

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 2017-2018 and the premium of \$1,699 for the fall semester and \$1,699 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 16, 2017** for the fall semester, and **February 28, 2018** 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 2016-2017 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 2016-2017 academic year and tuition billed, you will automatically be enrolled in the Student Health Insurance Plan for 2017-2018 and the premium of \$1,699 for the fall semester and \$1,699 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 16, 2017** for the fall semester, and **February 28, 2018** 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 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 \$3,398.



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
 1-855-856-4198

Yeshiva University 2017-2018

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 UnitedHealthcare Choice Plus.

BENEFIT MAXIMUMS & DEDUCTIBLES

Benefit Maximum

Unlimited, per Insured Person, per Policy Year

Deductible

(waived for services with a copayment)

Network Provider: \$ 500 per Insured Person, per Policy Year
Non-Network Provider: \$ 500 per Insured Person, per Policy Year

Individual Out-of-Pocket Maximum

Network Provider: \$ 7,150 per Insured Person, per Policy Year
Non-Network Provider: None

Family Out-of-Pocket Maximum

Network Provider: \$ 14,300 for all Insureds in a Family, per Policy Year
Non-Network Provider: None

BENEFIT CATEGORY

Network Providers

Participating Provider Member Responsibility

Non-Network Providers

Participating Provider Member Responsibility

Hospital Expense

20% after deductible

40% after deductible

Surgery Expense

20% after deductible

40% after deductible

Doctor's Office Visits (Deductible waived)

Paid in full after a
\$40 Copayment per visit

30% following a
\$40 Copayment per visit

Diagnostic X-ray Services

20% after deductible

40% after deductible

Laboratory Procedures (Deductible waived)

20%

40%

Emergency Services Expense

(Copayment waived if admitted)
(Deductible waived)

20% following a
\$175 Copayment per visit

20% following a
\$175 Copayment per visit

Prescription Drugs, 30 day supply

Visit yu.myahpcare.com to locate participating pharmacies. (Deductible waived)

At pharmacies contracting with UnitedHealthcare Pharmacy

Paid in full after a
\$15 Copayment per Tier 1
\$40 Copayment per Tier 2
\$60 Copayment per Tier 3

Paid in full after a
\$40 Copayment per Generic Drug
\$60 Copayment per Brand Name Drug

*Preventive Care Services

Includes benefits for adults, women and children

Paid in full

30%

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

2017-2018 PREMIUM COSTS AND COVERAGE PERIODS

Coverage Periods	Annual 08/15/2017 through 08/14/2018	Fall 08/15/2017 through 01/15/2018	Spring/Summer 01/16/2018 through 08/14/2018	Pre Summer 04/09/2018 through 08/14/2018	Summer 05/30/2018 through 08/14/2018
Open Enrollment	06/28/2017 through 10/16/2017	06/28/2017 through 10/16/2017	11/15/2017 through 02/28/2018	03/01/2018 through 05/14/2018	05/16/2018 through 06/29/2018

DOMESTIC UNDERGRADUATE

Student	\$ 3,398	\$ 1,699	\$ 1,699	\$ 1,191	\$ 717
Spouse	\$ 3,398	\$ 1,699	\$ 1,699	\$ 1,191	\$ 717
Child	\$ 3,398	\$ 1,699	\$ 1,699	\$ 1,191	\$ 717

DOMESTIC GRADUATE

Student	\$ 3,398	\$ 1,699	\$ 1,699	\$ 1,191	\$ 717
Spouse	\$ 3,398	\$ 1,699	\$ 1,699	\$ 1,191	\$ 717
Child	\$ 3,398	\$ 1,699	\$ 1,699	\$ 1,191	\$ 717

To view all enrollment and coverage periods available, please visit yu.myahpcare.com or call Academic HealthPlans at 1-855-856-4198.