# Saint Martin's University 2022-2023 Student Health Insurance Plan



### Eligibility

All Domestic students enrolled half time or more attending Saint Martin's University on the Lacey Campus are automatically enrolled in this insurance plan, unless proof of comparable coverage is furnished by the waiver deadline.

Eligible students who enroll may also enroll their dependents.

#### Waiver

If you have insurance that is comparable to the Student Health Insurance Plan (i.e. through an employer, spouse, parent/guardian, scholarship, etc.), and DO NOT want to take part in your school's plan, you must complete the online waiver application process at <a href="mailto:stmartin.myahpcare.com">stmartin.myahpcare.com</a> by the waiver deadline or you will be responsible for the premium charge. Waivers are good for the academic year provided that the coverage listed has not changed.

Please view the complete brochure on-line at stmartin.myahpcare.com for full details of participation in the plan.

#### **Additional Benefits**

- · Access to telemedicine services
- · Coverage when traveling
- Academic Emergency Services\*

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

<sup>\*</sup>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.

## Saint Martin's University 2022-2023

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. **The PPO network is Aetna PPO.** 

BENEFIT MAXIMUMS & DEDUCTIBLES				
	In-Network Provider	Out-of-Netwotk Provider		
Benefit Maximum	Unlimited, per Insured Person, per Policy Year			
Deductible per Insured Person, per Policy Year	\$ 250	\$ 500		
Individual Out-of-Pocket Maximum per Insured Person, per Policy Year	\$ 4,500	\$ 9,000		
Family Out-of-Pocket Maximum for all Insureds in a Family, per Policy Year	\$ 9,000	\$ 18,000		

BENEFIT CATEGORY	In-Network Provider	Out-of-Network Provider	
Deductible waived unless otherwise stated below	Payments are based on the Negotiated Charge	Payments are based on Recognized Charge	
Hospital Room and Board Expense	80% per admission	60% per admission	
Inpatient/Outpatient Surgery	80% per visit	60% per visit	
Physician, specialist including Consultants office visits	80% per visit	60% per visit	
Outpatient Diagnostic Testing	80%	60%	
Outpatient physical, occupational, speech, and cognitive therapies (including Cardiac and Pulmonary Therapy)	80% per visit	60% per visit	
Hospital Emergency Room (deductible waived)	100% after a \$100 Copayment per visit	100% after a \$100 Copayment per visit	
Prescription Drugs, includes specialty drugs Up to a 31 day supply (deductible waived)	At pharmacies contracting with Aetna 100% after a Generic: \$15 Copayment Preferred Brand-Name: \$35 Copayment Non-Preferred Brand-Name: \$70 Copayment	100% after a Generic: \$15 Copayment Preferred Brand-Name: \$35 Copayment Non-Preferred Brand-Name: \$70 Copayment	
Preventive Care Services For more information, please visit healthcare.gov/coverage/preventive-care-benefits.	100% per visit Deductible Waived	60% per visit	

2022-2023 PREMIUM COSTS** AND COVERAGE PERIODS				
Coverage Periods	Fall 08/31/20212 through 01/08/2023 Waiver Period: 07/18/2022 - 09/19/2022	Spring/Summer 01/09/2023 through 08/30/2023 Waiver Period: 12/05/2022 - 01/30/2023	Summer 05/15/2023 through 08/30/2023	
Student	\$ 1,267	\$ 2,257	\$ 1,047	
Spouse	\$ 1,257	\$ 2,247	\$ 1,037	
Each Child <sup>1</sup>	\$ 1,257	\$ 2,247	\$ 1,037	

<sup>&</sup>lt;sup>1</sup>Coverage for two or more children is calculated at the child rate times two (2).

To view all enrollment and coverage periods available, please visit stmartin.myahp care.com.

This document contains a summary of your school's student health insurance policy benefits and restrictions as of the date of its publication; the summary document may differ from the benefits in the approved policy of insurance. The final policy may be pending approval by applicable federal and state regulatory authorities. The final approved policy of insurance is accessible upon approval at stmartin.myahpcare.com.

<sup>\*\*</sup> Above rates subject to change pending final approval by the State of Washington.