



University of Arkansas for Medical Sciences

Student Coverage With Care 2026-2027

What's Included?



Academic Student Assistance Program (ASAP)



Access to Academic Vision Care (AVC)



Academic Emergency Services (AES)*



Telehealth solutions through AcademicLiveCare (ALC)



Coverage when traveling



UnitedHealthcare Choice Plus Network



Optional Dental Coverage



Eligibility

All students enrolled at UAMS are required to enroll in the UAMS Student Injury and Sickness Insurance Plan or provide proof of medical insurance coverage by completing the online insurance verification at studentlife.uams.edu by the waiver deadline date.

Students participating in the UAMS Student Health Injury and Sickness Insurance Plan may enroll their eligible dependents in the plan.

Full-time and Part-time students and students wishing to enroll dependents should enroll online at uams.myahpcare.com.

You can enroll in the plan during the Open Enrollment Period for the various coverage periods. Your effective date of coverage begins the date the premium is received by the company or its authorized representative, or the effective date of the coverage period, whichever is later.

For more information, visit uams.myahpcare.com.



Questions

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



Insurance ID Card

To access your ID card, please visit uams.myahpcare.com/additionalresources

*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), Part of the Brown & Brown Team.

Academic HealthPlans, Inc. (AHP), Part of the Brown & Brown Team, is an independent company that provides program management and administrative services for the student health plans of UnitedHealthcare Insurance Company.



Benefits

(Deductible applies unless otherwise stated below. *The Deductible will be waived for Covered Medical Expenses incurred when referred by the UAMS Student Health Clinic.)

	PREFERRED PROVIDER Payments are based on the Allowed Amount	OUT-OF-NETWORK PROVIDER Payments are based on the Allowed Amount
Benefit Maximum Per Insured Person, per Policy Year	Unlimited	
Deductible Per Insured Person, per Policy Year	\$1,000	\$2,000
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$8,150	\$16,300
Family Out-of-Pocket Maximum For all Insureds in a Family, per Policy Year	\$16,300	\$32,600
Room & Board Expense	70%	50%
Inpatient/Outpatient Surgery	70%	50%
Outpatient Physician's Visits (Deductible waived)	100% after a \$30 Copay	75% after a \$30 Copay
Dianostic X-ray Services & Laboratory Procedures*	100% after a \$50 Copay	75% after a \$50 Copay
Medical Emergency Expenses Copay waived if admitted	70% after a \$200 Copay	70% after a \$200 Copay
Prescription Drugs Up to a 31-day supply per prescription	At pharmacies contracting with UnitedHealthcare Pharmacy 100% after a Tier 1: \$15 Copay Tier 2: 20% Coinsurance Tier 3: 30% Coinsurance (\$100 prescription Deductible per Policy Year. The prescription Deductible does not apply to the Policy Deductible.)	50% Please note: You are required to pay the full amount charged at the time of service for all prescriptions dispensed at an out-of-network provider and must file a claim for reimbursement.
Preventive Care Services For more information, please visit healthcare.gov/preventive-care-benefits/	100% (Deductible waived)	75%

Premium Costs & Coverage Periods

EARLY NURSING, JR. & SR. MEDICAL & SR. PHARMACY	FIRST SEMI-ANNUAL ¹ 07/01/2026 - 12/31/2026	SECOND SEMI-ANNUAL ¹ 01/01/2027 - 06/30/2027	FALL 1 (SUMMER) (PA STUDENTS ONLY) 05/10/2027 - 08/09/2027
Open Enrollment	06/19/2026 - 07/31/2026	12/04/2026 - 01/31/2027	04/15/2027 - 06/26/2027
Student	\$1,896	\$1,896	\$954
Spouse	\$1,896	\$1,896	\$954
Each Child ²	\$1,896	\$1,896	\$954

Premium Costs & Coverage Periods

ALL OTHER UAMS STUDENTS	FALL ¹ 08/10/2026 - 12/31/2026	SPRING 01/01/2027 - 05/09/2027	SPRING/SUMMER ¹ 01/01/2027 - 08/09/2027	SUMMER 05/10/2027 - 08/09/2027
Open Enrollment	07/08/2026 - 10/10/2026	12/04/2026 - 02/12/2027	12/04/2026 - 02/12/2027	04/15/2027 - 06/26/2027
Student	\$1,497	\$1,340	\$2,295	\$954
Spouse	\$1,497	\$1,340	\$2,295	\$954
Each Child ¹	\$1,497	\$1,340	\$2,295	\$954

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

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 uams.myahpcare.com upon approval by federal and state authorities.