Email: umshbo@umn.edu
Website: shb.umn.edu
ELIGIBILITY

Students who are: 1) admitted to a degree program; and 2) registered for six or more credits per semester that count towards the automatic assessment of the Student Services Fee; are required by the University of Minnesota to have health insurance. Students who meet both of these criteria are eligible for enrollment in the University-sponsored Student Health Benefit Plan (SHBP).

The following are examples of credits that do not count toward the eligibility for the SHBP: certificate, non-degree, independent study, online and distance learning, Executive MBA (CEMBA) and Part-time MBA (PTMBA).

If you are using the Regents Scholarship Program or the Senior Citizen Education Program (SCEP), you are not eligible for the Student Health Benefit Plan.

ENROLL OR WAIVE

Eligible students are automatically enrolled in the University-sponsored SHBP, unless they waive the coverage.

Students are eligible to waive enrollment from this plan if they have health insurance for the entirety of each semester. If students do not appropriately waive the SHBP by the established deadline, they will be enrolled and billed for the entire semester. Approved waivers are valid for one year.

Students can find detailed information on how to enroll in or waive the SHBP on the Office of Student Health Benefits website, shb.umn.edu.

Students who experience an involuntary loss of coverage (for example, a student loses coverage under their parent’s plan when they reach age 26) may enroll in the SHBP up to 31 days after loss of coverage. Contact the Office of Student Health Benefits for details.

For information on spouse and/or dependent coverage and coverage during learning abroad, visit shb.umn.edu.

INTERNATIONAL STUDENTS

The University requires all international students and their dependents to purchase the SHBP, unless they are eligible for a waiver. The cost of the plan will be charged to their University account. Visit shb.umn.edu for more details.

INTERNATIONAL SCHOLARS

International Scholars visiting the University for more than 31 days are required to enroll in the SHBP. Scholars must contact the Office of Student Health Benefits to complete enrollment materials, within 31 days of their arrival. Scholars who will be at the University for 31 days or less may choose not to enroll in the University-sponsored SHBP but are required to carry their own health insurance that meets J-1 regulations for the duration of their visit to the University.
**MEMBER ID CARD**

Your member ID card is your passport to care. It tells providers that you have coverage and gives them information they need to submit your claims to Blue Cross. You will receive a health plan card and information to your U.S. mailing address in MyU.

Additionally, your card provides your customer service phone number and information necessary to register for the Blue Cross online portal, at bluecrossmn.com/umnshbp. Your online member portal offers one-stop convenience for all your health plan information, allowing you to:

- View your member ID card or order a replacement
- View claims and plan information
- Search for a network doctor, clinic or hospital
- Find estimated costs for common medical procedures
- Read and write patient reviews on medical providers

**Go Mobile**

Access important health plan information wherever and whenever you want with the BlueCrossMN Mobile app. You’ll have convenient, on-the-go access to claim status, your member ID card, a search tool to find in-network care and more, including other health resources like Sharecare. Search for “BlueCrossMN Mobile” in your app store.

Sharecare is an independent company providing a health and wellness engagement platform. Offerings subject to change.
DENTAL BENEFITS

The Student Health Benefit Plan includes preventive and periodontal dental coverage for adult students (primary members) through Delta Dental. The dental plan year begins September 1, 2024 and continues through August 31, 2025. Pediatric dental benefits are also included for students and their dependents up to the age of 19. For more information and a complete summary of benefits, visit shb.umn.edu.

<table>
<thead>
<tr>
<th>Preventive/Periodontics Plan (included in the SHBP)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Plan Year Maximum</strong></td>
</tr>
<tr>
<td>Diagnostic and preventive services are excluded from the Plan Year Maximum</td>
</tr>
<tr>
<td><strong>No annual maximum</strong></td>
</tr>
<tr>
<td><strong>Deductible</strong></td>
</tr>
<tr>
<td>Diagnostic and preventive services are excluded from the Plan Year Maximum</td>
</tr>
<tr>
<td><strong>No deductible</strong></td>
</tr>
<tr>
<td><strong>Cost</strong></td>
</tr>
<tr>
<td>Per semester</td>
</tr>
<tr>
<td><strong>Included in the SHBP</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Covered Services</th>
<th>Dental Benefit Plan Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostic &amp; Preventive Services</td>
<td>100%</td>
</tr>
<tr>
<td>Exams, cleanings, x-rays, sealants (once every 6 months)</td>
<td></td>
</tr>
<tr>
<td>Periodontics</td>
<td>80%</td>
</tr>
<tr>
<td>Nonsurgical periodontics</td>
<td></td>
</tr>
<tr>
<td>Basic Services</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Emergency treatment for pain relief, restorations (fillings)</td>
<td></td>
</tr>
</tbody>
</table>

If you would like additional coverage, you can enroll in the optional Dental Buy-Up Plan for an added cost. The Buy-Up Plan has restorative services, including 80% coverage for basic services such as fillings and emergency treatment, as well as 50% coverage for tooth removal. The plan has a $1,200 Plan Year Maximum and a $25 deductible. The cost for the plan is $948.48 per year. For students who are enrolled in both fall and spring semesters, the premium will be billed in two installments of $492.24. The annual open enrollment deadline is September 26, 2024. Visit the Office of Student Health Benefits website, shb.umn.edu, for a full description and enrollment information.
## QUICK REFERENCE BENEFIT CHART

### 2024-2025 Student Health Benefit Plan

The following benefits apply to students and their dependents enrolled in the University-sponsored Student Health Benefit Plan. This Quick Reference Benefit Chart is intended as a guide. For plan details, please refer to the Office of Student Health Benefits website at [shb.umn.edu](https://shb.umn.edu).

<table>
<thead>
<tr>
<th>Service or Provider Network</th>
<th>Campus Health Service Primary Member Only: NO DEPENDENTS</th>
<th>Blue Cross Participating Providers Primary Member and Dependents</th>
<th>Nonparticipating Providers Primary Member and Dependents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provider Network</td>
<td>When services are provided at the student’s campus health services, only students paying the Student Service Fee (SSF) are eligible for this benefit. Enrolled spouse and/or child(ren) are covered at the Blue Cross Participating Providers benefit level (next column).</td>
<td>When you use a provider who participates with Blue Cross, they will file the claims on your behalf. They have agreed to accept the allowed amount as payment in full, less your copays. Participating providers: 1-800-810-2583, <a href="https://bluecrossmn.com/umnshbp">bluecrossmn.com/umnshbp</a></td>
<td>When you use a provider who does not participate with Blue Cross, you need to file your claim with Blue Cross for benefit processing. You are responsible for amounts in excess of the allowed amount.</td>
</tr>
<tr>
<td>Enrolled Dependents</td>
<td>Not applicable</td>
<td>Spouse and unmarried dependent children to age 26</td>
<td></td>
</tr>
<tr>
<td>Individual Lifetime Maximum</td>
<td>Unlimited</td>
<td>Unlimited</td>
<td></td>
</tr>
<tr>
<td>Student Deductible</td>
<td>Not applicable</td>
<td>$250</td>
<td></td>
</tr>
<tr>
<td>Dependent Deductible</td>
<td>Not applicable</td>
<td>$250 per individual</td>
<td></td>
</tr>
<tr>
<td>Coinsurance (Amount you pay)</td>
<td>Applies only where indicated</td>
<td>20% of eligible charges</td>
<td></td>
</tr>
<tr>
<td>Plan Year Out-of-Pocket Maximum Covered individuals have one Out of Pocket Maximum ($62,250) for both in- and out-of-network services. Eligible services would be covered at 100% once the OOPM is met with the exception of balance billing from non-par providers.</td>
<td>$6,250 per individual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physician Office Visits for Illness or Injury</td>
<td>100% coverage</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Retail Clinic - Office Visit</td>
<td>100% coverage after $10 copay</td>
<td>100% coverage after $10 copay</td>
<td>100% coverage after $10 copay</td>
</tr>
<tr>
<td>Routine/Preventive Care</td>
<td>100% coverage of available services</td>
<td>100% coverage</td>
<td>Pre-cancer screening tests are covered at 80% after deductible up to the out-of-pocket maximum; 100% thereafter. Prenatal care at 80% after deductible up to the out-of-pocket maximum; 100% thereafter. Routine physical and associated lab and X-rays, eye exams, 80% coverage after deductible. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Well Child Care</td>
<td>100% coverage of available services</td>
<td>100% coverage</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% thereafter to age 6. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Physician Services</td>
<td>100% coverage of available services</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Inpatient Hospital Services</td>
<td>Not applicable</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% thereafter. Pre-admission notification required for non-accidents or our payments will be reduced by an additional 25% of the allowed amount. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Service or Provider Network</td>
<td>Campus Health Service</td>
<td>Blue Cross Participating Providers</td>
<td>Nonparticipating Providers</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>--------------------------------------------</td>
<td>----------------------------------------</td>
<td>--------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Primary Member Only: NO DEPENDENTS</td>
<td>Primary Member and Dependents</td>
<td></td>
</tr>
<tr>
<td>Outpatient Hospital Services</td>
<td>Not applicable</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Lab tests, X-rays, kidney dialysis, radiation or chemotherapy, physical therapy, surgery.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambulance</td>
<td>Not applicable</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Allowed amount limits apply.</td>
</tr>
<tr>
<td>Transport to the nearest qualified facility to treat the condition.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency Room Facility Services</td>
<td>Not applicable</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
</tr>
<tr>
<td>Chiropractic Care</td>
<td>Not applicable</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
</tr>
<tr>
<td>Rehabilitative Services</td>
<td>Not applicable except for Twin Cities Campus students. TWIN CITIES CAMPUS ONLY: $5 copay per visit for available services.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Physical Therapy, Speech Therapy, Occupational Therapy.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Durable Medical Equipment &amp; Medical Supplies</td>
<td>80% coverage; TWIN CITIES CAMPUS ONLY; 100% coverage for casts/crutches. Depo-Provera and IUD covered per BH Pharmacy prescription benefit guidelines.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Casts, splints, wheelchairs, etc. No coverage for contraceptive devices (e.g. IUDs or diaphragms).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home Health Care</td>
<td>Not applicable</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage up to the out-of-pocket maximum; 100% thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td>Coverage varies by campus. See plan details on the Office of Student Health Benefits website.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient Mental Health and Chemical Dependency Care</td>
<td>Not applicable</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Preadmission notification required or our payments will be reduced by an additional 25% of the allowed amount. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Outpatient Mental Health Care</td>
<td>100% coverage of available services.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Prior authorization recommended for treatment in excess of 10 hours.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient Chemical Dependency Care</td>
<td>$10 copay/individual visit, $5 copay/group visit. Total annual copayment maximum $250.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter.</td>
<td>80% coverage after deductible up to the out-of-pocket maximum; 100% coverage thereafter. Allowed amount limitations apply.</td>
</tr>
<tr>
<td>Prior authorization recommended for treatment in excess of 2 hours.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventive/Periodontics Dental Plan (Included in SHBP)</td>
<td>See page 4</td>
<td>See page 4</td>
<td>See page 4</td>
</tr>
</tbody>
</table>

Your out-of-pocket costs depend on the network status of your provider. To check status, call Blue Cross customer service or visit bluecrossmn.com/umnshbp.

*Lowest out-of-pocket costs: in-network providers

**Higher out-of-pocket costs: out-of-network participating providers

Highest out-of-pocket costs: out-of-network nonparticipating providers (You are responsible for the difference between Blue Cross’ allowed amount and the amount billed by nonparticipating providers. This is in addition to any applicable deductible, copay or coins. Benefit payments are calculated on Blue Cross’ allowed amount, which is typically lower than the amount billed by the provider.)

This is only a summary. Read your benefit booklet for more information about what is and isn’t covered. Services that aren’t covered include those that are cosmetic, investigative, not medically necessary or covered by workers’ compensation or no-fault insurance.

For more information, visit bluecrossmn.com/umnshbp or call Blue Cross customer service at the number on the back of your member ID card.
COST AND DATES

COST FOR STUDENTS
2024-2025 Academic Year

<table>
<thead>
<tr>
<th>Coverage for</th>
<th>Average Cost per Month</th>
<th>Cost per Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Member</td>
<td>$299</td>
<td>$1,795</td>
</tr>
<tr>
<td>Spouse</td>
<td>Add $403</td>
<td>Add $2,416</td>
</tr>
<tr>
<td>One Child</td>
<td>Add $312</td>
<td>Add $1,870</td>
</tr>
<tr>
<td>Two or More Children</td>
<td>Add $473</td>
<td>Add $2,838</td>
</tr>
</tbody>
</table>

COST FOR INTERNATIONAL SCHOLARS
2024-2025 Academic Year

<table>
<thead>
<tr>
<th>Coverage for</th>
<th>Cost per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Member</td>
<td>$320</td>
</tr>
<tr>
<td>Spouse</td>
<td>Add $403</td>
</tr>
<tr>
<td>One Child</td>
<td>Add $312</td>
</tr>
<tr>
<td>Two or More Children</td>
<td>Add $473</td>
</tr>
<tr>
<td>Family</td>
<td>$1,196</td>
</tr>
</tbody>
</table>

COVERAGE DATES

<table>
<thead>
<tr>
<th>Term</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>August 19, 2024 - January 20, 2025</td>
</tr>
<tr>
<td>Spring</td>
<td>January 21, 2025 - August 24, 2025</td>
</tr>
<tr>
<td>Summer*</td>
<td>May 15, 2025 - August 24, 2025</td>
</tr>
</tbody>
</table>

*Only applies if not enrolled in SHBP spring semester. Contact the Office of Student Health Benefits for summer cost and enrollment information.
ON-CAMPUS ACCESS

All charges for services received at your campus health service are first billed directly to your health plan. Most charges not covered by your health plan are covered by the Student Services Fee. Students admitted to a degree program and who register for six or more qualifying credits each semester are automatically charged the University’s Student Services Fee.

Any charges not covered by the Student Services Fee will be the patient’s responsibility.

Crookston Campus
UMC Health Services
crk.umn.edu/units/health-services
218-281-8512

UMC Health Services can take care of most outpatient services students might need. The staff includes a registered nurse and part-time physician.

Duluth Campus
UMD Health Services
d.umn.edu/health-services
218-726-8155

UMD Health Services’ staff includes physicians, nurse practitioners, physician assistants, registered nurses, psychologists and social workers.

Morris Campus
UMM Health Service
students.morris.umn.edu/health-and-wellness/
health-service
320-589-6070

UMM Health Service can take care of most of your outpatient needs. The staff includes a registered nurse, nurse practitioners and part-time physicians.

Rochester Campus
UMR Health Services
r.umn.edu/student-life/health-wellness-recreation
507-292-7250

UMR Student Health Services can take care of many common, acute conditions students may experience. The staff includes registered nurse practitioners.

Twin Cities Campus
Boynton Health
boynton.umn.edu
612-625-8400

Boynton’s staff of over 200 includes physicians, nurse practitioners, physician assistants, registered nurses, dentists, optometrists, physical therapists, psychologists, psychiatrists, registered dietitians and pharmacists.
SOLUTIONS TO HELP
MANAGE YOUR HEALTH

Whether you’re trying to decide on a treatment plan, manage a chronic condition or simply take better care of your health, these tools and resources can help.

DECISION RESOURCES
Feel more confident about your health care choices.

**Find a Doctor tool**
Search and compare doctors and hospitals online based on quality and cost. Find in-network providers by selecting the “AWARE” network.
[bluecrossmn.com/find-a-doctor](bluecrossmn.com/find-a-doctor)

**Care cost estimator**
Research and compare costs for common procedures and non-emergency services with this online comparison tool.
[bluecrossmn.com/umnshbp](bluecrossmn.com/umnshbp)

CARE OPTIONS
Find the right care at the right time.

**Online care**
See a doctor right on your smartphone, tablet or computer with Doctor On Demand.® Board-certified doctors, psychiatrists and psychologists treat many common conditions including:

- Cold and flu
- Allergies
- Skin and eye issues

- Sore throat
- Pediatric issues
- Stress and anxiety
- Depression and mood issues

Visit [doctorondemand.com/bluecrossmn](doctorondemand.com/bluecrossmn) to get started.

VIRTUAL SUPPORT
Tools and resources that get you a few steps closer to your health goals.

**do.® health and wellbeing app**
Remember to chill out, fuel up and groove your body with the do. app. Small, easy steps get you started on the road to better health. The do. app gives you the tools and resources to take charge of your health. From lowering stress and managing weight to comparing treatment options, do. is the place to begin. Search for “do. Blue Cross” at the App Store or Google Play.
VIRTUAL SUPPORT (CONTINUED)
Tools and resources that get you a few steps closer to your health goals.

Sharecare online health and wellbeing platform

Ready to see a healthier you? With Sharecare you can. Sharecare provides tools, insights and information on how to improve your health and live your healthiest life. Discover how old your body thinks it is by taking the RealAge® test, then get personalized tools and resources to live your healthiest life including:

• A highly customized timeline with personalized content to help you meet your goals
• AskMD® to help you find medical providers specializing in what you need
• Daily trackers to measure how healthy you are each day
• Access to coaching and other programs to keep you motivated
• Your personal health profile

Log in or register at bluecrossmn.com/umnshbp and click on Sharecare to get started.
PERSONALIZED SUPPORT
When you need a little extra help managing a condition.

**Health coaching**
Get help accomplishing your wellness goals or managing a health condition from nurses or licensed behavioral clinicians. Discover resources as well as information that can help you succeed including:

- Understanding a diagnosis
- Staying on track with your treatment plan
- Answering questions between doctor visits
- Identifying lifestyle behaviors that affect your health
- Creating health goals

Call 1-800-961-4758 to get started.

**Maternity management**
Have a healthier pregnancy with support and guidance from a maternity health coach including:

- Guidance for having a healthier pregnancy
- Online tools and resources about prenatal and infant care
- Help preparing for your baby’s arrival
- Tips to help you stay happy and healthy after your baby is born

Call 1-866-489-6948 to get started.

**Quitting tobacco support**
Get personalized support from a wellness coach for developing and maintaining a quit plan. Your coach will work with you to identify hurdles and brainstorm ways to keep those urges in check. Regular phone check-ins as well as access to online resources can help keep you on track.

Call 1-888-662-BLUE (2583) to get started.

DISCOUNTS
Do more to support your health and get a little support for your wallet.

**Wellness discount marketplace**
Get discounts from Blue365® when you shop for products and services that complement your health. Visit blue365deals.com/bcbsmn to learn more.

*da.®* is a registered trademark of Blue Cross® and Blue Shield® of Minnesota.

Each health care provider is an independent contractor and is not a Blue Cross agent.

Doctor On Demand® is an independent company providing telehealth services.

RealAge® and AskMD® are registered marks of Sharecare, an independent company providing a health and wellness engagement platform. Offerings subject to change.

Blue365® is a registered mark of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and/or Blue Shield plans.

Blue Cross® and Blue Shield® of Minnesota and Blue Plus® are nonprofit independent licensees of the Blue Cross and Blue Shield Association.
ADDITIONAL BENEFITS

ONLINE MENTAL HEALTH RESOURCE

Learn to Live provides online programs to help with stress, depression, social anxiety and insomnia. The programs are confidential, available at no cost to you and completed at your own pace. Student Health Benefit Plan enrollees can visit learntolive.com/partners and enter code “UMN” for access.

Learn to Live, Inc. is an independent company offering online cognitive behavioral therapy programs and services.