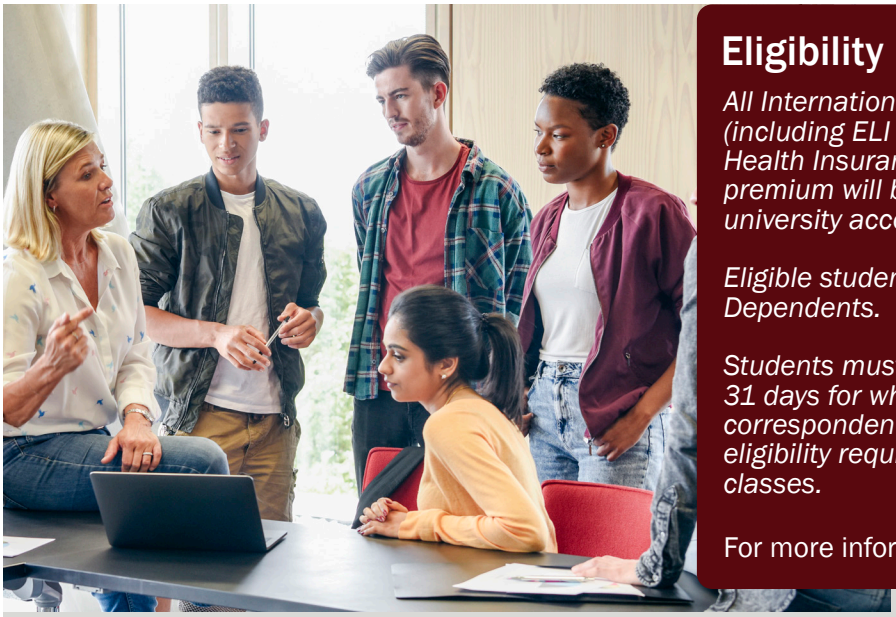
# Missouri State University

## International Student Coverage

**2026-2027**



## Eligibility

*All International students with an F-1 or J-1 visa status (including ELI students) are required to enroll in the Student Health Insurance Plan on a mandatory basis, and the premium will be automatically billed to the student's university account.*

*Eligible students who enroll may also insure their Dependents.*

*Students must actively attend classes for at least the first 31 days for which coverage is purchased. Home study, correspondence, and online courses do not fulfill the eligibility requirements that the student actively attend classes.*

For more information, visit **missouristate.myahpcare.com**.

## Coverage Periods & Rates

| | EARLY ARRIVAL FALL 07/11/2026 - 12/31/2026 | FALL 08/10/2026 - 12/31/2026 | EARLY ARRIVAL SPRING 12/02/2026 - 08/09/2027 | SPRING/ SUMMER 01/01/2027 - 08/09/2027 | SUMMER (NEW STUDENTS ONLY) 06/01/2027 - 08/09/2027 |
|---|---|---|---|---|---|
| Open Enrollment for Dependents & Qualifying Events | 07/01/2026 - 07/31/2026 | 07/01/2026 - 08/31/2026 | 12/02/2026 - 02/13/2027 | 12/16/2026 - 02/13/2027 | 05/13/2027 - 06/27/2027 |
| Student | $845.50 | $845.50 | $845.50 | $845.50 | $323.00 |
| Spouse | $845.50 | $845.50 | $845.50 | $845.50 | $323.00 |
| Child[1] | $845.50 | $845.50 | $845.50 | $845.50 | $323.00 |

[1]The cost for two (2) or more children will be two (2) times the child rate.

**To view all enrollment and coverage periods available, please visit missouristate.myahpcare.com**

## WHAT'S INCLUDED?

- 100% coverage at Bill and Lucille Magers Family Health and Wellness Center
- Access to AcademicLiveCare (ALC)
- UnitedHealthcare Options PPO
- Access to Academic Emergency Services (AES)*
- Access to Academic Student Assistance Program (ASAP)
- Small Copay for approved prescription medications

## Questions

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

## ID Cards

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

# Missouri State University - International 2026-2027

## Benefits

Policy Aggregate Maximum: Unlimited Aggregate Maximum Per Insured Person Per Policy Year (Only applies to Essential Benefits).
(Deductible applies unless otherwise stated stated below)

| | Bill and Lucille Magers Family Health and Wellness Center | Preferred Provider<br>Payments are based on the Allowed Amount | Out-of-Network Provider<br>Payments are based on the Allowed Amount |
|---|---|---|---|
| Benefit Maximum<br>Per Insured Person, Per Policy Year | Unlimited | Unlimited | Unlimited |
| Deductible per Policy Year<br>Per Insured Person, Per Policy Year<br>Not applicable to Preventive Services Benefits | Deductible does not apply. Benefits will be paid at 100% up to the benefit maximums below for Covered Expenses incurred at the Bill and Lucille Magers Family Health and Wellness Center. | $250 | $500 |
| Individual Out-of-Pocket Maximum<br>Per Insured Person, Per Policy Year | Not Applicable | $8,550 | $17,100 |
| Family Out-of-Pocket Maximum<br>For all Insureds in a Family, Per Policy Year | Not Applicable | $17,100 | Not Applicable |
| Outpatient Physician's Visits<br>(Deductible waived) | **Copay Waived | 70% after a $10 Copay per visit | 50% after a $10 Copay per visit |
| Inpatient/Outpatient Surgery | Not Applicable | 70% | 50% |
| Room and Board Expense | Not Applicable | 70% | 50% |
| Diagnostic X-ray Services & Laboratory Procedures | 100% | 70% | 50% |
| Medical Emergency Expenses<br>Copay waived if admitted to Hospital<br>(Deductible waived) | Not Applicable | 70% after a $100 Copay per visit | 70% after a $100 Copay per visit |
| Prescription Drugs<br>(Deductible waived)<br>Up to a 31-day supply | At pharmacies contracting with Optum Rx<br>100% after a<br>Generic: $15 Copayment<br>($0 Copay for Generic Contraception)<br>Brand Name: $30 Copayment<br>(When Generic Unavailable)<br>Brand Name: $50 Copayment<br>(When Generic Available) | At pharmacies contracting with UnitedHealthcare Pharmacy<br>50% | 50%<br>Please note: You are required to pay the full amount charged at the time of service for all prescriptions dispensed at an out-of-network provider and must file a claim for reimbursement |
| Preventive Care Services<br>Includes benefits for adults, women, and children. For more information, please visit healthcare.gov/coverage/preventive-care-benefits/ | 100% | 100%<br>(Deductible waived) | 50% |

**Basic office visit covered by student health fee. All other visits covered at 100% by Insurance.

**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 missouristate.myahpcare.com upon approval by federal and state authorities.**

Academic HealthPlans, Inc. (AHP), Part of the Brown & Brown Team, is an independent company that provides program management and administrative services for the student health plans of UnitedHealthcare Insurance Company.

*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), Part of the Brown & Brown Team.