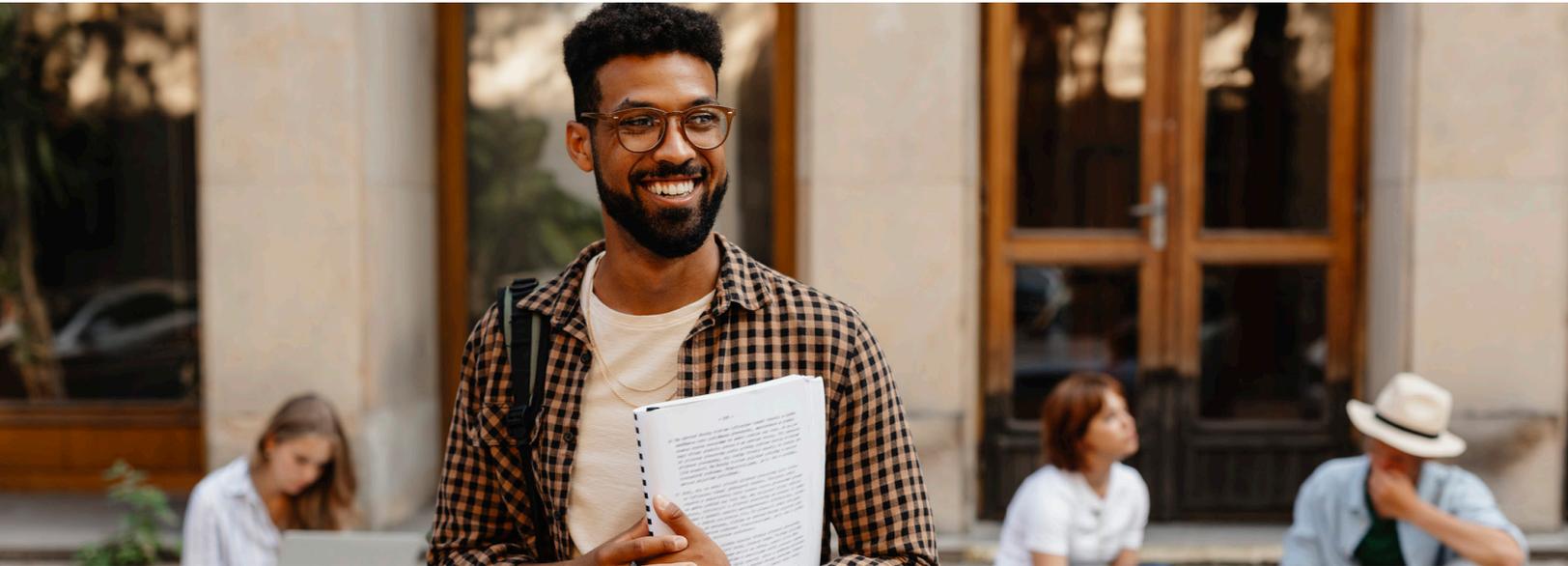


Lamar State College - Port Arthur

International Students

Student Health Insurance Plan 2024-2025



Eligibility

All registered International Students are required to participate in this insurance plan on a mandatory basis.

Dependent enrollment is available for international students only.

To view rates and enrollment information, please go to lamarpa.myahpcare.com.

What's Included?

- Access to Telemedicine
- Access to ASAP - Academic Student Assistance Program
- Coverage when traveling
- Academic Emergency Services*

More Information

For full details of participation in the plan, please view the complete brochure online at: lamarpa.myahpcare.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 visit lamarpa.myahpcare.com/additionalresources

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 Aetna PPO.

*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LCC, separate and independent companies from Academic HealthPlans, Inc. (AHP), a Risk Strategies Company.

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 lamarpa.myahpcare.com.

Lamar State College - Port Arthur International 2024-2025

Benefits (Deductible applies unless otherwise stated below)

	IN-NETWORK PROVIDER Payments are based on the Negotiated Charge	OUT-OF-NETWORK PROVIDER Payments are based on Recognized Charge
Benefit Maximum Per Insured Person, per Policy Year		Unlimited
Individual Deductible Per Insured Person, per Policy Year	\$500	\$1,000
Family Deductible All Insureds in a Family, per Policy Year	\$1,000	\$2,000
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$7,350	\$15,000
Family Out-of-Pocket Maximum All Insureds in a Family, per Policy Year	\$14,700	\$30,000
Hospital Room & Board	80%	60%
Inpatient/Outpatient Surgery	80%	60%
Physician, specialist including Consultants Office visits	100% after a \$30 Copayment per visit (Deductible waived)	60%
Diagnostic Imaging Services, including lab and radiological services	80%	60%
Hospital Emergency Room (Deductible waived)	80% after a \$150 Copayment per visit	80% after a \$150 Copayment per visit
Preventive Care Services For more information, please visit healthcare.gov/preventive-care-benefits/	100% (Deductible waived)	60%
Prescription Drugs including specialty drugs 30-day supply per prescription (Deductible waived)	At pharmacies contracting with Aetna Pharmacy: 100% after a Generic: \$20 Copayment Preferred Brand-Name: \$40 Copayment Non-Preferred Brand-Name: \$60 Copayment	60%

Coverage Period & Cost

	FALL 08/15/24 - 12/31/24	SPRING/SUMMER 01/01/25 - 08/14/25	SUMMER 05/10/25 - 08/14/25
Enrollment Deadline	06/28/24 - 09/27/24	11/26/24 - 02/14/25	04/30/25 - 06/27/25
Student	\$1,149	\$1,149	\$610
Spouse	\$1,149	\$1,149	\$610
Child ¹	\$1,149	\$1,149	\$610

¹The cost for two (2) or more children is calculated at the child rate times two (2).
To view all enrollment and coverage periods available, please visit lamarpa.myahpcare.com.