

Western Kentucky University 2019-2020 Student Health Insurance Plan



Eligibility

- All domestic undergraduate students taking 12 or more credit hours or 3 in the summer.
- All domestic graduate students taking 9 or more credit hours are eligible to enroll in this insurance plan.
- All undergraduate and graduate students who have applied for graduation, have been approved by the registrar's office and are taking a minimum of 3 hours of coursework during their final semester are considered full-time students by WKU and are eligible to enroll in the SHIP.

Enrollment

- Option 1: Student may enroll online by using a check or credit card at wku.myahpcare.com.
- Option 2: To enroll by mail, please download the enrollment form at wku.myahpcare.com.
- Option 3: To enroll by fax, please go to wku.myahpcare.com to download the enrollment form; fax completed form to Academic HealthPlans at 1-855-858-1964.

PLAN HIGHLIGHTS

It contains only a partial, general description of plan benefits and programs and does not constitute a contract. Covered expenses are subject to plan maximums, limitations and exclusions as described in the policy. The Preferred Provider (PPO) network is UnitedHealthcare C+ PPO.

BENEFIT MAXIMUMS & DEDUCTIBLES	NETWORK PROVIDER	NON-NETWORK PROVIDER
Policy Aggregate Maximum	Unlimited per Insured Person, Per Policy Year (for Essential Benefits Only)	
Individual Deductible	\$500	\$1,000
Individual Out-of-Pocket Maximum	\$6,850	\$12,000

BENEFIT CATEGORY	Graves Gilbert Clinic @ WKU	Network Provider	Non-Network Provider
		<i>Payments are based on the Preferred Provider Allowance</i>	<i>Payments are based on the Usual & Customary Charges</i>
Physician's Visits - Outpatient	100%	80% after a \$50 Copayment per visit	60% after a \$50 Copayment per visit
Diagnostic X-ray Services	100%	80% after a \$50 Copayment	60% after a \$50 Copayment per visit
Laboratory Services	100%	100% after a \$50 Copayment	75% after a \$50 Copayment
Medical Emergency Services	N/A	80% after a \$250 Copayment per visit	60% after a \$250 Copayment per visit
Prescription Drugs, up to 31 day supply per prescription Mail order Prescription Drugs through UHCP at 2.5 times the retail Copayment up to a 90 day supply	N/A	\$20 Copayment per prescription Tier 1 \$35 Copayment per prescription Tier 2 \$60 Copayment per prescription Tier 3	\$20 Copayment per prescription for generic drugs \$35 Copayment per prescription for brand name
Hospital Room and Board Expense Including Intensive Care Units	N/A	80% after Plan Deductible	60% after Plan Deductible
Surgery	N/A	80% after Plan Deductible	60% after Plan Deductible
*Preventive Care Services No Deductible, Copayments or Coinsurance will be applied when the services are received from a Network Provider	100%	100%	75% after Plan Deductible

*Please visit www.healthcare.gov/coverage/preventive-care-benefits/ for more information.

2019-2020 PREMIUM COSTS AND COVERAGE PERIODS

Coverage Periods	Annual 08/01/2019 through 07/31/2020	Fall 08/01/2019 through 12/31/2019	Spring/Summer 01/01/2020 through 07/31/2020	Summer 05/04/2020 through 07/31/2020
Open Enrollment	07/01/2019 through 09/16/2019	07/01/2019 through 09/16/2019	12/02/2019 through 02/14/2020	04/17/2020 through 06/17/2020
Student	\$ 2,222.00	\$ 1,111.00	\$ 1,111.00	\$ 542.00



Please view the complete brochure on-line at wku.myahpcare.com for full details of participation in the plan or contact Academic HealthPlans at 1-855-871-9860 or email benefits@wku.edu.

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 wku.myahpcare.com.

