## Who can enroll?

1) are engaged in educational activities; 2) are temporarily located - resident place - 2) have not u

in an associate hachelor master or Ph.D. degree orogram at a metal rathescence universe where the process of th

applicant was enrolled in this plan as a full-time student in the

The state of the s

The Insured, as defined in this actively attend classes for at least the first 31 days after the date

## **Plan highlights**

Student Health Center Benefits (Students Only): The Deductible and Copays will be waived and benefits will be naid at the Preferred

Benefits	Preferred Providers	Out-of-listawen? replaces
இன் அம்Plan Maximum	Student Only: There is no everall maximum dollar-limit on the notice.  Dependent:	
Plan Deductible	Student Only: \$190 necleonerd Barson was Policy Year  Policy Year  Particular \$250 per Insured Person	Student Only: \$500 per Insured Person, per Policy Year  Policy Year  Policy Year  Policy Year  Policy Year
Coinsurance All benefits are subject to satisfaction of the Deductible specific benefit limitations maximums and Copays as described is the plan conficients.	Student ser Descericines  Covered  Medical Expenses	Student set Processories  702  Medical Expenses
Mon Trage Prugs	Student Only:	

Prescriptions must be filled \*\*a UHCP network

UHCP Mail Order Network or 90 Day Retail Network Pharmacy at 2.5 times the retail Consumpto 90 day supply.

\$15 Consylver prescription for Tier 1 30% Coinsurance per prescription for Tier

45% Coinsurance per prescription for Tier

Up to a 31-day supply per prescription filled at a UnitedHealthcare Pharmacy (UHCP) Retail Network Pharmacy

## Dependents:

\$15 Consy per prescription for Tier 1.