

Albert Einstein College of Medicine

Student Health Insurance Plan 2023-2024



Eligibility

All medical students attending the Albert Einstein College of Medicine are required to enroll in the Student Health Insurance Plan at registration, unless proof of comparable coverage is furnished.

Eligible dependents of those enrolled in the plan may participate in the plan on a Voluntary basis.

What's Included?

- Access to a 24/7 nurse line
- Access to Telehealth
- Dental and Vision Benefits
- Coverage when traveling
- Optional Academic Emergency Services*

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

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 einstein.myahpcare.com.

More Information

For full details of participation in the plan, please view the complete brochure online at: einstein.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 einstein.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 Anthem PPO.

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Benefits (Deductible applies unless otherwise stated below)

	IN-NETWORK PROVIDER Member Responsibility	OUT-OF-NETWORK PROVIDER Member Responsibility
Benefit Maximum Per Insured Person, per Policy Year		Unlimited
Deductible Per Insured Person, per Policy Year	\$ 500	\$ 3,500
Individual Out-of-Pocket Limit Per Insured Person, per Policy Year	\$ 5,000	\$ 10,000
Family Out-of-Pocket Limit For all Insureds in a Family, per Policy Year	\$ 6,600	\$ 30,000
Doctor Home and Office Services, Includes primary care and specialist (Deductible waived)	\$20 Copay per visit	30% after a \$30 Copay per visit
Outpatient Surgery	20%	40%
Habilitation Services Physical Therapy, Occupational Therapy or Speech Therapy	20%	40%
Diagnostic Services (Deductible waived)	20%	40%
Durable Medical Equipment	20%	40%
Emergency Room Facility Services Copay waived if admitted (Deductible waived)	20% after a \$150 Copay per visit	20% after a \$150 Copay per visit
Mental/Behavioral Health and Substance Abuse Treatment Office Visits (Deductible waived)	No Charge	30%
Preventive Care Services For more information, please visit healthcare.gov/preventive-care-benefits/	No Charge	30%
Prescription Drugs, 30 day supply (deductible waived)	Tier 1 - Generic: \$20 Copay Tier 2 - Preferred Brand: \$40 Copay Tier 3 - Non-Preferred Brand/ Specialty Drugs: \$60 Copay	Tier 1 - Generic: \$20 Copay Tier 2 - Preferred Brand: \$40 Copay Tier 3 - Non-Preferred Brand/ Specialty Drugs: \$60 Copay

Coverage Period

	Fall - 2nd - 4th Year 07/01/23 - 12/31/23	Fall - 1st Year 08/07/23 - 12/31/23	Spring/Summer 01/01/24 - 06/30/24
Enrollment Deadline	04/18/23 - 05/15/23	07/17/23 - 07/31/23	N/A
Student	\$ 3,458.07	\$ 2,777.61	\$ 3,458.07
Spouse	\$ 3,458.07	\$ 2,777.61	\$ 3,458.07
One Child	\$ 3,458.07	\$ 2,777.61	\$ 3,458.07

Rates for this plan are subject to review and approval by the New York Department of Financial Services are subject to change.

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