

University of Louisville 2021-2022 Student Health Insurance Plan - Voluntary Students

Campus Health Services

Cardinal Station Center

215 Central Avenue - Suite 110
502-852-6479

Health Science Center

401 E Chestnut Street - Suite 110
502-852-6446

Who Can Enroll?

- Undergraduate students enrolled in (6) six or more credit hours with on campus classes.
- Graduate students enrolled in (3) three or more credit hours with on campus classes.
- Dependent coverage is available if student is insured.

OPEN ENROLLMENT PERIODS	
Fall	07/16/21 - 08/31/21
Spring/Summer	11/12/21 - 02/01/22
Summer	04/15/22 - 06/03/22

How To Enroll?

Enroll online at louisville.myahpcare.com.

The premium will be added to the students tuition account.

Dependent Coverage is paid directly to AHP.

University of Louisville, in partnership with Academic HealthPlans (AHP) and Anthem BlueCross and BlueShield, offers an affordable, comprehensive Student Health Insurance Plan for students. Staying healthy is important to your success at the University of Louisville.

BENEFIT MAXIMUMS & DEDUCTIBLES

Deductible	Preferred Provider (ULP)	In-Network Provider	Out-of-Network Provider
*Applies toward In-Network Deductible	*\$200 per person	\$700 per person	\$1,000 per person
Out-Of-Pocket Maximum	\$5,000 per person / \$10,000 family		

BENEFIT CATEGORY	Campus Health	Preferred Providers (ULP)	In-Network Provider	Out-of-Network Provider
Preventive Care Services (Deductible Waived if In-Network) For more information please visit healthcare.gov/preventive-care-benefits/	No Charge	No Charge	No Charge	25% coinsurance after deductible is met
Primary Care Office Visit to treat injury or illness	No Charge	\$30 copay per visit 10% coinsurance	\$30 copay per visit 30% coinsurance	\$30 copay per visit 35% coinsurance
Hospital Stay	N/A	10% coinsurance after deductible is met	30% coinsurance after deductible is met	35% coinsurance after deductible is met
Outpatient Surgery	N/A	10% coinsurance after deductible is met	30% coinsurance after deductible is met	35% coinsurance after deductible is met
Urgent Care (Office Setting)	N/A	\$50 copay per visit 10% coinsurance	\$50 copay per visit 30% coinsurance	\$50 copay per visit 35% coinsurance
Emergency Room Facility Services <i>Copay waived if admitted.</i>	N/A	\$150 copay per visit 10% coinsurance	\$150 copay per visit 30% coinsurance	\$150 copay per visit 35% coinsurance
Diagnostic Services: X-ray	N/A	\$25 copay per visit 10% coinsurance	\$25 copay per visit 30% coinsurance	\$25 copay per visit 35% coinsurance
Diagnostic Services: Lab	In-House No Charge	No Charge	No Charge	\$20 copay per visit 35% coinsurance
Prescription Drug Coverage	N/A	Tier 1: \$15 copay per prescription Tier 2: \$30 copay per prescription Tier 3: \$50 copay per prescription up to a 30-day supply (retail pharmacy) up to a 90-day supply (home delivery program)	Tier 1: \$15 copay per prescription Tier 2: \$30 copay per prescription Tier 3: \$50 copay per prescription up to a 30-day supply (retail pharmacy) up to a 90-day supply (home delivery program)	25% coinsurance (The Insured would need to pay for the prescription in full and submit the receipt to the company for reimbursement.)



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 louisville.myahpcare.com.