

Barry University

Student Health Insurance Plan 2023-2024

The new insurance carrier is UnitedHealthcare Insurance Company



Eligibility

Undergraduate students taking nine (9) or more credit hours in Fall and Spring and three (3) credit hours in Summer, and all Graduate students taking four (4) or more credit hours each semester are eligible to enroll in the student insurance policy through UnitedHealthcare Insurance Company. All students residing in campus housing, all international students attending Barry University with a F1 and J1 visa and all students enrolled in the undergraduate Nursing programs, and graduate Anesthesia, Physician Assistant, Podiatric medicine, Occupation Therapy, Graduate Social Work and Law Schools are automatically billed at the time of registration. All billed students are eligible to waive the cost of the student insurance during the open enrollment prior to the first three (3) weeks of classes. Private insurance must meet the waiver standards established by Barry University.

All commuters, who meet the credit criteria of the policy who are not enrolled in the above-named programs, are eligible to enroll in the student insurance plan on a voluntary basis directly with Academic HealthPlans (AHP).

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

What's Included?

- Access to a 24/7 Nurse Line
- Access to Telehealth
- Optional Dental Coverage
- Access to a 24/7 Student Assistance Program

More Information

For full details of participation in the plan, please view the complete brochure online at: barry.mycare26.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 [click here](#).

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 **UnitedHealthcare Choice Plus PPO**.

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Benefits

(Deductible applies unless otherwise stated below)

The Deductible will be waived and benefits will be paid at 100% for Covered Medical Expenses incurred when treatment is rendered at or referred by the Student Health Services for the following services: Laboratory Services rendered at the SHS and Laboratory Services referred to Labcorp.

	PREFERRED PROVIDER Payments are based on the PPO Allowance	OUT-OF-NETWORK PROVIDER Payments are based on the Usual & Customary Charges
Benefit Maximum Per Insured Person, per Policy Year		Unlimited
Deductible Per Insured Person, per Policy Year	\$500	\$1,000
Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$7,150	\$14,300
Hospital Room and Board Expense (Deductible waived)	80% after a \$1,000 Copayment	50% after a \$1,000 Copayment
Inpatient/Outpatient Surgery	80%	50%
Outpatient Physician's Visits	80% after a \$50 Copayment	50% after a \$50 Copayment
Physiotherapy (Deductible waived)	80% after a \$50 Copayment	50% after a \$50 Copayment
Medical Emergency Expenses (Copayment waived if admitted)	80% after a \$500 Copayment	80% after a \$500 Copayment
Diagnostic X-ray Services	80%	50%
Mental Illness & Substance Use Disorder Treatment (Deductible waived, see policy for additional details)	80% after a Inpatient: \$1,000 Copayment Outpatient: \$50 Copayment	50% after a Inpatient: \$1,000 Copayment Outpatient: \$50 Copayment
Preventive Care Services For more information, please visit healthcare.gov/preventive-care-benefits	100% (Deductible waived)	50%
Prescription Drugs, 31-day supply (Deductible waived)	At pharmacies contracting with UnitedHealthcare Pharmacy 100% after a: Tier 1: \$15 Copayment Tier 2: \$50 Copayment Tier 3: \$80 Copayment	50% after a Generic: \$15 Copayment Brand-Name: \$50 Copayment Please note: You are required to pay the full amount charged at the time of service for all prescriptions dispensed at an out-of-network provider and must file a claim for reimbursement.

Rates & Coverage Periods

	SPECIAL 08/01/23 - 08/10/23	FALL 08/11/23 - 01/05/24	SPRING 01/06/24 - 05/15/24	SUMMER 05/16/24 - 08/10/24
Enrollment Periods	06/02/23 - 07/01/23	06/15/23 - 09/18/23	11/02/23 - 02/04/24	03/15/24 - 06/02/24
Student	\$59	\$870	\$770	\$512

To view all enrollment and coverage periods available, please visit barry.mycare26.com.