AcademicBlue[SM]

UNIVERSITY of HOUSTON

2026 – 2027

Student Health Insurance Plan

for University of Houston – Visiting Scholars/Students

Welcome to AcademicBlue, your Student Health Insurance Plan

Who is automatically enrolled?*

- International students with a "J" visa status
- Visiting scholars/students with a "J" visa program participants and their dependents

*Unless proof of comparable coverage is provided at uhscholars.myahpcare.com/waiver.

Special notes

- Visiting scholars/students and their dependents who are enrolled for classes are not eligible to purchase this plan

Please read the plan policy in full to determine whether this Student Health Insurance Plan is right for you and to review all eligibility criteria. The medical policy and additional information can be found at uhscholars.myahpcare.com.

Advantages of Membership

- Affordable, quality coverage compatible with the Affordable Care Act
- Coverage when traveling
- Access to a broad Participating Provider Option (PPO) network from BCBSTX
- Bilingual 24/7 Nurseline, telehealth and behavioral health program
- Discounts on vision, fitness and many more products and services

Premium Costs and Coverage Periods

	Monthly
Monthly Coverage Dates (Rolling)	09/01/2026 – 08/31/2027
Scholar/Student/Dependent	$245.71 Monthly Rate

771747.0326

University of Houston - Visiting Scholars/Students 2026-2027 Plan Highlights[1, 2]

The deductible will be waived and benefits will be paid at 100% for covered medical expenses incurred when treatment is rendered at the Student Health Center.

Benefit Maximums and Deductibles	In-Network Provider	Out-of-Network Provider
Benefit Maximum	Unlimited	Unlimited
Deductible (Individual/Family)	$350/$1,050	$700/$2,100
Out-of-Pocket Maximum (Individual/Family)	$8,150 /$15,800	$15,800/$31,600

Benefits (Deductible applies unless noted below)	In-Network Provider	Out-of-Network Provider
Hospital Expenses	80% after a $100 copayment per Hospital Confinement	60% after a $100 copayment per Hospital Confinement
Surgical Expenses	80%	60%
Doctor's Visits	100% after copayment $35 primary care copayment per visit; $35 specialist copayment per visit (deductible waived)	60%
Emergency Care and Accidental Injury Facility Services – Copayment is waived if the insured is admitted, Inpatient hospital expenses will apply	80% after $250 Copayment (deductible waived)	80% after $250 Copayment (deductible waived)
Physician Services	80%	80%
Independent Lab and X-Ray Provider	80%	60%
Preventive Care Services	100% (deductible Waived)	60%
Routine Eye Exam (age 19 and over; one per benefit period)	100% after copayment $35 primary care copayment per visit; $35 specialist copayment per visit (deductible waived)	60%
Prescription Drugs **Per 30-day Retail Supply** **Copayment plus the cost difference between the brand-name drug or supplies per prescription for which there is a generic drug or supply available.	At pharmacies contracting with Prime Therapeutics[3], 100% after: • $20 copayment for each generic drug • $50 copayment for each brand-name drug** • $70 copayment for each nonpreferred brand-name drug** • $100 copayment for each specialty drug • $100 Annual Prescription Deductible	50% after: • $20 copayment for each generic drug • $50 copayment for each brand name drug** • $70 copayment for nonpreferred brand-name drug** • $100 Annual Prescription Deductible **Please note:** You are required to pay the full amount charged at the time of service for all prescriptions dispensed at an out-of-network provider and must file a claim for reimbursement.

1 This document 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 expenses are subject to plan maximums, limitations and exclusions as described in the Policy. The PPO network is BCBSTX Participating Provider Option (PPO) Network.

2 Covered charges at in-network and out-of-network providers are based on the allowable amount. For more information, please see your school's policy.

3 The relationship between Blue Cross and Blue Shield of Texas (BCBSTX) and contracting pharmacies is that of independent contractors, contracted through a related company, Prime Therapeutics LLC. Prime Therapeutics LLC is a separate company that also administers the pharmacy benefit program. BCBSTX, as well as several other independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

Academic HealthPlans, Inc., part of the Brown & Brown team, is an independent company that provides program management and administrative services for the student health plans of Blue Cross and Blue Shield of Texas.

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