

# University of Northern Colorado 2017-2018 Student Health Insurance Plan

## Eligibility

All degree seeking **undergraduate students taking nine (9) or more credit hours** regardless of the type of class (on campus, off campus or online) and all degree seeking **graduate students taking six (6) or more credit hours** regardless of the type of class (on campus, off campus or online) are required to have health insurance and are automatically enrolled. These students have the option to waive the insurance if they complete an on-line waiver in URSA by the 10th day of classes.

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

Undergraduate students who are enrolled for less than nine (9) hours of classes and graduate students taking less than six (6) credit hours are not eligible to participate in the UNC SHIP. They may, however, contact Academic HealthPlans at **1-855-825-3985**, who will assist them in finding individual coverage.

Please view the complete brochure on-line at [unco.myahpcare.com](http://unco.myahpcare.com) for full details of participation in the plan.

## How do I Waive?

Students have the option to waive the insurance if they complete an online waiver in URSA by the 10th day of classes.

Students who have previously waived the student insurance who want to be on the insurance plan must contact the Insurance office at **(970) 351-1915** for details on how to re-enroll.



## Additional Benefits

- Access to a 24-hour nurse line at 1-877-924-7758
- Coverage when traveling
- Academic emergency services

## Additional Information

- [unco.myahpcare.com](http://unco.myahpcare.com)
- [www.unco.edu/student-health-insurance-program](http://www.unco.edu/student-health-insurance-program)
- (970) 351-1915



*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.*

The 2017-2018 Student Health Insurance Plan is underwritten by National Guardian Life Insurance Company, NBH-280(2014)CO. National Guardian Life Insurance Company is not affiliated with The Guardian Life Insurance Company of America, AKA The Guardian or Guardian Life.

# University of Northern Colorado 2017-2018 Student Health Insurance Plan

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 PPO. The local hospital provider is North Colorado Medical Center.

**UNIVERSITY HEALTH SERVICES (UHS) REFERRAL REQUIREMENT:** The Insured Student must use the resources of the UHS first where treatment will be administered or referral issued. *Exceptions to this are if the Insured Student is further than 20 miles from campus or the clinic is closed.* Expenses incurred for medical treatment rendered outside of the UHS for which no prior approval or referral is obtained are excluded from coverage.

**At the Student Health Center on campus only:** Students insured with the UNC Student Health Insurance Program pay a \$20 copayment (not subject to deductible) for a regular visit and additional benefits at the University Health Services are covered at 100%. If services or tests need to be sent outside of the Health Services clinic, coverage will be at 80% of the maximum allowable after the \$500 per policy year deductible has been satisfied. Wellness exams performed at the University Health Services are subject to one exam per policy year.

If you reside more than 20 miles away from University Health Services or have been referred to another Cigna provider from University Health Services, covered expenses incurred at a Cigna Network Provider will be paid at 80% of the maximum allowable after the \$500 deductible has been met.

## BENEFIT MAXIMUMS & DEDUCTIBLES

<b>Benefit Maximum</b>	Unlimited, per Insured Person, per Policy Year
<b>Deductible</b> (Not applicable to Preventive Services)	Network Provider: \$500 per Insured Person, per Policy Year Non-Network Provider: \$1,000 per Insured Person, per Policy Year
<b>Individual Out-of-Pocket Maximum</b> (per Insured Person, per Policy Year)	\$6,350
<b>Family Out-of-Pocket Maximum</b> (per Family, per Policy Year)	\$12,700

\*Preventive Services: The Deductible is not applicable to Preventive Services. Benefits for services provided by a Network Provider are paid at 100% of the PPO Allowance for Covered Medical Expenses. Benefits for services provided by a Non-Network Provider are provided at the Coinsurance Amount shown below.

BENEFIT CATEGORY	Network Provider	Non-Network Provider
	<i>Payments are based on the PPO Allowance for Covered Medical Expenses</i>	<i>Payments are based on Usual and Reasonable Charges for Covered Medical Expenses</i>
Hospital Room and Board Expense	80%	50%
Inpatient/Outpatient Surgery	80%	50%
In-Office Physician Fees	80%	50%
Physical, Occupational & Speech Therapy	80%	50%
Diagnostic X-ray Services & Laboratory Procedures	80%	50%
Emergency Services Expense \$150 Copayment per visit	80%	80%
Prescription Drugs \$100 Deductible per Policy Year	<b>At pharmacies contracting with HealthSmart Rx®</b> 100% after a \$20 Copayment per Generic Drug \$50 Copayment per Preferred Brand Drug \$70 Copayment for Brand Drug	50% after a \$20 Copayment per Generic Drug \$50 Copayment per Preferred Brand Drug \$70 Copayment for Brand Drug

\*Please visit [healthcare.gov/preventive-care-benefits/](http://healthcare.gov/preventive-care-benefits/) for more information

## 2017-2018 PREMIUM COSTS AND COVERAGE PERIODS

Regular Students	Fall	Spring/Summer	Summer
	08/17/2017 through 12/31/2017	01/01/2018 through 08/16/2018	05/16/2018 through 08/16/2018
<b>Open Enrollment</b>	05/10/2017 through 10/06/2017	12/15/2017 through 02/15/2017	04/13/2018 through 05/11/2018
<b>Student</b>	\$ 1,290	\$ 1,290	\$ 657
<b>Spouse</b>	\$ 1,290	\$ 1,290	\$ 657
<b>Child(ren)</b>	\$ 2,580	\$ 2,580	\$ 1,314

To view all enrollment and coverage periods available, please visit [unco.myahpcare.com](http://unco.myahpcare.com) or call Academic HealthPlans at 1-855-825-3985. Intercollegiate Sports and ESL students may go online to view their rates and effective dates.