

Flagler College 2016-2017 Student Health Insurance Plan

Eligibility

All full time students at Flagler College will be eligible to enroll under the Flagler College Student Health Insurance Plan. All full time students are required to complete a waiver showing their current health insurance.

How do I Waive?

Full time students can complete the online waiver form at flagler.myahpcare.com.

Waivers must be submitted by **September 15, 2016** for the Annual coverage term, or by **February 10, 2017** for the Spring/Summer coverage term (available to new students to the College in the Spring/Summer semester only).

Eligible dependents of those enrolled in the plan may participate in the plan on a voluntary basis.

Please view the complete brochure on-line at flagler.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

- 🌐 flagler.myahpcare.com
- ☎ (855) 370-7214



The 2016-2017 Student Health Insurance Plan is underwritten by National Guardian Life Insurance Company, NBH-280(2014)FL. National Guardian Life Insurance Company is not affiliated with The Guardian Life Insurance Company of America, AKA The Guardian or Guardian Life.

Flagler College 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. Covered medical expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. The PPO network is First Health PPO.

BENEFIT MAXIMUMS & DEDUCTIBLES

Benefit Maximum	Unlimited, per Insured Person, per Policy Year
Individual Deductible	Network Provider: \$ 250 per Insured Person, per Policy Year Non-Network Provider: \$ 500 per Insured Person, per Policy Year
Family Deductible	Network Provider: \$ 500 per Insured Person, per Policy Year Non-Network Provider: \$ 1,000 per Insured Person, per Policy Year
Individual Out-of-Pocket Maximum	Network Provider: \$ 5,000 per Insured Person, per Policy Year Non-Network Provider: \$25,000 per Insured Person, per Policy Year
Family Out-of-Pocket Maximum	Network Provider: \$12,700 per Insured Person, per Policy Year Non-Network Provider: \$63,500 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	70% after a \$150 Copayment per admission	50% after a \$150 Copayment per admission
Inpatient/Outpatient Surgery	70%	50%
In-Office Physician Fees	100% after a \$10 Copayment per visit	100% after a \$20 Copayment per visit
Diagnostic X-ray Services & Laboratory Procedures	70% after a \$20 Copayment per visit	50% after a \$20 Copayment per visit
Emergency Services Expense \$250 Copayment per visit	70%	70%
Prescription Drugs	At pharmacies contracting with HealthSmartRX® 100% after a \$15 Copayment per Generic Drug \$35 Copayment per Brand Drug \$80 Copayment per Preferred Brand Drug	
Preventive Care Services <i>Deductible and Copayment waived</i>	100%	50%

2016-2017 PREMIUM COSTS AND COVERAGE PERIODS

Coverage Periods	Annual 08/01/2016 through 07/31/2017	Fall 08/01/2016 through 12/31/2016	Spring/Summer 01/01/2017 through 07/31/2017
Open Enrollment	07/15/2016 through 09/15/2016	07/15/2016 through 09/15/2016	12/15/2016 through 02/10/2017
Student	\$ 2,170	\$ 911	\$ 1,259
Spouse	\$ 2,170	\$ 911	\$ 1,259
Each Child	\$ 2,170	\$ 911	\$ 1,259

To view all enrollment and coverage periods available, please visit flagler.myahpcare.com or call Academic HealthPlans at (855) 370-7214.