Plan Overview

Plan Benefits

The following expenses will be paid after the $100 deductible, at 80% of the preferred allowance for Network Providers and 50% of Usual and Reasonable Expenses for Non-Network Providers up to $500,000 per policy year, deductible waived if services are received at the Student Health and Counseling (SHAC).

- Physicians Visits
- Outpatient Services including medical emergency, x-rays, lab procedures and miscellaneous tests
- Room and Board
- Hospital Miscellaneous
- Surgery (inpatient and outpatient)
- Travel Assistance

Wellness Benefit

Includes preventive services such as screenings, exams and immunizations as specified by the Patient Protection and Affordable Care Act (PPACA). For more information visit http://www.healthcare.gov/prevention/index.html. Paid at 100% of Preferred Allowance for services rendered In-Network, not subject to deductible, copays or coinsurance. Services received Out-of-Network are paid at 50% of Usual and Reasonable Expenses, but the Deductible is waived. Deductible does not apply when covered wellness services are received at the Student Health and Counseling (SHAC).

Prescriptions

After a copayment of $15.00 for generic, $30.00 for a brand name drug and $45.00 for single source per prescription, the cost of prescription drugs is paid in full, up to a maximum of $500,000 per policy year. Prescriptions must be filled at a participating pharmacy. To find a participating pharmacy, visit www.express-scripts.com or call 800-400-0136. Students will be given an insurance ID card to show to the pharmacy as proof of coverage.

Your student health insurance coverage, offered by Companion Life Insurance Company, may not meet the minimum standards required by the health care reform law for the restrictions on annual dollar limits. The annual dollar limits ensure that consumers have sufficient access to medical benefits throughout the annual term of the policy. Restrictions for annual dollar limits for group and individual health insurance coverage are $1.25 million for policy years before September 23, 2012; and $2 million for policy years beginning on or after September 21, 2012 but before January 1, 2014. Restrictions for annual dollar limits for student health insurance coverage are $500,000 for policy years before September 23, 2012, $500,000 for policy years beginning on or after September 23, 2012, but before January 1, 2014. Your student health insurance coverage put an annual limit of $500,000 that applies to the essential benefits provided in the Schedule of Benefits unless otherwise specified. If you have any questions or concerns about this notice, contact Customer Service at 1-800-322-9901. Be advised that you may be eligible for coverage under a group health plan of a parent’s employer or under a parent’s individual health insurance policy if you are under the age of 26. Contact the plan administrator of the parent’s employer plan or the parent’s individual health insurance issuer for more information.
Plan Overview

Visit www.CIRStudentHealth.com/Carleton

- To view complete information about the plan including claims forms, provider network, replacement cards, and more
- Buy optional insurance coverage for dental, vision, property and more
- Get answers to Frequently Asked Questions
- To contact us with specific questions

Cost
The annual student premium is $940.00 for coverage from August 15, 2013 to August 15, 2014

“I have questions, I’m not sure who to call.”

Call The Student Insurance Program administrator at 1-800-322-9901

The Student Insurance Program is brought to Carleton College students by:
The Provider: USI Affinity Collegiate Insurance Resources
The Underwriter: Companion Life Insurance Company
The Claims Administrator: Administrative Concepts, Inc.
Preferred Provider Network: Preferred One