

# Suffolk University

## 2007-2008 Student Accident and Sickness Insurance Program

The Plan is underwritten by Nationwide Life Insurance Company

A summary of benefits is listed below, as are instructions to waive the insurance coverage if you do not want it and have comparable coverage with claims payment in the United States. If you are enrolled in the plan, you will receive a complete benefits brochure with your identification card. The full benefit brochure is also available on line at the University Health Plans website. Simply click on Suffolk University and then 'Brochure' to view, download and/or print the Suffolk University 2007-2008 brochure.

Plan effective dates: **August 15, 2007 – August 15, 2008**. Spring Semester dates: **January 8, 2008 – August 15, 2008**.

***ON-LINE ENROLLMENT AND WAIVER PROCESS:***

Suffolk University is offering an on-line enrollment-waiver response for students. If you **DO NOT** want the above insurance and have comparable coverage with claims payment in the United States, simply follow the instructions below to waive the coverage quickly and easily. If you choose to waive coverage, you must complete the on-line waiver by **September 30, 2007** or you will be automatically enrolled and billed the annual premium.

***To enroll or waive coverage on-line:***

1. Go to [www.universityhealthplans.com](http://www.universityhealthplans.com)
2. Click on Suffolk University
3. Click on Suffolk University Student Insurance Plan
4. Left side menu, click on either the Enrollment Form or Waiver Form
5. Submit the form by clicking 'Apply.' If the form is accepted, you will receive immediate confirmation of your enrollment or waiver. Please print a copy of your confirmation for your record.

***BENEFIT SUMMARY:***

The Preferred Provider Network is Private Healthcare Systems (PHCS). A list of participating providers can be found on the University Health Plans website. The program does not require you to use a preferred provider. If you utilize PHCS or CHP providers, you will receive maximum benefits and lower your out-of-pocket payments. This summary is not a complete listing of the benefits available; please refer to the Suffolk University 2007-2008 brochure for full details.

SUMMARY OF BASIC INSURANCE BENEFITS		
UP TO \$50,000 MAXIMUM BENEFIT PAID AS SPECIFIED BELOW (FOR EACH ACCIDENT OR SICKNESS)		
The policy will pay for Covered Medical Expenses incurred by a Covered Person due to a covered Accident or covered Sickness not to exceed an aggregate maximum benefit of \$50,000 per Accident or Sickness, except as specifically stated.		
Coverage: Reimbursement is based on the Negotiated Charge for In-Network Preferred Providers or Reasonable and Customary based in accordance with data provided by Nationwide for Out-of-Network Non Preferred Providers.		
Inpatient Services		
Services	In Network (PHCS)	Out-of-Network
Hospital Room and Board Expenses: for an overnight stay.	100% of Negotiated Charge up to the semi-private rate (or ICU rate, if applicable), subject to a \$250 inpatient co-pay	80% of Usual & Customary Charge up to the semi-private rate (or ICU rate, if applicable) subject to a \$250 inpatient deductible
Physician Hospital Visit Expenses: for non-surgical services	100% of Negotiated Charge for the 1 <sup>st</sup> \$2,000 of fees, and 80% of the negotiated charge for the covered balance	100% of Negotiated Charge for the 1 <sup>st</sup> \$2,000 of fees, and 80% of the negotiated charge for the covered balance
Outpatient Services		
Outpatient Doctor's Visit: Benefits for Physician's visits do not apply when related to surgery or Physiotherapy.	100% of Negotiated Charge for students after a \$10 copay per visit if referred by Suffolk University Health Services, if not, covered 80% with a \$10 copay per visit	80% of R & C Charge for students, with a \$10 deductible per visit, if referred by Suffolk University Health Services, if not, covered 60% with a \$30 deductible per visit
Emergency Room Expenses: not resulting in a hospital admission	80% of Negotiated Charge for students, subject to a \$50 co-pay; 80% of Negotiated Charge for dependents with \$75 copay	80% of R & C Charge, subject to a \$50 deductible; 80% of R & C Charge for dependents with a \$75 deductible
Prescription Drug Coverage: must be filled at an "Express Scripts" Participating Pharmacy. Contraceptive outpatient prescription drugs are covered; included in the \$750 policy year maximum	100% \$10 copay for generic and \$25 copay for brand name; Up to a \$750 policy year maximum	100% \$10 copay for generic and \$25 copay for brand name; Up to a \$750 policy year maximum
Women's Health Benefit Expenses: for routine screening of Chlamydia, pap smear, and mammogram.	100% when obtained through Suffolk University Health Services. Outside of Health Services covered at 80% of R&C.	100% when obtained through Suffolk University Health Services. Outside of Health Services without a referral – coverage is 60% of the R&C with a \$30 per visit deductible.
Dental Treatment: Made necessary by Injury to Sound, Natural Teeth	80% of Usual & Customary Charges/ \$200 maximum per tooth	80% of Usual & Customary Charges/ \$200 maximum per tooth
Laboratory and X-Ray Expense: *Expenses payable at 100% of the reasonable and customary charge at Suffolk University Health Services	80% of Negotiated Charge after a \$50 copay	80% of R & C Charge after a \$50 deductible.