



Agnes Scott College

# Student Coverage With Care 2025-2026

## What's Included?



Academic  
Student  
Assistance  
Program (ASAP)



Access to  
Dental and  
Vision  
Options



Academic  
Emergency  
Services (AES)\*



Telehealth  
solutions through  
AcademicLiveCare  
(ALC)



Coverage  
when  
traveling



PPO network is  
UnitedHealthcare  
Choice Plus



## Eligibility

The Classes eligible for coverage available under the Certificate are shown below:

**Class I:** An international student, scholar, visiting faculty, or other person with a current passport or non-immigrant visa, temporarily located outside his or her Home Country as a non-resident alien and is engaged in educational activities of the Member; has not obtained permanent residency status in the United States; and is not a U.S. Citizen.

The Insurer maintains its right to investigate eligibility or student status and attendance records to verify that the eligibility requirements have been met. If the Insurer discovers that the eligibility requirements have not been met, its only obligation is to refund premium.

For more information, visit [agnesscott.myahpcare.com](https://agnesscott.myahpcare.com).



### Questions

To view Frequently Asked Questions or submit a request, please visit: [help.ahpcare.com](https://help.ahpcare.com)



### Insurance ID Card

To access your ID card, please visit [agnesscott.myahpcare.com/additionalresources](https://agnesscott.myahpcare.com/additionalresources)

\*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.



Academic HealthPlans, Inc. (AHP), a Risk Strategies Company is an independent company that provides program management and administrative services for the student health plans of UnitedHealthcare Insurance Company (UHC).

## Benefits

(Deductible applies unless otherwise stated below)

	PREFERRED PROVIDER Payments are based on the Allowed Amount:	OUT-OF-NETWORK PROVIDER Payments are based on the Allowed Amount:
Benefit Maximum Per Insured Person, per Policy Year	Unlimited	
Overall Deductible Per Insured Person, per Policy Year	\$250	\$600
Student Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$7,500	\$15,000
Family Out-of-Pocket Maximum For all Insureds in a Family, per Policy Year	\$13,700	N/A
Outpatient Physician's Visits	80% after a \$25 Copay per visit (Deductible waived)	60%
Room and Board Expense	80%	60%
Inpatient/Outpatient Surgery	80%	60%
Medical Emergency Expense Copay waived if admitted (Deductible waived)	80% after a \$150 Copay per visit	80% after a \$150 Copay per visit
Diagnostic X-ray Services & Laboratory Procedures	80%	60%
Durable Medical Equipment	80%	80%
Mental Illness/Substance Use Disorder Treatment Except Medical Emergency and Prescription Drugs	80% after a \$25 Copay per visit (Deductible waived)	60%
Preventive Care Services For more information, please visit: <a href="https://healthcare.gov/coverage/preventive-care-benefits">healthcare.gov/coverage/preventive-care-benefits</a>	100% (Deductible waived)	No Benefits
Prescription Drugs Up to 31-day supply per prescription Copayments or Coinsurance combined shall not exceed \$200 per Prescription Order (Deductible waived)	At pharmacies contracting with UnitedHealthcare Pharmacy 100% after a Tier 1: \$25 Copay Tier 2: \$60 Copay Tier 3: \$75 Copay	100% after a Generic: \$25 Copay Brand-name: \$45 Copay

## Coverage Periods & Rates - Undergraduate

	ANNUAL 08/01/2025 - 07/31/2026	FALL 08/01/2025 - 12/31/2025	SPRING/SUMMER 01/01/2026 - 07/31/2026
Student	\$2,539	\$1,064	\$1,475

## Coverage Periods & Rates - Graduate

	ANNUAL 08/01/2025 - 07/31/2026	FALL 08/01/2025 - 12/31/2025	SPRING/SUMMER 01/01/2026 - 07/31/2026	NEW INCOMING GRAD STUDENT - SUMMER 06/01/2026 - 07/31/2026
Student	\$3,584	\$1,502	\$2082	\$600

This document is for informational purposes only and does not constitute an offer of coverage, a contract, nor medical advice. It provides a general overview of plan benefits, programs, and limitations, which are subject to plan maximums, exclusions, and regulatory approval. The benefits described herein may differ from the final policy of insurance, which will be available at [agnesscott.myahpccare.com](https://agnesscott.myahpccare.com) upon approval by federal and state authorities.