



FAQs for Premium Plus

Designed with flexibility in mind, offering three tiers of benefit coverage.

For additional questions about enrollment or premiums, view the [Enrollments](#) section of the [FAQ](#) page or [contact](#) your Human Resources office.

The Premium Plus plan offers you three network tier options.

Tier 1 benefits are services you receive from the GatorCare Network, which includes hospitals, physicians and providers in Gainesville and Jacksonville, and Central Florida. Tier 1 benefits offer the best value, with lower deductibles and out of pocket costs.

Tier 2 benefits apply when you receive services from Florida Blue Options Network providers, which typically result in higher out-of-pocket costs.

When using Tiers 1 and 2 for wellness and preventive care, annual physicals and labs are offered with no out-of-pocket expense to you.

Tier 3 benefits apply when you receive services from an out-of-network provider.

Q: How do I know what I am going to pay now compared to what I used to pay under my old plan?

A: At the end of the FAQ is a list of some of the most common costs. Please contact your Florida Blue Dedicated Representative for more specific questions.

Q. Is my Doctor In-Network?

A. To find out if your doctor or provider participates in GatorCare, click below to refer to the:

- [Gainesville Provider Directory](#)
- [Central Florida Provider Directory](#)

A list of providers can also be found on the [Florida Blue website](#). When searching in the Florida Blue online provider directory, please use “**BlueOptions**” to find providers that qualify for coverage under within Tier 2.

Q. How much do I pay to see an In-Network Primary Care Doctor or an In-Network Specialist for an office visit?

A. You will pay just a \$15 copay for a Primary Care Visit and \$35 for a Specialist Visit within the Tier 1 GatorCare Network. You will pay just a \$30 copay for a Primary Care Visit and \$50 for a Specialist Visit within the Tier 2 Florida Blue Options Network.

Q. Do I need a referral to see an In-Network specialist?

A. No, a referral is not necessary to see a specialist.

Q. Will I need a waiver to go to a UF Health provider in Gainesville?

A. No, you will not need to get a waiver. To schedule an appointment through the UF Health Gainesville Access Center call 352-265-5555. The UF Health Physician - Patient Access Center is open Monday through Friday from 8:00 a.m. to 5:00 p.m. The center is closed on holidays. After-hours, non-urgent messages are taken by their inhouse answering service. Urgent requests are handled immediately by UF Health operators.

Q. What happens if I am out of the state and need medical care?

A. There are many participating Network Blue providers in the United States and abroad. You can access a listing of these participating providers on our website, www.Floridablue.com. On the provider directory home page, click FIND DOCTORS AND HOSPITALS WORLDWIDE, OR FIND DOCTORS AND HOSPITALS NATIONALLY. Your policy does provide benefits for emergency care even at non-par providers, these providers are considered out of network. The suitcase symbol on your card shows GatorCare is participating in the Out-Of-Area plan.

Q. Does GatorCare cover Virtual Visits?

A. Yes, Virtual Visits are covered with In-Network providers. You would pay \$10 for a Primary Care Virtual Visit and \$20 for a Specialist Virtual Visit within the Tier 1 GatorCare Network. You would pay \$30 for a Primary Care Virtual Visit and \$50 for a Specialist Virtual Visit within the Tier 2 Florida Blue Options Network.

Q. Do I have access to Free Virtual Behavioral Health Services?

A. Yes! As of 1/1/2022, GatorCare members ages 13+ are eligible for free online mental health counseling services through Talkspace. Additionally, GatorCare members ages 18+ are eligible for free online counseling and psychiatry services through Talkspace.

This service is convenient, confidential, and flexible. You can meet with your provider anywhere, anytime—from the comfort of your home, office, or wherever you are. Your provider is available for live video sessions (similar to in-person therapy) or secure text messaging.* The Talkspace platform is HIPAA-compliant and allows you to select a provider that best matches your preferences and goals.

Visit GatorCare.org/Talkspace to learn more about this benefit.

**Text messaging only available for counseling services.*

Q. Who manages my Pharmacy Benefits?

A. Magellan Rx Management is the administrator for GatorCare’s pharmacy benefits. The dedicated toll-free number is (800) 651-8921

Q. The prescription plan has Tiers 0-5 of coinsurance. How can I find out the tier for the medication being prescribed?

A. Magellan Rx maintains a [look-up tool](#) for our GatorCare members. The tool is user-friendly and offers useful and important information. After navigating to this page, enter the name of the drug on the left-hand side. After several seconds, possible matches appear on the right side of the screen. The tier to which the drug is offered through the GatorCare formulary is found along with other alternative drugs and information. By clicking on the ‘find alternative drugs’ link, a member can determine if an alternative medication for the drug may be available on the formulary on a lower tier, reducing the member’s out-of-pocket expenses.

Q. How can I find out the expected cost for a prescription?

A. Members should establish an account on the [Magellan Rx portal](#) after your effective date with GatorCare. Once the account has been set up, there is a “Price a Drug” function. Members can also contact the GatorCare dedicated line at Magellan Rx Management at 1-800-651-8921. If the call is being made prior to the effective date of coverage, please advise the GatorCare customer representative that your policy is still not active, but you expect it to begin at a later date.

Q. Can I fill my maintenance medications as a 30-Day Supply?

A. On the 3rd fill of a Tier 0, 1 or Tier 2 maintenance medication, a 90-day supply will be required. The 90-day supply may be obtained from a Mail or Retail network pharmacy. Controlled drugs including those used to treat anxiety, sleep, pain and hyperactivity disorders are not subject to the 90-day requirement. Certain other medications, including inhalers, are not subject to the 90-day requirement. Visit this [page](#) for more details.

Q. What is a Pharmacy Deductible?

A. GatorCare members are required to satisfy a prescription drug deductible for purchases of all Tier 2-5 prescription drugs before the plan’s prescription benefits apply. The deductible amount is \$125 per covered person, with a deductible cap of \$500 per family. Each member will pay the deductible plus any applicable coinsurance, up to the cost of the drug. For drugs that cost less than \$125, members will pay the cost of the drug, until the \$125 prescription drug deductible is met. The deductible applies regardless of whether you purchase your prescription from a retail or mail order pharmacy. For more information, visit gatorcare.org/pharmacy.

Q. How much do I pay for an In-Network Urgent Care Center?

A. You will pay just a \$35 copay for an Urgent Care Visit within the Tier 1 GatorCare Network, and a \$50 copay for an Urgent Care visit within the Tier 2 Florida Blue Options Network.

Q. How do I locate an In-Network Urgent Care Center?

A. A list of participating Urgent Care Centers will be available soon [here](#).

A list of Blue Options Urgent Care Centers can also be found on the [Florida Blue website](#).

(Note: Convenient Care clinics such as Minute Clinics inside pharmacies, are NOT COVERED)

Q. How much do I pay for Emergency Room services?

A. For an ER visit at a facility within the Tier 1 GatorCare Network, you will incur a \$150 Per Visit Deductible, plus any Calendar Year Deductible not met, and 10% coinsurance. For an ER visit at a facility either in the Tier 2 Florida Blue Options Network or in Tier 3 Out-of-Network, you will incur a \$250 Per Visit Deductible, plus any Calendar Year Deductible not met, and 10% coinsurance. The Per Visit Deductible is waived if you are admitted. **See example below.*

ER Example

- **The plan's overall deductible** \$450
- **Per Visit ER Deductible** \$150
- **Hospital (facility) Coinsurance** 10%

This EXAMPLE event includes services like:
Emergency room care (including medical supplies)
Diagnostic test (x-ray)

Total Example Cost	\$1,900
In this example, you would pay:	
<i>Cost Sharing</i>	
Deductibles	\$450
Per Visit Deductible	\$150
Coinsurance	\$130
<i>What isn't covered</i>	
Limits or exclusions	\$0
The total you would pay is	\$730

Q. How much do I pay for lab work?

A. It is a 10% coinsurance for lab work at an In-Network Tier 1 Independent Clinical Laboratory or at an In-Network Tier 1 Outpatient Hospital Laboratory. Alliance Labs and Quest Diagnostics are considered as In-Network Tier 1 Independent Clinical Laboratories.

Q. How much do I pay for imaging services?

A. It is a 10% coinsurance for imaging services at a UF Health facility, and for select procedures at Lake Medical Imaging that can't be performed at UF Health Central Florida. You would have a 20% coinsurance after meeting your calendar year deductible at a Tier 2 Florida Blue Options imaging provider. *Physician is responsible for obtaining prior authorization for Advanced Imaging Services, such as CT, MRI, MRA, Nuclear and PET scans.*

Q. How much do I pay for an X-ray?

A. If you utilize a UF Health provider, you will be responsible for 10% coinsurance. If you utilize a Tier 2 Blue Options Network provider you will be responsible for 20% coinsurance after you meet your Calendar Year Deductible.

Q. How much do I pay for a physical therapy visit?

A. If you use UF Health Outpatient Rehab Services, you will be responsible for 10% coinsurance. If you utilize a Tier 2 Blue Options provider, you will be responsible for 20% coinsurance after you meet the calendar year deductible.

Tier 1 cost comparisons

***IMPORTANT:** These cost shares don't represent every scenario, therefore it's important that you review the [Premium Plus Summary of Health Plan Benefits](#) document for more specific details or contact your Florida Blue Dedicated Representative at GatorCareCSR@bcbsfl.com

Tier 1 cost comparisons	GatorCare Tier 1	Previous Tier 1
Primary Care Office Visit	\$15 copay	\$25 copay
Primary Care Virtual Visit*	\$10/\$15* copay	\$25 copay
Specialist Office Visit	\$35 copay	\$45 copay
Specialist Virtual Visit*	\$20/\$35* copay	\$45 copay
Urgent Care	\$35 copay	\$15 + professional fees
X-ray outpatient	10% coinsurance	\$25 copay
Wellness & Preventative Care		
Primary Care & Specialist	\$0	\$0
Outpatient Therapies Facility (PT, OT, ST & Cardiac Rehab)*	10% coinsurance	\$0

Q. Who do I contact for anything GatorCare related?

A. Dedicated Florida Blue Representative – 904-571-0416 – GatorCareCSR@bcbsfl.com

In the event that any ambiguity arises between these highlights and the Certificates of Insurance or the Plan Documents, the terms of the Certificates and Plan Documents will prevail.