



Salve Regina University is making available a Student Health Insurance Plan (hereinafter called “plan”). This provides a general summary of the insurance coverage; the Schedule of Benefits is not all inclusive of eligible benefits payable under this plan. This summary is not a contract; however, the Master Policy will be available for review upon request. The Master Policy contains the contract provisions and shall prevail in the event of any conflict between this summary and the Master Policy.

All undergraduate students and part-time resident students are automatically enrolled in the Student Health Insurance Plan, unless proof of other comparable coverage can be provided.

SALVE REGINA UNIVERSITY 2016/2017 SUMMARY OF INSURANCE BENEFITS

The following summary is intended as an overview of the benefits provided under the 2016/2017 Salve Regina University Student Health Insurance Plan. To view the full Plan brochure, please visit www.universityhealthplans.com, and click on “Salve Regina University”.

Coverage is provided for benefits as mandated by the State of Rhode Island; please refer to the Master Policy on file at the University for full details.

Policy Year Maximum Benefit	Unlimited	
	In-Network	Out-of-Network
Deductible per Covered Person per Policy Year	\$0	\$0
Out of Pocket Maximum: (Includes Coinsurance and Copayments, does not include non-covered medical expenses or elective treatment)	\$6,350 Individual	\$6,350 Individual
Coinsurance	100% of Preferred Allowance (PA) up to \$5,000 then 80% of PA	100% of Usual & Reasonable (U&R) up to \$5,000 then 80% of U&R
Outpatient Services		
Office Visits	U&R after a \$20 Copayment	
Diagnostic Imaging, X-ray and Laboratory Services	100% of PA up to \$5,000 then 80% of PA	100% of U&R up to \$5,000 then 80% of U&R
Preventive Care	100% of PA (Deductible Waived)	100% or U&R (Deductible Waived)
Inpatient Services		
Inpatient Hospital Expense	100% of PA up to \$5,000, then 80% of PA	100% of U&R up to \$5,000, then 80% of U&R
Skilled Nursing Facility Benefit	100% of PA up to \$5,000, then 80% of PA	100% of U&R up to \$5,000, then 80% of U&R
Surgical Services (Inpatient & Outpatient)		
Surgeon’s Fee	100% of PA up to \$5,000, then 80% of PA	100% of U&R up to \$5,000, then 80% of U&R
Anesthetist Services	100% of PA up to \$5,000, then 80% of PA	100% of U&R up to \$5,000, then 80% of U&R
Emergency Services		
Emergency Service Expense	95% of PA	95% of R&C
Emergency Department	95% of PA	95% of R&C
Pre-Hospital Emergency Medical Services	95% of PA	95% of R&C
Prescription Drugs		
30-day supply	Paid in full	Paid in full
Tier 1	100% after \$15 Copayment	100% after \$15 Copayment
Tier 2	100% after \$30 Copayment	100% after \$30 Copayment
Tier 3	100% after \$45 Copayment	100% after \$45 Copayment

WHERE TO FIND HELP

Enrollment • Waiver of Mandatory Insurance Charge	Insurance Benefits • Customer Service • ID Cards
<p>UNIVERSITY HEALTH PLANS One Batterymarch Park, Quincy, MA 02169-7454 Local: (617) 472-5324 - Out of Area: (800) 437-6448 www.universityhealthplans.com</p>	<p>CONSOLIDATED HEALTH PLANS 2077 Roosevelt Avenue, Springfield, MA 01104 Local: (413) 733-4540 - Out of Area: (800) 633-7867 www.chpstudent.com</p>

