



West Virginia University

Student Health Insurance Plan 2026-2027



What's Included?



Academic Student Assistance Program (ASAP)



Optional Dental and Vision Coverage



Academic Emergency Services (AES)*



Telehealth solutions through AcademicLiveCare (ALC)



Coverage when traveling



Access to the Super Blue Plus PPO Network

The new insurance carrier for the 2026-2027 plan year is Highmark.

Eligibility

All domestic students who are enrolled in six or more credit hours and all international students enrolled in one or more credit hours at West Virginia University, West Virginia University Institute of Technology, or Potomac State College, including WVU students enrolled in fully online programs, are automatically enrolled in the West Virginia University Student Health Insurance Plan and may opt-out. Please Note: Dependents of students are not eligible to purchase the 2026-2027 West Virginia University Student Health Insurance Plan.

Students who fall below the credit hour requirement prior to the end of the add/drop period will be disenrolled from the plan and refunded the premium for that term. Students who fall below the credit hour requirement after the end of the add/drop period will remain enrolled in the plan and will not be refunded the premium.

For more information, visit wvu.myahpcare.com.



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 wvu.myahpcare.com/additionalresources

*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, Inc. (AHP), Part of the Brown & Brown Team.



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 Highmark.

Benefits

(Deductible applies unless otherwise stated below)

| | IN-NETWORK PROVIDER <small>Payments are based on the Negotiated Charge</small> | OUT-OF-NETWORK PROVIDER <small>Payments are based on the Recognized Charge</small> |
|--|--|---|
| Individual Deductible Per Person, per Policy Year | \$500 | \$5,000 |
| Individual Out-of-Pocket Maximum Per Person, per Policy Year | \$8,350 | N/A |
| Primary Care Provider and Specialist Office Visits | 80% after a \$25 Copayment (Deductible waived) | 50% after a \$70 Copayment |
| Urgent Care Center Visits | 80% after a \$50 Copayment (Deductible waived) | 50% after a \$50 Copayment |
| Inpatient Hospital | 80% after a \$300 Copayment per admission | 50% after a \$300 Copayment per admission |
| Surgical Services | 80% | 50% |
| Diagnostic Services | 80% after a \$25 Copayment (Deductible waived) | 50% after a \$70 Copayment |
| Emergency Room Services (Copayment waived if admitted) | | 80% after a \$300 Copayment |
| Outpatient Mental Health Services (includes virtual behavioral health visits) | 100% after a \$25 Copayment (Deductible waived) | 50% after a \$70 Copayment |
| Prescription Drugs Up to a 34-day supply per prescription | At pharmacies contracting with National Plus Pharmacy Network | |
| | 100% after a Generic Drug: \$15 Copayment Formulary Brand Drug: \$40 Copayment Non-Formulary Generic/Brand Drug: \$70 Copayment Specialty Drug: 20% Coinsurance | Not Covered |
| Preventive Care Services For more information, visit healthcare.gov/preventive-care-benefits | 100% (Deductible waived) | 50% |

Coverage Periods & Rates

| Coverage Periods | ANNUAL 08/11/2026 - 08/10/2027 | FALL 08/11/2026 - 12/31/2026 | SPRING/SUMMER 01/01/2027 - 08/10/2027 | SUMMER ONLY 05/11/2027 - 08/10/2027 |
|---------------------|--------------------------------------|------------------------------------|---|---|
| Waiver Periods | N/A | 06/01/2026 - 07/24/2026 | 10/26/2026 - 12/21/2026 | TBD |
| Student Premiums | \$3,257 | \$1,277 | \$1,980 | \$821 |

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 www.myahpcare.com upon approval by federal and state authorities.