

# University of St. Thomas International Student Health Insurance Plan 2023-2024



## What's Included?

- Access to a 24-hour nurse line
- Telehealth with \$0 copay
- Coverage when traveling
- Academic Emergency Services\*



## More Information

For full details of participation in the plan, please view the complete brochure online at: [stthomintl.myahpcare.com](http://stthomintl.myahpcare.com)

## Questions

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

## Insurance ID Card

To access your ID card, please visit [stthomintl.myahpcare.com/additionalresources](http://stthomintl.myahpcare.com/additionalresources)



## Eligibility

All registered international students are required to purchase this insurance plan on a hard waiver basis.

The student must actively attend classes for at least the first 31 days after the date for which coverage is purchased. Home study, correspondence, and online courses do not fulfill the eligibility requirements that the student actively attend classes. We maintain the right to investigate eligibility or student status and attendance records to verify that the Policy eligibility requirements have been met. If and whenever we discover the policy eligibility requirements have not been met, its only obligation is refund of premium.

## CVS Minute Clinic

The deductible at any CVS Minute Clinic will be waived for University of St. Thomas students who are enrolled in the Student Health Insurance Plan.

\*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LCC, separate and independent companies from Academic HealthPlans, Inc. (AHP).

## 2023-2024

### University of St. Thomas - International

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 Cigna.**

#### Student Health Center Benefits:

When Treatment is rendered at the Student Health Center, the Deductible and Copayments will be waived and benefits will be paid at 100% for Covered Medical Expenses incurred.

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

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

## Benefits

(Deductible applies unless otherwise stated below)

	IN-NETWORK PROVIDER Payments are based on the Negotiated Charge	OUT-OF-NETWORK PROVIDER Payments are based on Usual and Charge
Benefit Maximum Per Insured Person, per Policy Year	Unlimited	
Individual Deductible Per Insured Person, per Policy Year	\$500	\$1,000
Family Deductible For all Insureds in a Family, per Policy Year	\$1,500	\$3,000
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$6,350	\$12,700
Family Out-of-Pocket Maximum For all Insureds in a Family, per Policy Year	\$12,700	\$25,400
Hospital Care, includes room and board expenses and intensive care Pre-Authorization Required	80%	60%
Inpatient/Outpatient Surgery Inpatient and Outpatient: Pre-Authorization Required	80%	60%
Physician's Office Visits, including specialists and consultants	100% after a \$20 Copayment per visit	60%
Rehabilitation Therapy, including Physical Therapy, and Occupational Therapy and Speech Therapy Pre-Authorization Required	80%	60%
Diagnostic Imaging Services Pre-Authorization Required	80%	60%
Laboratory Procedures (Outpatient)	80%	60%
Emergency Care Services \$150 Copayment per visit	80% after a \$100 Copayment per visit	80%
Prescription Drugs, Up to 31 day supply	At pharmacies contracting with Wellfleet Rx/ESI: 100% after a Tier 1: \$10 Copayment Tier 2: \$25 Copayment Tier 3 & Specialty Drugs: \$50 Copayment (Deductible waived)	60%
Preventive Care Services For more information, please visit <a href="http://healthcare.gov/coverage/preventive-care-benefits">healthcare.gov/coverage/preventive-care-benefits</a>	100% (Deductible waived)	60%

## Rates & Coverage Periods

	Fall 08/11/23 - 12/31/23	Spring/Summer 01/01/24 - 08/10/24	Summer 05/19/24 - 08/10/24
Waiver Periods	06/15/23 - 08/31/23	11/02/23 - 01/24/24	04/29/24 - 06/05/24
Student	\$ 933	\$ 933	\$ 428

To view all enrollment and coverage periods available, please visit [stthomintl.myahpcare.com](http://stthomintl.myahpcare.com).