Western Illinois University

The new insurance carrier for 2022-2023 is Wellfleet.

Students taking a minimum of nine (9) class hours, at least five (5) on Macomb campus are automatically enrolled in the Student Health Insurance Program, unless proof of comparable coverage is furnished. All Graduate Assistants under contract with the University and enrolled in on-campus classes, WESL students, and Spoon River College students residing in University housing are also assessed the fee for this coverage. Students from the WIU Quad Cities campus are eligible to opt into the program. At least 50% of domestic students credit hours must be on campus.

To waive the student health insurance plan, you must complete the online waiver by the absolute deadlines. If you do not waive coverage by the deadline, the premium will be charged to your student account. No changes will be made to a student's account after the waiver deadline

An eligible student must attend classes at the Policyholder's school for at least the first 31 days of the period for which he or she is enrolled and/or pursuant to his or her visa requirements for the period for which coverage is elected.

Eligible students who do enroll may also insure their Dependents. Eligible Dependents are the student's legal spouse and dependent children under 26 years of age.

Dependent eligibility expires concurrently with that of the Insured student.

Please view the complete brochure on-line at wiu.myahpcare.com for full details of participation in the plan.





Administered by Academic HealthPlans

Access to Telehealth and Behavioral Health

Coverage when traveling

Academic Emergency Services*

Access to a broad Participating Provider Option (PPO) Network from Cigna PPO

^{*}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.

AHP (22) WF-WIU

Western Illinois University 2022-2023

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 Preferred Provider Network is the Cigna PPO Network.

Student Health Center: The Deductible will be waived and benefits will be paid at 100% for Covered Medical Expenses incurred when treatment is rendered at the Beu Health Center. The Copayment will be waived for Covered Medical Expenses incurred at the Beu Health Center for the following services: Physician's Visits and Prescription Drugs.

MAXIMUMS & DEDUCTIBLES	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER
Benefit Maximum Per Insured Person, per Policy Year	Unlimited	
Individual Deductible Per Insured Person, per Policy Year	\$ 500	\$ 1,000
Family Deductible Per Family, per Policy Year	\$1,500	\$3,000
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year	\$ 7,200	\$ 20,000
Family Out-of-Pocket Maximum Per Family, per Policy Year	\$ 13,200	\$ 38,400

COVERAGE & COST

Fall Open Enrollment Wavier Deadline Student Spouse Each Child ¹	08/01/22 - 01/31/23 06/01/2022 - 09/03/2022 09/02/2022 \$ 982.50 \$ 982.50
Spring Open Enrollment Wavier Deadline	02/01/23 - 07/31/23 12/01/22 - 02/01/2023 01/30/2023
Student	\$ 982.50
Spouse	\$ 982.50
Each Child ¹	\$ 982.50

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

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

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 wiu.myahpcare.com.

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

RFNFFI	15	(deductible applies unless otherwise stated below)
--------	----	--

IN-NETWORK OUT-OF-NETWORK PROVIDER* **PROVIDER** Uses Cigna Network

Payments are based on the Negotiated Charge for Covered Medical Expenses Payments are based on the Usual & Customary Charge for Covered Medical Expenses

Hospital Care, includes hospital room and board expense

Pre-Authorization Required

80% 50%

Inpatient/Outpatient Surgery

Pre-Authorization Required

80% 50%

Physician Office Visits, including Specialists and Consultants

100% after a 50% \$25 Copayment

Diagnostic Imaging Services

Pre-Authorization Required

80% 50%

Laboratory Procedures

80% 50%

Emergency Care Services

80% after a 80% after a \$300 Copayment \$300 Copayment

Preventive Care Services

For more information, please visit healthcare.gov/preventive-care-benefits

100% 80% (deductible waived)

Prescription Drugs (deductible waived)

At pharmacies contracting with Wellfleet Rx/ESI

Tier 2:

100% after: 50% after: Tier 1: Tier 1:

\$30 Copayment \$30 Copayment

Tier 2:

\$60 Copayment \$60 Copayment

Tier 3: Tier 3:

\$80 Copayment \$80 Copayment

Specialty Drugs: Specialty Drugs: \$80 Copayment \$80 Copayment

^{*}McDonough District Hospital will be treated as an In-Network facility.