

ELIGIBILITY

All international students who are enrolled in one (1) or more credit hours are required to maintain the Student Health Insurance Plan as a condition of enrollment. International students must enroll in the Student Health Insurance Plan unless they have a special waiver personally granted by the Student Health Center (SHC) staff. To view the requirements necessary to apply for a waiver, please go to smu.edu/healthinsurance.

After enrolling for classes, international students must elect coverage online by going to the student center component of [MY.SMU.EDU](https://my.smu.edu) and selecting the “Health Insurance” button. Students only have to enroll or waive one time per school year. The semi-annual premium will be charged to the student’s SMU student account after they enroll in [MY.SMU.EDU](https://my.smu.edu). Any student not enrolled by the deadline will automatically be enrolled and the premium charged to their SMU student account. No changes will be made to a student’s SMU account after September 7, 2022 for Fall 2022. For more detailed information, including a “Frequently Asked Questions” page, please visit smu.edu/healthinsurance.

Eligible dependents of those enrolled in the plan may participate in the plan on a voluntary basis.

For more information and to view the complete brochure online for full details of participation in the plan, please visit smu.myahpcare.com.

ADDITIONAL BENEFITS

- Access to Telehealth
- Coverage when traveling
- Academic Emergency Services*

*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.



Southern Methodist University 2022-2023

This flyer 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. **The PPO network is Aetna PPO.**

Student Health Center: There is no copayment for routine office visits. The Deductible is waived, covered expenses will be payable at 80% for insured students. Adult immunizations covered at the SHC include TB skin test, MMR#1, MMR#2, Tdap, Td and meningitis.

At SMU SHC: Prescriptions are payable at 100% after a \$15 Copayment for each Generic Drug and \$40 Copayment for each Brand Name Drug.

BENEFIT MAXIMUMS & DEDUCTIBLES

	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
Benefit Maximum		Unlimited
Individual Deductible Per Insured Person, per Policy Year	\$ 400	\$ 1,200
Family Deductible For all Insureds in a Family, per Policy Year	\$ 1,200	\$ 3,600
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$ 7,900	\$ 10,000
Family Out-of-Pocket Maximum For all Insureds in a Family, per Policy Year	\$ 12,700	\$ 37,500

BENEFITS (deductible applies unless otherwise stated below)

IN-NETWORK PROVIDER <i>Payments are based on the Negotiated Charge</i>	OUT-OF-NETWORK PROVIDER <i>Payments are based on the Recognized Charge</i>	IN-NETWORK PROVIDER <i>Payments are based on the Negotiated Charge</i>	OUT-OF-NETWORK PROVIDER <i>Payments are based on the Recognized Charge</i>
Hospital Room and Board Expense		Prescription Drugs (deductible waived)	
80% per admission	60% per admission	At pharmacies contracting with Aetna	
Inpatient/Outpatient Surgery		100% after a	60% after a
80%	60%	Preferred Generic Drug: \$25 Copayment	Preferred Generic Drug: \$25 Copayment
Physician and specialist services		Preferred Brand-Name Drug: \$50 Copayment	Preferred Brand-Name Drug: \$50 Copayment
100% after a \$30 Copayment per visit (deductible waived)	60% per visit	Non-Preferred Brand-Name Drug: \$75 Copayment	Non-Preferred Brand-Name Drug: \$75 Copayment
Diagnostic Testing		Specialty Drug: \$75 Copayment	Specialty Drug: \$75 Copayment
80% per visit	60% per visit		
Hospital Emergency Room (deductible waived)			
80% after a \$250 Copayment per visit	80% after a \$250 Copayment per visit		
Preventive Care Services			
For more information, please visit healthcare.gov/preventive-care-benefits			
100% per visit (deductible waived)	60% per visit		

COVERAGE PERIOD & COST

Fall	08/01/22 - 12/31/22	Spring/Summer	01/01/23 - 07/31/23	Summer	05/01/23 - 07/31/23
Open Enrollment	04/12/22 - 09/07/22	Open Enrollment	11/01/22 - 02/07/23	Open Enrollment	N/A
Waiver Deadline	09/07/22	Waiver Deadline	02/07/23	Waiver Deadline	N/A
Student	\$1,828.00	Student	\$1,828.00	Student	\$922.00
Spouse	\$1,828.00	Spouse	\$1,828.00	Spouse	\$922.00
Each Child ¹	\$1,828.00	Each Child ¹	\$1,828.00	Each Child ¹	\$922.00

These rates include an administrative fee.

¹Coverage for two or more children is calculated at the child rate times two (2).

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

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