



Manhattan University

# Student Coverage With Care

## 2026-2027

### What's Included?



Cigna  
is the  
Preferred  
Provider



Access to  
Optional Dental  
and Vision  
Coverage



Telehealth  
solutions  
through  
CareConnect



### Questions

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



### Insurance ID Card

To access your ID card, please visit [manhattan.myahpcare.com/additionalresources](https://manhattan.myahpcare.com/additionalresources)

### Eligibility

All registered full-time undergraduate students taking 12 or more credits, all students residing in the college dormitories, and all Division I student athletes of the policyholder are required to have health insurance coverage, either through this Student Health Plan or through another individual or family health plan. Eligible students are automatically enrolled in and charged premium for the Student Health Plan coverage unless proof of comparable coverage is provided by completing the waiver by the applicable waiver deadline date.

All degree-seeking International students are not eligible to waive the insurance and will automatically be enrolled in the student health insurance.

Coverage for dependents is not available.

For more information, please visit [manhattan.myahpcare.com](https://manhattan.myahpcare.com).



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 Wellfleet.

## Benefits

*(Deductible applies unless otherwise stated below)*

	PARTICIPATING PROVIDER Payments are based on the Allowed Amount	NON-PARTICIPATING PROVIDER Payments are based on the Allowed Amount
Individual Deductible Per Person, per Policy Year	\$250	\$500
Individual Out-of-Pocket Limit Per Person, per Policy Year	\$7,900	\$15,800
Primary Care Office Visits Including Specialist Office Visits (Deductible waived)	100% after a \$25 Copayment per visit	70%
Urgent Care Center	70%	70%
Emergency Department	70%	70%
Inpatient Hospital Includes hospital room and board expense Pre-Authorization Required	70%	60%
Inpatient and Outpatient Surgery Includes Surgeon Services, Anesthetist, and Assistant Surgeon Pre-Authorization Required	70%	60%
Diagnostic Imaging Services and Laboratory Procedures Pre-Authorization Required	70%	60%
Preventive Care (Deductible waived) For more information, visit <a href="https://healthcare.gov/preventive-care-benefits">healthcare.gov/preventive-care-benefits</a>	100%	70%
Prescription Drugs Up to a 30-day supply (Deductible waived)	At pharmacies contracting with Wellfleet Rx/ESI  100% after a Tier 1: \$20 Copayment Tier 2: \$50 Copayment Tier 3: \$100 Copayment	100% after a Tier 1: \$20 Copayment Tier 2: \$50 Copayment Tier 3: \$100 Copayment <sup>1</sup>

<sup>1</sup>For prescriptions purchased at non-participating pharmacies, you must pay in full and then submit a claim for reimbursement.

## Coverage Periods & Rates

	ANNUAL 08/01/2026 - 07/31/2027	SPRING/SUMMER 01/01/2027 - 07/31/2027
Waiver Deadlines	08/23/2026	01/15/2027
Student	\$2,564	\$1,489

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 [manhattan.myahpcare.com](https://manhattan.myahpcare.com) upon approval by federal and state authorities.