## ast Central University

2021-2022 Wellfleet Academic HealthPlans

- - Cigna PPO will provide maximum benefits at lowest cost
  - Access to a Student Assistance Program
  - Access to Telehealth
  - Academic Emergency Services\*

\*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.

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

ecok.myahpcare.com by August 20, 2021 for the Fall and January 14, 2022 for the Spring. Please view the complete brochure online at ecok.myahpcare.com for full details of participation in the plan.

BENEFIT MAXIMUMS & DEDUCTIBLES		IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
Benefit Maximum per Insured Person, per Policy Year		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 (combined)	
Out-of-Pocket Maximum per Insured Person, per Policy Year		\$ 6,600 (combined)	
BENEFITS (Deductible applies unless otherwise stated below)		IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDE
IN-NETWORK PROVIDER Payments are based on the Negotiated Charge	OUT-OF-NETWORK PROVIDER Payments are based on Usual & Customary Charge	Payments are based on the Negotiated Charge	Payments are based on Usual & Customary Charge
		Prescription Drugs	
Hospital Care Pre-Certification Required		At pharmacies contracting with Wellfleet RX/ESI	
80%	60%	100% after a	60% after a
Inpatient/Outpatient Surgery Pre-Certification Required		Tier 1: \$15 Copayment	Tier 1: \$15 Copayment
80%	60%	Tier 2:	Tier 2: \$30 Copayment
Physician's Office Visits, includi 80%	ng specialists and consultants 60%	\$30 Copayment Tier 3: \$60 Copayment	Tier 3: \$60 Copayment
Rehabilitation Therapy, including Physical Therapy, and Occupational Therapy and Speech Therapy Pre-Certification Required		Specialty Drugs: \$60 Copayment	Specialty Drugs: \$60 Copayment
80%	60%	(deductible waived)	
Diagnostic Imaging Services		COVERAGE & COST	
Pre-Certification Required		Fall	08/01/21 - 01/08/22
80%	60%	Waiver Deadline	06/19/21 - 08/20/21
Emergency Services		Student	\$ 732
80% after a \$50 Copayment	80% after a \$50 Copayment	Spring/Summer	01/09/22 - 07/31/22
Preventive Services	φουσομαγιτιστιτ	Waiver Deadline	11/06/21 - 01/14/22
100%	60%	Student	\$ 732
(deductible waived)	0070	To view all enrollment and coverage periods available, please visit <u>ecok.myahpcare.com</u> .	

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 ecok.myahpcare.com.