University of St. Thomas

International Student Coverage With Care





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.

For more information, visit **stthomintl.myahpcare.com**.

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.

Coverage Periods & Rates

	FALL 08/11/2025 - 12/31/2025	SPRING/SUMMER 01/01/2026 - 08/10/2026	SUMMER 05/11/2026 - 08/10/2026
Waiver Periods	06/17/2025 - 09/02/2025	11/04/2025 - 01/23/2026	04/29/2026 - 05/29/2026
Student	\$988.50	\$988.50	\$499.00

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

WHAT'S INCLUDED? Cigna PPO network

Access to a 24-hour nurse line Deductible waived at CVS Minute Clinic Telehealth with \$0 Copay Access to Academic Vision Care (AVC)

Coverage while traveling with Academic Emergency Services (AES)*



Questions

To view Frequently Asked Questions or submit a request, please visit help.ahpcare.com





To access your ID Card, please visit stthomintl.myahpcare.com



University of St. Thomas International 2025-2026

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 the Usual & Customary Rate	
Benefit Maximum Per Insured Person, Per Policy Year	Unlimited		
Individual Deductible Per Insured Person, Per Policy Year	\$500	\$1,000	
Individual Out-of-Pocket Maximum Per Insured Person, Per Policy Year	\$6,350	\$12,700	
Hospital Care, includes room and board expenses and intensive care Pre-Authorization Required	80%	60%	
Inpatient/Outpatient Surgery Pre-Authorization Required	80%	60%	
Physician's Office Visits, including specialists and consultants	100% after a \$20 Copayment per visit (Deductible waived)	60%	
Rehabilitation Therapy, including Physical Therapy, Occupational Therapy & Speech Therapy	80%	60%	
Diagnostic Imaging Services Pre-Authorization Required	80%	60%	
Laboratory Procedures (Outpatient)	80%	60%	
Emergency Services	80% after a \$150 Copayment per visit	80% after a \$150 Copayment per visit	
Prescription Drugs, Up to 30 day supply (Deductible waived)	At pharmacies contracting with Wellfleet RX/ESI: 100% after a Tier 1: \$10 Copayment Tier 2: \$25 Copayment Tier 3 & Specialty Drugs: \$50 Copayment	60%	
Preventive Services For more information, please visit healthcare.gov/coverage/preventive-care-benefits	100% (Deductible waived)	60%	

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 **stthomintl.myahpcare.com** upon approval by federal and state authorities.

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

*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, Inc. (AHP), a Risk Strategies Company.