



## A STUDENT HEALTH PLAN **FOR YOU!**

### AM I ELIGIBLE?

Metropolitan Community College requires that all F-1 international students obtain and maintain health insurance coverage while enrolled at the college. To assure compliance, all F-1 International students will be automatically enrolled in and charged the insurance premium for the Metropolitan Community College Student Health Insurance Plan.

A dependent may become eligible for coverage under the plan only when the student becomes eligible; or within 31 days of marriage, birth or adoption.

Please view the complete brochure on-line at [mccneb.myahpcare.com](http://mccneb.myahpcare.com) for full details of participation in the plan.

### ADDITIONAL BENEFITS

- Access to a 24/7 Student Assistance Program
- Coverage when traveling
- Academic Emergency Services\*



# METROPOLITAN COMMUNITY COLLEGE 2021 - 2022

This flyer 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 medical expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. **The PPO network is Cigna.**

## BENEFIT MAXIMUMS & DEDUCTIBLES

	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
<b>Benefit Maximum</b> per Insured Person, per Policy Year	Unlimited	
<b>Individual Deductible</b> per Insured Person, per Policy Year	\$ 250	\$ 500
<b>Individual Out-of-Pocket Maximum</b> per Insured Person, per Policy Year	\$ 6,600	\$ 25,000
<b>Family Out-of-Pocket Maximum</b> for all Insureds in a Family, per Policy Year	\$ 13,200	\$ 75,000

## COVERAGE PERIOD & COST

<b>Fall</b>	<b>08/16/21 - 11/22/21</b>
Enrollment Deadline	07/17/21 - 09/14/21
Student	\$ 794.50
Spouse	\$ 794.50
Each Child <sup>1</sup>	\$ 794.50
<b>Winter</b>	<b>11/23/21 - 02/28/22</b>
Enrollment Deadline	10/22/21 - 12/21/21
Student	\$ 794.50
Spouse	\$ 794.50
Each Child <sup>1</sup>	\$ 794.50
<b>Spring (New Student only)</b>	<b>03/01/22 - 05/25/22</b>
Enrollment Deadline	01/29/22 - 03/29/22
Student	\$ 794.50
Spouse	\$ 794.50
Each Child <sup>1</sup>	\$ 794.50
<b>Summer</b>	<b>05/26/22 - 08/15/22</b>
Enrollment Deadline	04/23/22 - 06/25/22
Student	\$ 794.50
Spouse	\$ 794.50
Each Child <sup>1</sup>	\$ 794.50

## BENEFITS

Deductible applies unless otherwise stated below

IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
Payments are based on the Negotiated Charge	Payments are based on the Usual and Customary Charges

### Hospital Care, includes Room and Board Expense

Pre-certification Required

80%	60%
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### Inpatient/Outpatient Surgery

Pre-certification Required

80%	60%
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### Physician Office Visits

80% after a \$20 Copayment per visit	60% after a \$40 Copayment per visit
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### Rehabilitative Therapy including, Physical Therapy and Occupational Therapy and Speech Therapy

Pre-Certification Required

80% after a \$20 Copayment per visit	60% after a \$40 Copayment per visit
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### Diagnostic Imaging Services

Pre-Certification Required

80%	60%
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### Emergency Services

80% after a \$200 Copayment per visit	80% after a \$200 Copayment per visit
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### Preventive Care Services

For more information, please visit [healthcare.gov/preventive-care-benefits/](https://healthcare.gov/preventive-care-benefits/)

100% (deductible waived)	60% (deductible waived)
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### Prescription Drugs

At pharmacies contracting with WellfleetRX®/ESI

100% after:	
Tier 1 - \$15 Copayment	Not covered
Tier 2 - \$45 Copayment	Not covered
Tier 3 - \$75 Copayment	Not covered
Specialty Drugs - 75% after a \$150 Copayment	Not covered

<sup>1</sup>Coverage for 2 or more children is calculated at the child rate times two (2).  
To view all enrollment and coverage periods available, please visit [mccneb.myahpcare.com](https://mccneb.myahpcare.com).