

# San Francisco Conservatory of Music

## Student Coverage With Care



### Eligibility

All full-time undergraduate and graduate students are automatically enrolled in the SFCM Student Health Insurance Plan (SHIP). For comprehensive coverage, SFCM SHIP is highly recommended. If you have health insurance that is comparable to SFCM SHIP, you can request permission to substitute your health insurance for SFCM SHIP by requesting an "insurance waiver".

All new and returning full-time undergraduate and graduate students for the upcoming term at SFCM must choose to enroll in/waive the SFCM Student Health Insurance Plan for the policy year, 2025-2026.

**Failure to waive or enroll in the Student Health Insurance Plan may result in auto enrollment of coverage which will appear on your tuition statement.**

For more information, visit [sfcmyahpcare.com](https://sfcmyahpcare.com).

### Coverage Periods - All Students

	FALL 08/01/2025 - 12/31/2025	SPRING 01/01/2026 - 07/31/2026
Enrollment Periods	06/16/2025 - 08/01/2025	01/05/2026 - 01/30/2026

### Rates - Undergraduate & International Students

	FALL 08/01/2025 - 12/31/2025	SPRING 01/01/2026 - 07/31/2026	TOTAL ANNUAL COST
Student	\$915.00	\$1,268.00	\$2,183.00
Spouse/Domestic Partner	\$915.00	\$1,268.00	\$2,183.00
Each Child <sup>1</sup>	\$915.00	\$1,268.00	\$2,183.00

### Rates - Graduate Students

	FALL 08/01/2025 - 12/31/2025	SPRING 01/01/2026 - 07/31/2026	TOTAL ANNUAL COST
Student	\$1,705.00	\$2,364.00	\$4,069.00
Spouse/Domestic Partner	\$1,705.00	\$2,364.00	\$4,069.00
Each Child <sup>1</sup>	\$1,705.00	\$2,364.00	\$4,069.00

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

### WHAT'S INCLUDED?

UnitedHealthcare Choice Plus PPO Network  
In-Network Urgent Care facilities close to campus

### ADD ON'S:

Optional Dental coverage, provided by Guardian, and optional Vision coverage, provided by VSP, for an added cost



### Questions

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



### ID Cards

To access your ID Card, please visit [sfcmyahpcare.com](https://sfcmyahpcare.com)

# San Francisco Conservatory of Music 2025-2026

## Benefits

(Deductible applies unless otherwise stated below)

	PREFERRED PROVIDER Payments are based on the Allowed Amount	OUT-OF-NETWORK PROVIDER Payments are based on the Allowed Amount
Maximum Benefit Per Insured Person, Per Policy Year		Unlimited
Deductible Per Insured Person, Per Policy Year	\$200	\$600
Individual Out-of-Pocket Maximum Per Insured Person, Per Policy Year	\$7,500	\$15,000
Family Out-of-Pocket Maximum For all Insureds in a Family, Per Policy Year	\$13,700	N/A
Physician's Visits	80%	50%
Medical Emergency Expenses (Deductible waived) Copay waived if admitted to Hospital	80% after a \$150 Copay per visit	80% after a \$150 Copay per visit
Room and Board Expense	80%	50%
Inpatient/Outpatient Surgery	80%	50%
Diagnostic X-ray Services & Laboratory Procedures	80%	50%
Prescription Drugs Up to 31-day supply per prescription (Deductible waived)	At pharmacies contracting with UnitedHealthcare Pharmacy:  100% after a: Tier 1: \$25 Copay Tier 2: \$60 Copay Tier 3: \$75 Copay	100% after a: Generic: \$25 Copay Brand-Name: \$60 Copay
Preventive Care Services For more information, please visit <a href="https://healthcare.gov/preventive-care-benefits/">healthcare.gov/preventive-care-benefits/</a>	100% (Deductible waived)	50%

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