

# University of Hawai'i at Hawai'i Community College Intensive English Program

International Student Insurance Plan  
2024-2025



## Eligibility

The Classes eligible for coverage available under this plan 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.

**Class II:** Eligible Dependents of any of the above classes.

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 the premium. Persons for whom coverage is prohibited under applicable law will not be considered eligible under this plan. Enrollment cannot exceed 12 months. All benefits and limits are stated per Individual Insured or Eligible Dependent (Covered Person).

## What's Included?

- Coverage when traveling
- Academic Vision Care (AVC)
- Academic Emergency Services\*

## More Information

For full details of participation in the plan, please view the complete brochure online at: [hawaii-hawaii.myahpcare.com](http://hawaii-hawaii.myahpcare.com)

## Questions

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

## Insurance ID Card

To access your ID card, please [click here](#).

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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 **Blue Cross Blue Shield PPO**. If you need to access care away from campus, visit [geobluestudents.com](http://geobluestudents.com) or call 1 (844) 268-2686 to find a provider in the **Blue Cross Blue Shield PPO** Network.

\*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).

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 [hawaii-hawaii.myahpcare.com](http://hawaii-hawaii.myahpcare.com).

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## Benefits

	BLUE CROSS BLUE SHIELD PPO PROVIDER YOU WILL PAY:	OUT-OF-NETWORK PPO PROVIDER YOU WILL PAY AT LEAST:
Maximum Benefit Per Individual, Per Coverage Year	\$250,000	
Deductible Per Individual, Per Coverage Year	\$0	
Out-of-Pocket Limit Per Individual, Per Coverage Year	\$5,000	
Physician Office Visits	\$20 Copayment per visit	20%
Treatment at an Urgent Care Facility	\$35 Copayment per visit	20%
Inpatient Hospital Services	\$50 Copayment per visit	20%
Emergency Hospital Services	\$100 Copayment per visit (Copay waived if admitted)	20%
Prescription Drugs Up to 31-day supply	Generic: \$10 Copayment Brand Name: \$50 Copayment Injectables: \$50 Copayment (If you use an Out-of-Network pharmacy, you will have to pay for prescriptions in full, then submit a claim for reimbursement)	

Routine Preventive Care Services  
For more information, please visit  
[healthcare.gov/preventive-care-benefits](http://healthcare.gov/preventive-care-benefits)

Allowed Amount up to a Coverage Year Maximum of \$500

## Rates & Coverage Periods

	STUDENT	SPOUSE OR DOMESTIC PARTNER	ONE CHILD	TWO OR MORE CHILDREN
Fall I 08/01/2024 - 10/30/2024	\$435	\$1,233	\$672	\$1,344
Fall II 10/01/2024 - 12/31/2024	\$435	\$1,233	\$672	\$1,344
Fall III (Continuing Students) 11/01/2024 - 12/31/2024	\$290	\$822	\$448	\$896
Spring I 01/01/2025 - 03/31/2025	\$435	\$1,233	\$672	\$1,344
Spring II 03/01/2025 - 05/31/2025	\$435	\$1,233	\$672	\$1,344
Spring III (Continuing Students) 04/01/2025 - 05/31/2025	\$290	\$822	\$448	\$896
Summer 05/01/2025 - 07/31/2025	\$435	\$1,233	\$672	\$1,344
Summer II 06/01/2025 - 07/31/2025	\$290	\$822	\$448	\$896

To view all enrollment and coverage periods available, please visit [hawaii-hawaii.myahpcare.com](http://hawaii-hawaii.myahpcare.com)