## Western Kentucky University 2022-2023

## Student Health Insurance Plan



**PLAN HIGHLIGHTS** 

It contains only a partial, general description of plan benefits and programs and does not constitute a contract. Covered expenses are subject to plan maximums, limitations and exclusions as described in the policy. The PPO network is Cigna.

## DO YOU HAVE YOUR INSURANCE CARD?

- 1. Go to wellfleetstudent.com.
- 2. Type in school name.
- Type in your First Name, Last Name, Date of Birth and click the button "School Assigned ID". In the field below, type in your 800# and DOB.
- 4. Continue with other account information

- 5. The next page will ask you for an email address and then a password.
- 6. Once you set up your account, you will be able to view/print a card and also request a card be sent to you.
- Once logged in, you may select "Request Permanent ID Card" or "View or Print ID Card" after clicking the "ID Card Information" link in the left navigation.

BENEFIT MAXIMUMS & DEDUCTIBLES					
	Preferred Provider	Out-of-Network Provider			
Policy Aggregate Maximum	Unlimited per Insured Person, Per Policy Year (for Essential Benefits Only)				
Deductible	Individual: \$500	Individual: \$1,000			
Out-of-Pocket Maximum	Individual: \$6,850   Family: \$12,000	Not Applicable			

BENEFIT CATEGORY deductible applies unless otherwise stated below	Graves Gilbert Clinic @ WKU	Preferred Provider	Out-of-Network Provider
		Payments are based on the Preferred Provider Allowance	Payments are based on the Usual & Customary Charges
Physician's Visits	100%	100%, after a \$50 Copay deductible waived	60%
Diagnostic X-ray Services	100%	80% after a \$50 Copay per visit	60% after a \$50 Copay per visit
Laboratory Procedures	100%	100%	75%
Medical Emergency Services	N/A	80% after a \$250 Copay per visit	80% after a \$250 Copay per visit
Prescription Drugs, Deductible Waived up to 31-day supply per prescription	N/A	Tier 1: \$20 Copay Tier 2: \$35 Copay Tier 3: \$60 Copay Tier 4: \$60 Copay	Tier 1: \$20 Copay Tier 2: \$35 Copay Tier 3: \$60 Copay Tier 4: \$60 Copay
Hospital Room and Board Expense Including Intensive Care Units	N/A	80%	60%
Surgery	N/A	80%	60%
Preventive Care Services For more information, please visit healthcare.gov/coverage/preventive-care-benefits/	100%	100%	80%

2022-2023 PREMIUM COSTS AND COVERAGE PERIODS					
Coverage Periods	Fall 08/01/22 - 12/31/22	Spring/Summer 01/01/23 - 07/31/23	Summer 05/04/23 - 07/31/23		
Open Enrollment	07/01/22 - 09/16/22	12/02/22 - 02/15/23	04/16/23 - 06/16/23		
Student	\$ 914.00	\$ 1,268.00	\$ 532.00		



Please view the complete brochure on-line at wku.myahpcare.com for full details of participation in the plan.