

# Purdue University 2018-2019 International Student Health Insurance Plan

## Eligibility

All **international students** who are registered for classes, regardless of credit hours, are required to enroll in this insurance plan unless an approved waiver is on file with the student insurance office at the Purdue University Student Health Center (PUSH). Students may apply for a waiver if they meet specific criteria. Please visit the Insurance tab on PUSH's website at [www.purdue.edu/push](http://www.purdue.edu/push) for more information.

Please view the complete certificate of coverage online at [purdueship.myahpcare.com](http://purdueship.myahpcare.com) for full details of participation in the plan.

### Additional Benefits through AHP

- Access to a 24-hour nurse line
- Coverage when traveling
- Academic Emergency Services\*
- Dental benefits included in the plan



1-855-566-7278



[purdueship.myahpcare.com](http://purdueship.myahpcare.com)



[support@myahpcare.com](mailto:support@myahpcare.com)



**PURDUE**  
UNIVERSITY®

**Anthem**®    
**BlueCross BlueShield**

\*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. Academic HealthPlans, Inc. (AHP) is an independent company that provides program management and administrative services for the student health plans of Anthem BlueCross BlueShield.

# Purdue University 2018-2019 International Student Health Insurance Plan

This 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. Your plan provides you with a higher level of coverage when you receive covered medical services from physicians who are part of the **Anthem Blue Access** network.

**Purdue Student Health Center (PUSH) Benefits:** Full-time registered students receive no-charge office visits at PUSH for illness or injury. Some services at PUSH may require a \$15 copayment. University-mandated vaccinations will be covered at no cost when services are rendered at PUSH. The deductible will be waived in the following situations: Treatment rendered at PUSH, emergency care received at urgent care or the emergency room when PUSH is closed, and services provided to dependent children (PUSH does not generally treat minors).

BENEFIT MAXIMUMS & DEDUCTIBLES	
<b>Benefit Maximum</b>	Unlimited, per Insured Person, per Policy Year
<b>Deductible</b>	Network Provider: \$200 per Insured Person, per Policy Year Non-Network Provider: \$400 per Insured Person, per Policy Year
<b>Individual Out-of-Pocket Maximum</b>	PUSH and Network Provider: \$1,500 per Insured Person, per Policy Year Non-Network Provider: \$3,000 per Insured Person, per Policy Year
<b>Family Out-of-Pocket Maximum</b>	PUSH and Network Provider: \$3,000 for all Insureds in a Family, per Policy Year Non-Network Provider: \$7,000 for all Insureds in a Family, per Policy Year

BENEFIT CATEGORY	Network Provider	Non-Network Provider
	Payments are based on the Allowed Amount	Payments are based on the Allowed Amount
<b>Hospital Room and Board Expenses</b>	90%	70%
<b>Inpatient/Outpatient Surgery</b>	90%	70%
<b>In-Office Physician Fees</b>	90%	70%
<b>Emergency Room Services</b> Copayment waived if admitted Deductible applies	90% after a \$50 Copay per visit	90% after a \$50 Copay per visit
<b>Prescription Drugs</b> Purdue University Pharmacy (PUP): \$10 copay for Tier 1 \$20 copay for Tier 2 and 3 \$50 copay for Tier 4 Can obtain up to a 90-day supply (including birth control) at PUP, with the exception of Tier 4 drugs (up to a 31-day supply).	<u>Pharmacies contracted with Anthem RX:</u> Tier 1 - Greater of 30% or \$20 Tier 2 and Tier 3 - Greater of 30% or \$40 Tier 4 - \$50 copay (must use Accredo Pharmacy) Can obtain up to a 31-day supply per prescription	N/A
<b><sup>1</sup>Preventive Care Services</b>	100%	N/A

<sup>1</sup>Please visit [www.healthcare.gov/preventive-care-benefits/](http://www.healthcare.gov/preventive-care-benefits/) for more information

2018-2019 PREMIUM COSTS AND COVERAGE PERIODS			
Coverage Periods	Annual 08/01/2018 through 07/31/2019	Fall 08/01/2018 through 12/31/2018	Spring 01/01/2019 through 07/31/2019
<b>Open Enrollment</b>	07/01/2018 through 09/10/2018 at 5:00 PM ET	07/01/2018 through 09/10/2018 at 5:00 PM ET	12/01/2018 through 01/31/2019 at 5:00 PM ET
<b>Student</b>	\$ 1,386.95	\$ 581.67	\$ 805.28
<b>Student &amp; Spouse</b>	\$ 2,773.90	\$ 1,163.34	\$ 1,610.56
<b>Student &amp; Child</b>	\$ 2,773.90	\$ 1,163.34	\$ 1,610.56
<b>Student, Spouse &amp; Child</b>	\$ 4,160.85	\$ 1,745.01	\$ 2,415.84
<b>Student &amp; Children</b>	\$ 4,160.85	\$ 1,745.01	\$ 2,415.84
<b>Student, Spouse &amp; Children</b>	\$ 5,547.80	\$ 2,326.68	\$ 3,221.12

To view all enrollment and coverage periods available, please visit [purdueship.myahpcare.com](http://purdueship.myahpcare.com) or call Academic HealthPlans at 1-855-566-7278