

Texas State University 2017-2018 - Domestic Student Health Insurance Plan



Eligibility

All Domestic and Non F1/J1 International students attending the Texas State University are eligible to enroll in the Student Health Insurance Plan during the open enrollment period.

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 txstate.myahpcare.com for full details of participation in the plan.

- PPO Plan with large network
- Covers Essential Health Benefits, including preventive services

Additional Benefit

- Access to a 24/7 Student Assistance Program
- Coverage when traveling

Additional Information

txstate.myahpcare.com

1-855-850-4298



Fall 2017-18 Open Enrollment begins 07/14/2017

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Texas State 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. Covered Medical Expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. Your Plan provides you with a higher level of coverage when you receive covered medical expenses from physicians who are part of UnitedHealthcare Choice Plus.

STUDENT HEALTH CENTER:

The deductible will be waived and covered expenses paid at 100% based upon UnitedHealthcare allowables. A \$30 copayment applies to doctor's visits. Student prescription drug benefits at the Student Health Center provides benefits for medication prescribed for the treatment of acne, allergies and Mental Illness/Chemical Dependency if the medication is available on the Student Health formulary.

BENEFIT MAXIMUMS & DEDUCTIBLES

Benefit Maximum	Unlimited, per Member, per Policy Year
Individual Deductible	In-Network Provider: \$500 per Insured Person, per Policy Year Out-of-Network Provider: \$1,000 per Insured Person, per Policy Year
Family Deductible	In-Network Provider: \$1,500 for all Insureds in a Family, per Policy Year Out-of-Network Provider: \$3,000 for all Insureds in a Family, per Policy Year
Individual Out-of-Pocket Maximum	In-Network Provider: \$6,350 per Insured Person, per Policy Year Out-of-Network Provider: \$12,700 per Insured Person, per Policy Year
Family Out-of-Pocket Maximum	In-Network Provider: \$12,700 for all Insureds in a Family, per Policy Year Out-of-Network Provider: \$25,400 for all Insureds in a Family, 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 Customary Charges</i>
Hospital Room and Board Expense	80%	60%
Inpatient/Outpatient Surgery	80%	60%
In-Office Physician Fees	100% after a \$30 Copay per visit	60%
Diagnostic X-ray Services & Laboratory Procedures	80%	60%
Emergency Services Expense <i>copay waived if admitted</i>	80% after a \$150 Copay per visit	80% after a \$150 Copay per visit
Prescription Drugs <i>up to a 90 day supply</i>	At pharmacies contracting with UnitedHealthcare Pharmacy: 100% after a \$20 Copayment per Tier 1 \$40 Copayment per Tier 2 \$60 Copayment per Tier 3 <i>(Deductible waived)</i>	60% <i>(after \$1,000 individual plan deductible)</i>
Prescription Drugs at Texas State University Health Center (SHC) <i>up to a 90 day supply (copay per 30 day supply) (Deductible waived)</i>	At Texas State University SHC: 100% after a \$10 Copayment per Generic drug \$25 Copayment per Brand drug	N/A
*Preventive Care Services	100%	60%

*For more information please visit healthcare.gov/preventive-care-benefits/

2017-2018 PREMIUM COSTS AND COVERAGE PERIODS FOR DOMESTIC

Coverage Periods	Annual 08/23/2017 through 08/22/2018	Fall 08/23/2017 through 01/13/2018	Spring 01/14/2018 through 05/26/2018	Spring/Summer 01/14/2018 through 08/22/2018	Summer 05/27/2018 through 08/22/2018	Summer 2 07/08/2018 through 08/22/2018
Open Enrollment	07/14/2017 through 09/29/2017	07/14/2017 through 09/29/2017	12/01/2017 through 02/28/2018	12/01/2017 through 02/28/2018	05/01/2018 through 06/15/2018	06/18/2018 through 07/13/2018
Student	\$3,576	\$1,411	\$1,303	\$2,165	\$862	\$451
Spouse	\$3,576	\$1,411	\$1,303	\$2,165	\$862	\$451
Child	\$3,576	\$1,411	\$1,303	\$2,165	\$862	\$451

To view all enrollment and coverage periods available, please visit txstate.myahpcare.com or call Academic HealthPlans at 1-855-850-4298.