



## Plan Cost

Rates	30 Day Rates
Student 22 & Under	\$100.50
Student 23-26	\$141.90
Student 27-30	\$304.20
Student 31 +	\$1,405.80
Spouse	\$1,753.50
Each Child	\$895.20

\*30 Day Rates are for illustrative purposes only, minimum purchase period is 90 days or actual semester dates.

This plan is underwritten by H&W Indemnity (SPC), Ltd. for and on behalf of Student Resources SP, a UnitedHealth Group Company, Governors Square, Building 4, 2<sup>nd</sup> Floor, 23 Lime Tree Bay Avenue, P.O. Box 1051, Grand Cayman, Cayman Islands. This plan is based on policy number 2023-203083-91. Available through UnitedHealthcare Student Resources International and issued to ITA Global Trust Ltd. as Trustee of the International Student Health and Wellness Trust under policy number 2023-202934-91. The Policy is a Non-Renewable One Year Term Policy.

This schedule applies to the Named Insured (student) only. Dependents are covered under a separate Schedule of Benefits.

Highlights of the Student Only Health Insurance Plan of Benefits offered by H&W Indemnity (SPC), Ltd. for and on behalf of Student Resources SP, a UnitedHealth Group Company		
<b>Preferred Providers:</b> The Preferred Provider Network for this plan is UnitedHealthcare Options PPO. Preferred Providers can be found using the following link: <a href="http://www.iss.gallagherstudent.com">www.iss.gallagherstudent.com</a>		
<b>Student Health Center Benefits:</b> The Deductible and Copays will be waived and benefits will be paid at the Preferred Provider level of benefits when treatment is rendered at the Student Health Center.		
	<b>Preferred Providers</b>	<b>Out-of-Network Providers</b>
<b>Overall Plan Maximum</b>	\$500,000 (For each Injury or Sickness)	
<b>Plan Deductible</b>	\$100 (per Insured Person, Per Policy Year)	\$500 (per Insured Person, Per Policy Year)
<b>Coinsurance</b> <i>All benefits are subject to satisfaction of the Deductible, specific benefit limitations, maximums and Copays as described in the plan certificate.</i>	80% of Allowed Amount for Covered Medical Expenses	70% of Allowed Amount for Covered Medical Expenses
<b>Prescription Drugs</b> <i>Prescriptions must be filled at a UHCP network pharmacy. UHCP Mail Order Network Pharmacy or 90 Day Retail Network Pharmacy at 2.5 times the retail Copay up to a 90 day supply.</i>	\$20 Copay per prescription Tier 1 30% Coinsurance per prescription	

<p><b>The following services have per service Copays</b>  <i>This list is not all inclusive. Please read the plan certificate for complete listing of Copays.</i></p>	<p>Room and Board \$100 not subject to Deductible  Physician's Visits: \$30 not subject to Deductible  Medical Emergency: \$300 not subject to Deductible</p>	<p>Medical Emergency: \$300 not subject to Deductible  Room and Board \$100 not subject to Deductible</p>
<p><b>UnitedHealthcare Global: Global Emergency Services</b></p>	<p>International Students are covered worldwide except in their home country.</p>	

This schedule is for Dependent coverage only.

**Highlights of the Dependent Only Health Insurance Plan of Benefits offered by H&W Indemnity (SPC), Ltd. for and on behalf of Student Resources SP, a UnitedHealth Group Company**

<p><b>Preferred Providers:</b> The Preferred Provider Network for this plan is UnitedHealthcare Options PPO. Preferred Providers can be found using the following link: <a href="http://www.iss.gallagherstudent.com">www.iss.gallagherstudent.com</a></p>		
	<b>Preferred Providers</b>	<b>Out-of-Network Providers</b>
<b>Overall Plan Maximum</b>	\$250,000 (Per Insured Person, Per Policy Year)	
<b>Plan Deductible</b>	\$250 (per Insured Person, Per Policy Year)	\$750 (per Insured Person, Per Policy Year)
<p><b>Coinsurance</b>  <i>All benefits are subject to satisfaction of the Deductible, specific benefit limitations, maximums and Copays as described in the plan certificate.</i></p>	80% of Allowed Amount for Covered Medical Expenses	70% of Allowed Amount for Covered Medical Expenses
<p><b>Prescription Drugs</b>  <i>Prescriptions must be filled at a UHCP network pharmacy.  UHCP Mail Order Network Pharmacy or 90 Day Retail Network Pharmacy at 2.5 times the retail Copay up to a 90 day supply.</i></p>	<p>\$20 Copay per prescription Tier 1  30% Coinsurance per prescription Tier 2  40% Coinsurance per prescription Tier 3  Up to a 31-day supply per prescription filled at a UnitedHealthcare Pharmacy (UHCP) Retail Network Pharmacy  Not subject to deductible</p>	No Benefits
<p><b>Preventive Care Services</b>  <i>Including but not limited to: annual physicals, GYN exams, routine screenings and immunizations.  Preventive care limits apply based on age and risk group.</i></p>	<p>100% of Allowed Amount not subject to Deductible    \$1,000 maximum per Policy Year</p>	No Benefits
<p><b>The following services have per service Copays</b>  <i>This list is not all inclusive. Please read the plan certificate for complete listing of Copays.</i></p>	<p>Room and Board \$500 not subject to Deductible  Medical Emergency: \$200 not subject to Deductible</p>	<p>Medical Emergency: \$200 not subject to Deductible</p>





- Transportation After Stabilization
- Transportation to Join a Hospitalized Insured Person
- Return of Minor Children
- Repatriation of Remains

Also includes additional assistance services to support your medical needs while away from home or campus. Check your plan certificate for details, descriptions and program exclusions and limitations.

To access services please refer to the phone number on your ID Card or access My Account and select My Benefits/Additional Benefits/UHC Global Emergency Services.

When calling the UnitedHealthcare Global Operations Center, please be prepared to provide:

- Caller's name, telephone and (if possible) fax number, and relationship to the patient;
- Patient's name, age, sex, date of birth, and address;
- Information of the attending physician and the location of the patient.

### Healthiest You: 24/7 Doctor Access

Starting on the effective date of your coverage under the Student Health Plan, you will have access to 24/7 doctor access services, including telemedicine, virtual care, and on-call services, saving you a trip to the doctor's office.

