# Lamar State College - Port Arthur International Students

## **Student Coverage With Care**



### 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.

#### **Coverage Periods & Rates**

	FALL 08/15/2025 - 12/31/2025	SPRING/SUMMER 01/01/2026 - 08/14/2026	SUMMER 05/10/2026 - 08/14/2026
Enrollment Periods	06/27/2025 - 09/27/2025	11/26/2025 - 02/14/2026	04/30/2026 - 06/27/2026
Student	\$1,166.50	\$1,166.50	\$621.00
Spouse/Domestic Partner	\$1,166.50	\$1,166.50	\$621.00
Each Child <sup>1</sup>	\$1,166.50	\$1,166.50	\$621.00

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

WHAT'S INCLUDED?

Aetna PPO Network

Optional Dental coverage

Access to Academic Student Assistance Program (ASAP)

Coverage while traveling with Academic Emergency Services (AES)\*

Access to Telemedicine through AcademicLiveCare (ALC)



#### **Ouestions**

To view Frequently Asked Questions or submit a request, please visit help.ahpcare.com



#### **ID Cards**

To access your ID Card, please visit lamarpa.myahpcare.com

# Lamar State College - Port Arthur International 2025-2026

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 the 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: 100% after a: Generic: \$20 Copayment Preferred Brand-Name: \$40 Copayment Non-Preferred Brand-Name: \$60 Copayment	60%	

This document is for informational purposes only and does not constitute an offer of coverage, a contract, nor medical advice. It provides a general overview of plan benefits, programs, and limitations, which are subject to plan maximums, exclusions, and regulatory approval. The benefits described herein may differ from the final policy of insurance, which will be available at **lamarpa.myahpcare.com** upon approval by federal and state authorities.

Academic HealthPlans, Inc. (AHP), a Risk Strategies Company is an independent company that provides program management and administrative services for the student health plans of Aetna.

<sup>\*</sup>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), a Risk Strategies Company.