

Worcester Polytechnic Institute 2019-2020 Student Health Insurance Plan

Eligibility

The Commonwealth of Massachusetts mandates that every full-time and part-time student enrolled in an institution of higher learning in Massachusetts must participate in a student health program or in a health benefit plan with comparable coverage. A part-time student is defined as a student participating in at least 75% of the full-time curriculum.

How do I Waive?

All qualified students will be charged for the health insurance on their eBill. Students may waive their right to participate in the WPI health insurance plan if proof of comparable coverage is provided by completing a waiver online at wpi.myahpcare.com/waiver. The health insurance waiver will automatically be credited to the student's account upon the submission and receipt of the waiver information, provided the information is submitted by published deadlines. Completing a waiver is an annual requirement. You will not receive an updated eBill and should deduct the insurance charge from your eBill after the waiver has been completed and submitted.

How do I Enroll?

Eligible students electing to enroll/purchase the WPI student health insurance plan should complete the steps for online enrollment. Students who fail to waive/purchase the insurance by the due date on the e-Bill, will be automatically enrolled and will be responsible for the associated fee. Eligible students are charged in the fall for the full year unless newly admitted in the spring semester. For enrollment for eligible dependents please visit wpi.myahpcare.com/enrollment. **Graduate students enrolled in less than 7 credit hours are not charged for the insurance and will need to self-identify and enroll in the plan.**

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



Additional Benefits

- Access to a 24-hour nurse line
- Coverage when traveling
- Academic Emergency Services



wpi.myahpcare.com



support@ahpcare.com



1-855-844-3021



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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 Expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. Your Plan provides you with a higher level of coverage when you receive covered medical expenses from providers who are a part of the **Preferred Provider Organization**.

BENEFIT MAXIMUMS & DEDUCTIBLES	
Benefit Maximum	Unlimited, per Insured Person, per Policy Year
Deductible	N/A
Out-of-Pocket Maximum	\$ 5,000 per Insured Person, per Policy Year \$10,000 all Insureds in a Family, per Policy Year

BENEFIT CATEGORY	Your In-Network Cost	Your Out-of-Network Cost
	<i>Payments are based on the PPO Allowance</i>	<i>Payments are based on Usual and Customary Charges</i>
Preventive Care	No Charge	20%
Emergency Room Visits	\$100 per visit (waived if admitted or for an observation stay)	\$100 per visit (waived if admitted or for an observation stay)
Clinic visits, physicians' and podiatrists' office visits	\$10 per visit	20%
Diagnostic X-rays and lab tests, including CT scans, MRIs, PET scans, and nuclear cardiac imaging tests	20%	40%
Surgery and related anesthesia <ul style="list-style-type: none"> • Office and health center services • Hospital and other day surgical facility services 	\$10 per visit** 20%	20% 40%
General or chronic disease hospital care (as many days as medically necessary)	20%	40%
Prescription Drug Benefits (up to a 30-day formulary supply for each prescription or refill)	\$20 for Tier 1 \$55 for Tier 2 \$75 for Tier 3	Not Covered

**Copayment waived for restorative dental services and orthodontic treatment or prosthetic management therapy for members under age 18 to treat conditions of cleft lip and cleft palate.

2019-2020 PREMIUM COSTS AND COVERAGE PERIODS		
Coverage Periods	Annual 08/12/2019 through 08/11/2020	Spring 01/01/2020 through 08/11/2020
Open Enrollment for Dependents and Qualifying Events	07/08/2019 through 09/22/2019	12/02/2019 through 01/17/2020
Student	\$ 1,252.00	\$ 736.00
Spouse	\$ 2,478.84	\$ 1,450.00
One Child	\$ 1,239.42	\$ 729.00
Family ¹	\$ 3,730.32	\$ 2,186.00

¹Family=Spouse + one or more children or No Spouse but more than one child.

To view all enrollment and coverage periods available, please visit wpi.myahpcare.com or call Academic HealthPlans at 1-855-844-3021.

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 wpi.myahpcare.com.