

Rockhurst University

Student Health Insurance Plan 2024-2025



Eligibility

Enrollment in the University-sponsored Student Health Insurance Plan (SHIP) is mandatory for all full-time undergraduate (12 credit hours or more), graduate (9 credit hours or more) students. Exceptions include full-time graduate students in the MBA, Data Analytics and Organizational Leadership program (accelerated option). Executive MBA, DO/MBA, MBA/PHY, RN to BSN, MSN, M.Ed., Ed.D and post-baccalaureate students who all may voluntarily enroll in this program. All graduate certificate programs are also exempt from the mandatory waiver. Part-time students, taking a minimum of **4 hours** per semester, may also enroll voluntarily in the health plan. **There is no dependent coverage available.**

Students must actively attend classes and remain enrolled with Rockhurst for the first 31 days of each term to be eligible for coverage.

What's Included?

- Access to Academic Student Assistance Program (ASAP)
- Coverage when traveling
- Academic Emergency Services*

More Information

For full details of participation in the plan, please view the complete brochure online at: rockhurst.myahpcare.com

Questions

To view Frequently Asked Questions or submit a request, please visit: help.ahpcare.com

Insurance ID Card

To access your ID card, please visit rockhurst.myahpcare.com/additionalresources

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 Expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. The PPO network is **Aetna Open Choice PPO Network.**

*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LLC, separate and independent companies from Academic HealthPlans, Inc. (AHP), a Risk Strategies Company.

This document contains a summary of your school's student health insurance policy benefits and restrictions as of the date of its publication; the summary document may differ from the benefits in the approved policy of insurance. The final policy may be pending approval by applicable federal and state regulatory authorities. The final approved policy of insurance is accessible upon approval at rockhurst.myahpcare.com.

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Benefits

(Deductible applies unless otherwise stated below)

	AETNA PPO Payments are based on the Negotiated Charge	OUT-OF-NETWORK PROVIDER Payments are based on the Recognized Charge
Individual Deductible Per Person, Per Policy Year	\$500	\$1,000
Individual Out-of-Pocket Maximum Per Person, Per Policy Year	\$7,500	\$15,000
Office Visit	80% after a \$25 Copayment	60%
Urgent Care	80% after a \$25 Copayment	60%
Hospital Emergency Room	80% after a \$200 Copayment	80% after a \$200 Copayment
Prescription Drugs Up to 30-day supply per prescription (If you visit an Out-of-Network pharmacy, you must pay for prescriptions in full, then submit a claim for reimbursement.) (Deductible waived)	At pharmacies contracting with Aetna 100% after: Generic: \$25 Copayment Preferred Brand-Name: \$65 Copayment Non-Preferred Brand-Name: \$100 Copayment	70% after: Generic: \$25 Copayment Preferred Brand-Name: \$65 Copayment Non-Preferred Brand-Name: \$100 Copayment

Coverage Periods & Rates

	FALL 08/01/2024 - 12/31/2024	SPRING/SUMMER 01/01/2025 - 07/31/2025	SUMMER 06/01/2025 - 07/31/2025
Enrollment Periods	06/17/2024 - 09/06/2024	11/11/2024 - 01/31/2025	05/01/2025 - 06/17/2025
Student	\$1,257	\$1,673	\$482

To view all enrollment and coverage periods available, please visit rockhurst.myahpcare.com