

SNAPSHOT

RATES & IMPORTANT DATES

Rates are effective 12/31/2022 to 12/30/2023. Rates include medical insurance premium and administrative fees.

	STUDENT	SPOUSE/ DOMESTIC PARTNER	EACH CHILD
Annual 12/31/2022 - 12/30/2023	\$ 2,340.00	\$ 4,776.00	\$ 4,776.00
Spring / Summer 12/31/2022 - 07/31/2023	\$ 1,365.00	\$ 2,786.00	\$ 2,786.00
Summer 06/01/2023 - 07/31/2023	\$ 390.00	\$ 796.00	\$ 796.00
Fall 08/01/2023 - 12/30/2023	\$ 975.00	\$ 1,990.00	\$ 1,990.00

WHAT'S COVERED (TREATMENT MUST BE MEDICALLY NECESSARY)

- \$250,000 benefit year maximum for all eligible expenses
- Physician visits
- Specific emergency benefit expenses
- Surgery, in- and outpatient
- Tests, procedures, and lab services, such as X-rays and blood draws
- Physical therapy, chiropractic care, and acupuncture
- Maternity and prenatal care
- Prescription drugs

Limitations and exclusions apply. This is a brief summary of benefits. This plan includes both insurance and non-insurance benefits. The terms and conditions of insurance coverage as underwritten by Crum & Forster, SPC are set forth in the Policy. To view your plan details, limitations and exclusions, visit mycare26.com.

Coinsurance is the cost sharing between what the insurance pays and what you pay. This insurance plan pays 90% of the Preferred Allowance (PA) when you use **Aetna Passport to Healthcare® Primary PPO** providers, and 70% of Usual, Reasonable, and Customary (URC) Charges when you use out-of-network providers.

BENEFITS

	AETNA PASSPORT PPO PROVIDER YOU WILL PAY:	OUT-OF-NETWORK PROVIDER YOU WILL PAY AT LEAST: ¹
Deductible per Plan Participant (Certain benefit deductibles may be applicable.)	\$250	\$500
Office Visit	10% of PA, after \$20 copay per visit (Copay waived at campus health center)	30% of URC, after \$40 deductible per visit
Urgent Care Visit	10% of PA, after \$20 copay per visit	30% of URC, after \$40 deductible per visit
Hospital Room & Board	10% of PA, after \$50 copay per visit	30% of URC, after \$100 deductible per visit
Emergency Room Benefit	90% of PA, after \$300 copay per visit (copay waived if admitted)	30% of URC, after \$600 deductible per visit (deductible waived if admitted)
Prescription Drugs²	\$0	

1. Using out-of-network providers may cost you more money! Coinsurance is payable for Usual, Reasonable, and Customary (URC) Charges, the most common charge for similar professional services, drugs, procedures, devices, supplies, or treatment within the area in which the charge is incurred. Some out-of-network providers charge more than URC and you will be responsible for these excess amounts over the listed coinsurance.
2. When you use an out-of-network pharmacy, you must pay for your prescription in full, then submit a claim for reimbursement.

QUESTIONS

Eligibility & Enrollment

Academic HealthPlans, Inc. (AHP)
DBA Academic Health Insurance Services
(800) 537-1777

Benefits & Claims

Administrative Concepts, Inc. (ACI)
(800) 483-6192

Plan Materials & Information

mycare26.com

INSURANCE ID CARD

You will be notified when your insurance ID card is available.

Carry your ID card with you at all times!

GETTING CARE

Go to the campus health center. If you need to access care away from campus, visit aetna.com/docfind/custom/passport to find a provider in the **Aetna Passport to Healthcare® Primary PPO** Network.

PRESCRIPTION DRUGS

Always use an **Express Scripts** pharmacy. To locate a pharmacy, visit express-scripts.com or call **(800) 400-0136**.

Insurance underwritten by Crum & Forster, SPC, under the jurisdiction of the Cayman Islands. If there are any discrepancies between this document and the Policy, the Policy will govern.

NOTICE: This insurance is not subject to and does not provide certain insurance benefits required by the U.S.'s Patient Protection and Affordable Care Act ("PPACA"). PPACA requires certain U.S. citizens or U.S. residents to obtain PPACA compliant health insurance, or "minimum essential coverage."

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