

# East Central University 2019-2020 Student Health Insurance Plan



## Eligibility

All registered International students are required to enroll in the Student Health Insurance Plan, or provide proof of comparable coverage.

The insurance premium will be automatically assessed on the student's tuition bill.

## How to Waive

In order to have the insurance premium removed from the tuition, students must complete the online waiver at [ecok.myahpcare.com](http://ecok.myahpcare.com) by August 31, 2019 for the Fall and January 28, 2020 for the Spring.

Please view the complete brochure on-line at [ecok.myahpcare.com](http://ecok.myahpcare.com) for full details of participation in the plan.

BENEFIT MAXIMUMS & DEDUCTIBLES	
Benefit Maximum	Unlimited
Deductible Per Insured Person, per Policy Year (The Deductible is waived and benefits paid at 100% for services rendered at the Student Health Center.)	\$250
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$ 6,600
Family Out-of-Pocket Maximum Per Family, per Policy Year	\$ 13,200

\*Preventive Services: Coinsurance, Copayments and Deductible are not applicable to Preventive Services. Benefits are paid at 100% of Usual and Reasonable Charge.

2019-2020 PREMIUM COSTS AND COVERAGE PERIODS		
Coverage Periods	Fall 08/01/2019 to 01/09/2020 at 12:01 AM	Spring/Summer 01/09/2020 to 08/01/2020 at 12:01 AM
Student	\$ 721	\$ 721

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.

BENEFIT CATEGORY	In-Network Provider	Out-of-Network Provider
	Payments are based on the PPO Allowance for Covered Medical Expenses	Payments are based on the Usual & Reasonable Charges for Covered Medical Expenses
Hospital Room and Board Expenses Precertification Required	80%	60%
Inpatient/Outpatient Surgery Inpatient: Precertification Required	80%	60%
In-Office Physician's Fees	80%	60%
Diagnostic X-Ray Services & Laboratory Procedures	80%	60%
Emergency Services Expense \$50 Deductible per visit	80%	80%
Prescription Drugs	At pharmacies contracting with HealthSmart RX® 100% after a \$15 Copayment per Generic Drug \$30 Copayment per Preferred Brand Drug \$60 Copayment per Brand Drug	60% after a \$15 Copayment per Generic Drug \$30 Copayment per Preferred Brand Drug \$60 Copayment per Brand Drug
*Preventive Services	100%	100%

\*Please visit [www.healthcare.gov/preventive-care-benefits/](http://www.healthcare.gov/preventive-care-benefits/) for more information.

To view all enrollment and coverage periods available, please visit [ecok.myahpcare.com](http://ecok.myahpcare.com) or call Academic HealthPlans at 1-855-871-9859.



The 2019-2020 Student Health Insurance Plan is underwritten by National Guardian Life Insurance Company, as Policy Form number NBH-280 (2014) OK. National Guardian Life Insurance Company is not affiliated with The Guardian Life Insurance Company of America, AKA The Guardian or Guardian Life.