

Student Coverage With Care



Eligibility

Eligible Person is an individual who meets all the requirements of one of the covered Classes shown below:

Class 1

1. A registered Full-Time Undergraduate or a Graduate Student attending classes who is a minimum age of 16 years and maximum of 64 years;
2. Student must have a current passport and be travelling outside their Home Country; and
3. Student must have a valid F1 visa or J1 visa. F1 and J1 visa holders on OPT are not eligible.

For more information, visit mobap.myahpcare.com.

Coverage Periods & Rates

| | ANNUAL 08/01/2025 - 07/31/2026 |
|---------|-----------------------------------|
| Student | \$1,698.00 |

For more information on the Student Health Insurance Plan, please visit mobap.myahpcare.com

WHAT'S INCLUDED?

Telehealth solutions through AcademicLiveCare (ALC)

Access to Academic Student Assistance Program (ASAP)

Vision coverage through Academic Vision Care (AVC)

Coverage while traveling with Academic Emergency Services (AES)*

Optional Dental coverage through Guardian

Cigna Open Access Plus PPO Network



Questions

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



ID Cards

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

Missouri Baptist University 2025-2026

Benefits

(Deductible applies unless otherwise stated below)

| | U.S. IN-NETWORK PROVIDER Payments are based on the Preferred Allowance | U.S. OUT-OF-NETWORK PROVIDER Payments are based on the Usual, Customary & Reasonable Rate |
|--|---|--|
| Annual Maximum Per Individual, Per Policy Year | | \$250,000 |
| Individual Deductible Per Individual, Per Policy Year | \$0 | \$1,000 |
| Individual Out-of-Pocket Maximum Per Individual, Per Policy Year | \$4,000 | \$10,000 |
| Inpatient Hospital | 90% after a \$100 Copay (Deductible waived) | 70% |
| Physician's Office Visit | 90% after a \$20 Copay (Deductible waived) | 70% |
| Emergency Room (Copay waived if admitted) | 90% after a \$150 Copay per visit | 90% after a \$150 Copay per visit |
| Urgent Care Services | 90% after a \$35 Copay (Deductible waived) | 70% |
| Laboratory Services | 90% (Deductible waived) | 70% |
| Prescription Drugs Up to 30-day supply per prescription Maximum Benefit per period is \$5,000 | 100% after a: Generic: \$20 Copay Preferred Brand: \$40 Copay Non-Preferred Brand: \$60 Copay (Deductible waived) | 50% |
| Preventive Care For more information, please visit healthcare.gov/preventive-care-benefits/ | 100% (Deductible waived) | 70% |

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 mobap.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 Cigna Global Company Limited.

*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.