

# Johns Hopkins University

## Visiting Students & Trainees

### Student Health Insurance Plan

2024-2025



#### Eligibility

As a visiting student or trainee you are eligible to enroll into the JHU Student Health Insurance Plan. If you are on an active F-1 or J-1 visa, your visa requires that you enroll in the University sponsored health plan. If you are a domestic visiting student and have comparable coverage, no action is required.

All SOM visiting students are automatically enrolled in the university's student medical plan for the dates of your appointment. The premiums will be added directly to your SIS student account. If you already have comparable medical insurance coverage through another plan and do not wish to participate in the plan offered by Johns Hopkins University, you may have the option to waive the coverage. You will have to log into your AHP account to submit a waiver.

All SOM International students with an active F1 or J1 Visa status, are *ineligible* to waive and are required to remain enrolled in the university plan.

#### What's Offered?

- Medical Coverage through Wellfleet (Cigna PPO)
- Dental Coverage through Delta Dental
- Vision Coverage through EyeMed
- Coverage when traveling

#### More Information

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

#### Questions

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

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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 **Cigna OAP**.

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## Benefits (Deductible applies unless otherwise stated below)

	IN-NETWORK PROVIDER Payments are based on the Preferred Allowance	OUT-OF-NETWORK PROVIDER Payments are based on Reasonable & Customary Charges
Benefit Maximum Per Insured Person, Per Policy Year		Unlimited
Individual Deductible Per Insured Person, Per Policy Year		\$150 (Students' Deductible reduced to \$75 with a referral from the Student Health & Wellness Center, Counseling Center)
Family Deductible Per Family, Per Policy Year		\$450
Individual Out-of-Pocket Maximum Per Insured Person, Per Policy Year	\$3,000	\$3,000
Family Out-of-Pocket Maximum Per Family, Per Policy Year	\$9,000	\$9,000
Hospital Room and Board Expense	90%	70%
Inpatient/Outpatient Surgery	90%	70%
Primary Care Physician Visit	100% after a \$20 Copay	100% after a \$20 Copay
Emergency Room Expense	100% after a \$50 Copay	100% after a \$50 Copay
Laboratory and X-Ray Expense	90%	70%
Preventive Care For more information, please visit: <a href="https://healthcare.gov/coverage/preventive-care-benefits/">healthcare.gov/coverage/preventive-care-benefits/</a>	100% after a \$20 Copay	100% after a \$20 Copay
Prescription Drugs 30-day supply per prescription	At Student Health & Wellness Center \$8 Copay	100% after a Generic: \$15 Copay Brand Name: \$25 Copay  100% after a Generic: \$15 Deductible Brand Name: \$25 Deductible  Please Note: You must pay out-of-pocket for prescriptions at a Non-Preferred pharmacy and then submit the receipt for reimbursement.

## Rates & Coverage Periods

	DAILY Medical Rate
Visiting Students & Trainees	\$8.52
Dependent (+1)	\$8.52
Family (+2)	\$12.78

Dependent rates do not include the visiting student/trainee rate.

Visiting students/trainees will enroll directly with AHP based on appointment date. Daily rate for coverage will be calculated and paid directly to AHP.

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