

Student Health Insurance Plan

Eligibility

First Time on Campus Students (FTOC)

If you are an **undergraduate** enrolled in **six (6)** or more credit hours at Yeshiva University for the first time this year, you are required to be covered by an adequate health insurance plan. You will be automatically enrolled in the Student Health Insurance Plan for 2016-2017 and the premium of \$1,472.50 for the fall semester and \$1,472.50 for the spring/summer semester will be added to your tuition bill. If you currently have insurance coverage and want to waive out of the University's coverage, you must complete the online waiver form at yu.myahpcare.com. The deadline to complete the waiver is **October 14, 2016** for the fall semester, and **February 28, 2017** for the spring. Please note that if you waive out of the plan now but choose to enroll later, you will have to purchase the insurance directly from Academic HealthPlans during the next open enrollment period.

Returning Domestic Students who were insured on the 2015-2016 Student Health Insurance Plan

If you are an **undergraduate** enrolled in **six (6)** or more credit hours at Yeshiva University, you are required to be covered by an adequate health insurance plan. If you were insured on the Student Health Insurance Plan for 2015-2016 academic year and tuition billed, you will automatically be enrolled in the Student Health Insurance Plan for 2016-2017 and the premium of \$1,472.50 for the fall semester and \$1,472.50 for the spring/summer semester will be added to your tuition bill. If you currently have insurance coverage and want to waive out of the University's coverage, you must complete the online waiver form at yu.myahpcare.com. The deadline to complete the waiver is **October 14, 2016** for the fall semester, and **February 28, 2017** for the spring. Please note that if you waive out of the plan now but choose to enroll later, you will have to purchase the insurance directly from Academic Health Plans during the next open enrollment period.

Returning Domestic Students who have previously waived coverage

All returning undergraduate students who completed a waiver and were approved will not be required to complete a new waiver. If you choose to enroll in the School Student Health Insurance Plan at a later date, students may only purchase the insurance online directly from Academic HealthPlans for the annual premium cost of \$2,945.

Dependents: Eligible students who enroll may enroll their eligible dependents. Eligible dependents are the student's spouse and dependent children under age 26.

Please view the complete brochure on-line at yu.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

- yu.myahpcare.com
- (855) 856-4198



Yeshiva University 2016-2017

Student Health Insurance Plan

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. Your plan provides you with a higher level of coverage when you receive covered medical expenses from providers who are part of the Cigna PPO network.

BENEFIT MAXIMUMS & DEDUCTIBLES

Benefit Maximum	Unlimited, per Insured Person, per Policy Year
Deductible <i>(waived for services with a copayment)</i>	\$ 500 per Insured Person, per Policy Year (Does not apply to Preventive Services)
Individual Out-of-Pocket Maximum	Network Provider: \$ 5,625 per Insured Person, per Policy Year Non-Network Provider: Unlimited, per Insured Person, per Policy Year
Family Out-of-Pocket Maximum	Network Provider: \$11,250 per Family, per Policy Year Non-Network Provider: Unlimited, per Family, per Policy Year

BENEFIT CATEGORY	Network Providers	Non-Network Providers
	<i>Participating Provider Member Responsibility</i>	<i>Participating Provider Member Responsibility</i>
Hospital Expense	20%	40%
Surgery Expense	20%	40%
Doctor's Office Visits	0% following a \$30 Copayment per visit	30% following a \$30 Copayment per visit
Diagnostic X-ray Services & Laboratory Testing Expense	20%	40%
Emergency Services Expense <i>(Copayment waived if admitted)</i>	20% following a \$175 Copayment per visit	20% following a \$175 Copayment per visit
Prescription Drugs, 30 day supply <i>Visit yu.myahpcare.com to locate participating pharmacies.</i>	At pharmacies contracting with CVS Health 0% after a \$10 Copayment per Generic Drug \$30 Copayment per Brand Name Drug \$50 Copayment per Non-Preferred Brand Name Drug	0% after a \$10 Copayment per Generic Drug \$30 Copayment per Brand Name Drug \$50 Copayment per Non-Preferred Brand Name Drug
Preventive Care Services <i>Includes benefits for adults, women and children</i>	0%	30%

2016-2017 PREMIUM COSTS AND COVERAGE PERIODS

Coverage Periods	Annual 08/15/2016 through 08/14/2017	Fall 08/15/2016 through 01/15/2017	Spring/Summer 01/16/2017 through 08/14/2017	Pre Summer 04/15/2017 through 08/14/2017	Summer 05/30/2017 through 08/14/2017
Open Enrollment	07/01/2016 through 10/17/2016	07/01/2016 through 10/17/2016	11/15/2016 through 02/28/2017	03/01/2017 through 05/12/2017	04/13/2017 through 07/05/2017

DOMESTIC UNDERGRADUATE

Student	\$ 2,945	\$ 1,472.50	\$ 1,472.50	\$ 984	\$ 622
Spouse	\$ 2,945	\$ 1,472.50	\$ 1,472.50	\$ 984	\$ 622
Child	\$ 2,945	\$ 1,472.50	\$ 1,472.50	\$ 984	\$ 622

DOMESTIC GRADUATE

Student	\$ 2,945	\$ 1,472.50	\$ 1,472.50	\$ 984	\$ 622
Spouse	\$ 2,945	\$ 1,472.50	\$ 1,472.50	\$ 984	\$ 622
Child	\$ 2,945	\$ 1,472.50	\$ 1,472.50	\$ 984	\$ 622

To view all enrollment and coverage periods available, please visit yu.myahpcare.com or call Academic HealthPlans at (855) 856-4198.