

John Brown University 2016-2017 Student Health Insurance Plan

Eligibility

All **Domestic and International Traditional Undergraduate** students enrolled for nine (9) or more credit hours are required to purchase this Student Health Insurance Plan and the premium for coverage is added to the tuition billing unless proof of comparable coverage is furnished by **September 05, 2016**.

All **Graduate** students enrolled in three (3) or more credit hours and **Degree Completion** students enrolled in three (3) or more credit hours are eligible to enroll in this insurance plan.

How do I Waive?

All **Domestic and International Traditional Undergraduate** students must provide proof of comparable coverage by **September 05, 2016**, or the insurance will be automatically tuition billed to their student accounts.

If you would like to waive out of the Student Health Insurance Plan, you must go online to the school's website at <https://eagle.jbu.edu/Services/StudentInsurance> and complete the online waiver by the deadline date.

Please view the complete brochure on-line at jbu.myahpcare.com for full details of participation in the plan.



Additional Benefits

- Access to a 24-hour nurse line
- Coverage when traveling
- Academic Emergency Services

Additional Information

- jbu.myahpcare.com
- (855) 850-4302



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This is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits and programs and does not constitute a contract. Covered Medical Expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. The PPO network is Cigna.

BENEFIT MAXIMUMS & DEDUCTIBLES

Benefit Maximum Unlimited, per Insured Person, per Policy Year

Deductible \$ 250 per Insured Person, per Policy Year

Out-of-Pocket Maximum \$ 6,600 per Insured Person, per Policy Year

Family Out-of-Pocket Maximum \$13,200 per Insured Person, per Policy Year

BENEFIT CATEGORY	Network Provider	Non-Network Provider
	<i>Payments are based on the PPO Allowance</i>	<i>Payments are based on Usual and Reasonable Charges</i>
Hospital Room and Board Expense	80%	60%
Inpatient/Outpatient Surgery	80%	60%
In-Office Physician Fees	80%	60%
Diagnostic X-ray Services & Outpatient Laboratory Procedures	80%	60%
Emergency Services Expense	80% after a \$50 Copayment per emergency visit \$250 Copayment per non-emergency visit	80% after a \$50 Copayment per emergency visit 60% after a \$250 Copayment per non-emergency visit
Prescription Drugs 30 day retail supply	At pharmacies contracting with HealthSmart RX® 100% after a \$10 Copayment per Generic Drug \$25 Copayment per Preferred Brand Drug	60%
Preventive Care Services	100%	60%

2016-2017 PREMIUM COSTS AND COVERAGE PERIODS

Coverage Periods	Fall	Spring/Summer	Summer
	08/15/2016 through 01/12/2017	01/13/2017 through 08/14/2017	05/09/2017 through 08/14/2017
Open Enrollment	07/15/2016 through 09/15/2016	12/12/2016 through 02/13/2017	04/12/2017 through 06/12/2017
Student	\$ 820	\$ 1,168	\$ 532
Spouse	\$ 1,627	\$ 2,316	\$ 1,056
Child	\$ 1,221	\$ 1,738	\$ 793

To view all enrollment and coverage periods available, please visit jbu.myahpcare.com or call Academic HealthPlans at (855) 850-4302.