Barry University

The new insurance carrier for 2022-2023 is Aetna.

All undergraduate students taking 9 or more credit hours in Fall and Spring and 6 credits in Summer, and Graduate students taking 4 or more credit hours per semester are automatically enrolled in this insurance plan at registration, unless proof of comparable coverage is furnished on a hard waiver basis. All undergraduate nursing majors, all Division of Medicine, Physician Assistant and Anesthesia students (excluding Barry U online students and other select online programs) are automatically enrolled in this insurance plan at registration, unless proof of comparable coverage is furnished on a hard waiver basis. Students who are enrolled in fully online programs are not eligible to enroll in this plan.

Dependents are not eligible to enroll in the Medical Insurance Plan.

Please view the complete brochure online at barry.myahpcare.com for full details of participation in the plan.





Barry University

Aetna is the Preferred Provider and will provide maximum benefits at lowest cost.

Access to a 24/7 Nurse Line

Mobile access - view digital ID cards

Access to Telehealth

Optional Dental Coverage

Coverage when traveling

Travel Assistance Services through On Call*

*Travel Assistance Services is underwritten by On Call International and administered by Aetna, separate and independent companies from Academic HealthPlans.

Barry University 2022-2023

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.**

MAXIMUMS & DEDUCTIBLES	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
Benefit Maximum per Insured Person, per Policy Year	Unlimited	
Individual Deductible Per Insured Person, per Policy Year	\$ 500	\$ 1,000
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$ 7,150	Unlimited

COVERAGE & COST

Fall	08/01/22 - 12/31/22
Open Enrollment	04/15/22 - 09/09/22
Student	\$ 841
Spring	01/01/23 - 05/07/23
Open Enrollment	11/02/22 - 02/04/23
Student	\$ 698
Summer	05/08/23 - 07/31/23
Open Enrollment	03/15/23 - 06/02/23
Student	\$ 467

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 barry.myahpcare.com.

Academic HealthPlans, Inc. (AHP) is an independent company that provides program management and administrative services for the student health plans of Aetna.

BENEFITS	(Deductible applies unless otherwise stated b	elow)
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IN-NETWORK PROVIDER
Payments are based on the
Negotiated Charge

OUT-OF-NETWORK PROVIDER
Payments are based on the
Recognized Charge

Hospital Room and Board Expense (deductible waived)

80% after a 50% after a \$1,000 copayment \$1,000 copayment

Inpatient/Outpatient Surgery

80% 50%

Physician, Specialist, including Consultants Office Visits

(deductible waived)

80% after a 50% after a \$50 copayment \$50 copayment

Outpatient Physical, Occupational, Speech, and

Cognitive Therapies, including Cardiac and Pulmonary Therapy

(deductible waived)

80% after a 50% after a \$50 copayment \$50 copayment

Hospital Emergency Room (deductible waived)

80% after a 80% after a \$1,000 copayment \$1,000 copayment

\$1,000 copayment \$1,000 cop

Urgent Care (deductible waived)

80% after a 50% after a \$30 copayment \$30 copayment

Labs & Diagnostic Testing

100% 50%

(deductible waived)

Mental Health and Substance Abuse Treatment Office Visits

(deductible waived)

80% after a 50% after a \$50 copayment \$50 copayment

Preventive Care Services

For more information, please visit healthcare.gov/preventive-care-benefits

100% 50%

(deductible waived)

Prescription Drugs, 30-day supply (deductible waived)

At pharmacies contracting

with Aetna

100% after: 50% after:

Preferred Generic: Preferred Generic: \$15 copayment \$15 copayment

Non-Preferred Generic: Non-Preferred Generic:

\$80 copayment \$80 copayment

Preferred Brand-Name: Preferred Brand-Name:

\$50 copayment \$50 copayment

Non-Preferred Brand-Name: Non-Preferred Brand-Name:

\$80 copayment \$80 copayment