

Oberlin College 2017-2018

Student Health Insurance Plan



Eligibility

All students enrolled on campus at Oberlin College are automatically enrolled in the Student Health Insurance Plan, and the premium cost is included on the tuition bill unless proof of comparable coverage is provided by the waiver deadline, **August 31, 2017**.

Eligible Dependents of those enrolled in the Student Health Insurance Plan may participate in the plan on a voluntary basis.

Please view the complete brochure on-line at oberlin.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

- 🌐 oberlin.myahpcare.com
- ☎ 1-855-844-3014



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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 Preferred Provider is UnitedHealthcare Choice Plus.

BENEFIT MAXIMUMS & DEDUCTIBLES

Benefit Maximum	Unlimited
Deductible	In-Network Provider: \$200 per Insured Person, per Policy Year Out-of-Network Provider: \$400 per Insured Person, per Policy Year
Individual Out-of-Pocket Maximum	In-Network Provider: \$2,000 per Insured Person, per Policy Year Out-of-Network Provider: Unlimited
Family Out-of-Pocket Maximum	In-Network Provider: \$8,000 for all Insureds in a Family, per Policy Year Out-of-Network Provider: Unlimited

BENEFIT CATEGORY	In-Network Provider	Out-of-Network Provider
	<i>Payments are based on the Allowed Amount</i>	<i>Payments are based on the Usual and Customary Charges</i>
Hospital Room and Board Expense	80%	60%
Inpatient/Outpatient Surgery	80%	60%
In-Office Physician Fees	100% after a \$20 Copayment per visit	60%
Physical, Occupational & Speech Therapy	80%	60%
Diagnostic X-ray Services & Laboratory Procedures	80%	60%
Emergency Services Expense <i>Copayment waived if admitted</i>	80% after a \$100 Copayment per visit	80% after a \$100 Copayment per visit
Prescription Drugs <i>Up to a 31-day supply per prescription</i>	At pharmacies contracting with UnitedHealthcare Pharmacy 100% after a \$10 Copayment per Tier 1 \$25 Copayment per Tier 2 \$25 Copayment per Tier 3	100% after a \$10 Copayment per Generic Drug \$25 Copayment per Brand-Name Drug
*Preventive Care Services	100%	60%

*Please visit www.healthcare.gov/preventive-care-benefits/ for more information

2017-2018 PREMIUM COSTS AND COVERAGE PERIODS

Coverage Periods	Annual	Spring/Summer	Early Arrivals
	08/01/2017 through 07/31/2018	01/01/2018 through 07/31/2018	(Master of Music Teaching Only) 06/01/2017 through 07/31/2017
Open Enrollment	06/30/2017 through 10/02/2017	12/01/2017 through 02/15/2018	N/A
Student	\$ 1,626	\$ 944	\$ 272
Spouse	\$ 1,626	\$ 944	\$ 272
Child	\$ 1,626	\$ 944	\$ 272

To view all enrollment and coverage periods available, please visit oberlin.myahpcare.com or call Academic HealthPlans at 1-855-844-3014.