



University of Nevada, Las Vegas
International, Graduate, Law, Radiology and
Ultrasound Students

Student Coverage With Care 2026-2027

What's Included?



Aetna is the
Preferred
Provider
Network



Telehealth
solutions
through
Aetna Teladoc



Coverage
when
traveling



Access to
24-Hour
Nurse Line



Access to
Optional
Dental
Coverage



Academic
Emergency
Services
(AES)*



Eligibility

All registered **International students**, with F-1 visa status on a UNLV I-20, taking 1 or more credits are required to have health insurance coverage, either through this Student Health Insurance Plan or through another individual or family plan. Students are automatically enrolled unless proof of comparable coverage is provided by completing the waiver. Waivers must be submitted for each Fall and Spring/Summer. International student accounts will be charged the Student Health Insurance Fee for the Fall and Spring/Summer term.

All registered, degree-seeking **Graduate, Radiology and Ultrasound students** taking 9 or more credits and all **Graduate Assistantship (GA) students** enrolled in 6 or more credit hours and **Law students** taking 12 or more credits are required to have health insurance coverage, either through this plan or through another individual or family plan. Students are automatically enrolled unless proof of comparable coverage is provided by completing the waiver. Students need to submit a waiver once per academic year. Graduate, Radiology and Ultrasound student accounts will be charged the Student Health Insurance Fee for the Fall and Spring/Summer term.

All registered, degree-seeking **Graduate, Radiology and Ultrasound students** taking 1-8 credit hours and all registered, degree-seeking **Law students** taking 1-11 credit hours are eligible to enroll voluntarily.

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 unlv.myahpcare.com/additionalresources

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 Aetna.

Benefits

(Deductible applies unless otherwise stated below)

Student Health Center: The **Deductible is waived if Covered Medical Expenses are incurred at the Student Health Center. The Student Health Center Pharmacy has a \$20 Copayment per prescription. An SHC referral is not required, and it does not guarantee services received will be considered eligible expenses under the plan, nor is it a guarantee of payment. Insured dependents are not eligible to use the UNLV SHC. The benefits listed in the Schedule of Benefits are available to the insured dependents.

	IN-NETWORK PROVIDER Payments are based on the Negotiated Charge	OUT-OF-NETWORK PROVIDER Payments are based on the Recognized Charge
Benefit Maximum Per Insured Person, per Policy Year	Unlimited	
**Deductible Per Insured Person, per Policy Year	\$350	\$700
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$10,600	\$21,200
Family Out-of-Pocket Maximum For all Insureds in a Family, per Policy Year	\$17,100	\$34,200
Hospital Room and Board Expense	80%	50%
Inpatient/Outpatient Surgery	80%	50%
Physician and Specialist, including Consultants Office Visits	80% after a \$25 Copayment per visit	50% after a \$25 Copayment per visit
Diagnostic Testing	80%	50%
Outpatient Physical, Occupational, Speech, and Cognitive Therapies including Cardiac and Pulmonary Therapy	80%	50%
Hospital Emergency Room Copayment waived if admitted	80% after a \$200 Copayment per visit	80% after a \$200 Copayment per visit
Preventive Care Services For more information, please visit healthcare.gov/coverage/preventive-care-benefits	100% (Deductible waived)	50%
Prescription Drugs (Deductible waived)	At pharmacies contracting with Aetna 70%	50%

Coverage Periods & Rates

	FALL 08/16/2026 - 01/11/2027	SPRING/SUMMER 01/12/2027 - 08/15/2027	SUMMER (Physical Therapy Students Only) 06/01/2027 - 08/15/2027
Waiver Deadlines	05/09/2026 - 09/15/2026	11/13/2026 - 02/09/2027	N/A
Student	\$1,776	\$2,574	\$906
Spouse	\$1,776	\$2,574	\$906
Each Child ¹	\$1,776	\$2,574	\$906

¹Coverage 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 unlv.myahpcare.com upon approval by federal and state authorities.