# HUSSON UNIVERSITY

## 2016 – 2017 Student Health Insurance Plan

**Underwritten by: National Guardian Life**

**Group #: S210213**

**Policy #: 2016I5B41**

Dear Student, Parent, or Guardian:

We are pleased to provide you with this overview of the Husson University Student Health Insurance Plan (SHIP). This SHIP is underwritten by National Guardian Life Insurance Company and administered by Consolidated Health Plans (CHP).

This ACA-compliant plan includes:

- Coverage while at school and at home
- Comprehensive coverage both for emergency and non-emergency situations
- Access to the Cigna PPO network

***This Plan is paired with the Cigna Network. Note that the benefits are not insured by Cigna or affiliates.***

This plan also offers the following value-added services:

- Vision Discount Program through Davis Vision
- Medical Travel Assistance Services

| BENEFIT SUMMARY* | | |
|---|---|---|
| **Maximum** | Unlimited | |
| | **NETWORK** | **Non-NETWORK** |
| **Deductible** | $250 | $250 |
| **Out-of-Pocket Expense Limit** | $6,850 | No Maximum |
| **Coinsurance** | 80% of PA | 60% of U&R |
| **Hospital Inpatient Facility Copayment** | $150 | $150 |
| | | |
| **Preventive Care** | 100% of PA (deductible waived) | The U&R Charge Stated above |
| **Hospital Room & Board** | PPO Allowance Stated above | The U&R Charge Stated above |
| **Physician's Office Visit** | Copayment: $25 then 80% of PA (deductible waived) | Copayment: $25 then 60% of U&R |
| **Emergency Room Expense** | Copayment: $200 then 80% of PA | Copayment: $200 then 80% of PA |
| **X-Ray and Laboratory** | PPO Allowance Stated above | The U&R Charge Stated above |
| **Prescription Drugs** Prescriptions should be filled at a Participating Cigna Pharmacy Network | 100% of PA after: Copay: $20 Generic Copay: $40 Preferred Brand; or Copay: $60 Brand | N/A |
| PA= PPO Allowance | | U&R = Usual & Reasonable |

This summary is provided as a courtesy and is not meant to replace or override the terms and conditions detailed in the insurance policy/brochure. Please refer to the policy/brochure to verify medical coverage, eligibility, exclusions, limitations, and for more detailed information.

Underwritten by: **National Guardian Life Insurance Company**
*National Guardian Life Insurance Company is not affiliated with Guardian Life Insurance Company of America, aka The Guardian or Guardian Life.*

## Husson University Insurance Requirements

All full time Graduate students enrolled in 6 or more credit hours and all full time Undergraduate students enrolled in 9 or more credit hours are eligible and are automatically enrolled in the Husson University Student Health Insurance Plan, unless a waiver providing proof of other qualifying insurance is received by September 13, 2016. The Student Health Insurance Program is not available to Extended Learning students, non-Bangor campuses or students enrolled in online courses.

### How to Waive Coverage:

All eligible students who want to waive the Husson University Student Health Plan must confirm that their current insurance is usable in the State of Maine before completing the waiver. To waive the Husson University Student Health Insurance, go to: https://estudent.husson.edu/login.asp.
Those students who do not waive the insurance plan by the deadline, will be automatically enrolled in and charged for the Husson University Student Health Insurance Plan. Once enrolled, a student may not cancel the insurance and no refund is available. Coverage continues until the policy expires.

**The deadline to waive: September 13, 2016**

| I need to: | Visit: |
|---|---|
| • Waive Coverage<br>• Insurance Coverage<br>CROSS INSURANCE Where Security Meets Strength | Servicing Agent<br>**Cross Insurance**<br>150 Mill Street, Suite 4<br>Lewiston, ME 04240<br>1-800-537-6444<br>www.crossagency.com |
| Learn about:<br>• Insurance Benefits<br>• PPO Provider Listings<br>• Claims Processing<br>• ID card | **Consolidated Health Plans**<br>2077 Roosevelt Avenue<br>Springfield, MA 01104<br>(800) 633-7867<br>8:00 a.m. to 5:00 p.m.<br>www.chpstudent.com |
| Find a PPO Provider:<br>Cigna. | **Cigna PPO**<br>www.cigna.com<br>or<br>**Consolidated Health Plans**<br>www.chpstudent.com<br>(800) 633-7867 |
| Find a Prescription Drug Provider: | **Cigna Pharmacy Network**<br>www.cigna.com |

| Cost and Period of Coverage | | |
|---|---|---|
| | **Annual*** 8/1/16-7/31/17 | **Spring*** 1/1/17-7/31/17 |
| Student Only | $1,943 | $1,131 |
| *Premiums include an Administrative Service Fee | | |

Policy Form NBH-280 (2014) ME

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