

George Fox University 2021/22 Student Health Insurance

for domestic and international undergraduate students

Your student health insurance plan offers:

- Gold-level coverage at an affordable rate
- Access to a wide network of providers locally and across the nation
- Wellness-focused coverage
- Member-focused customer service

Eligibility and cost

All full-time undergraduate students taking a minimum of 12 credit hours (excluding DPS) are automatically enrolled in this insurance plan at registration unless proof of comparable coverage is provided. Please visit PacificSource.com/GeorgeFox to learn more about this health plan.

How much does it cost?

Coverage Period	Fall 8/16/2021 – 12/31/2021	Spring 1/1/2022 — 8/15/2022
Undergraduate Student Cost	\$1,141	\$1,870

Note: The amounts stated above include certain fees charged by your school. For example, the fees may include your school's administrative costs associated with offering this health plan.

Online tools available at PacificSource.com

- Through InTouch, our secure website for members, you can view your ID card, claims, status of prior authorizations, accumulated expenses toward your plan's deductibles, and more.
- CaféWell is a secure, online health engagement portal with personalized guidance and support to live a healthier life. Access CaféWell via InTouch.
- Our Provider Directory will help you locate healthcare providers and facilities. Visit PacificSource.com/GeorgeFox to access the directory of nationwide providers.
- **Print an insurance ID card** by visiting PacificSource.com/IDCard.

Continued >

Learn more

PacificSource.com/ StudentHealth

Phone

Direct: 541-225-2741 Toll-free: 855-274-9814 TTY: 711

Email

StudentHealth@ PacificSource.com

Group no.

G0035885

PacificSource.com



Benefits at a glance

	Health and Counseling Center and PacificSource In-network Providers	Out-of-network Providers
Contract-year deductible	\$500	\$1,000
Out-of-pocket limit	\$4,000	\$8,000
Plan maximum	Unlimited	

In-network and out-of-network provider charges accumulate separately.

Your share of costs

No deductible, member pays \$0 After deductible, 20%	Not covered After deductible, 40%
After deductible, 20%	After deductible, 40%
After deductible, 20%	After deductible, 40%
After deductible 200/	After deductible, 40%
After deductible, 20%	
After deductible, 20%	After deductible, 40%
After deductible, \$100 plus 20%^	
After deductible, 20%	
After deductible, 20%	After deductible, 40%
Retail pharmacy: Tier 1: No deductible, \$20 Tier 2: No deductible, \$40 Tier 3: No deductible, \$60 Tier 4: No deductible, \$60 Mail order: (31- to 90-day supply): Tier 1: No deductible, \$50 Tier 2: No deductible, \$100 Tier 3: No deductible, \$150	No deductible, 90%
Eligible expenses incurred at the Health and Counseling Center are covered at 100%.	
	After deductible, 20% After deductible, 20% After deductible, 20% After deductible, 20% Retail pharmacy: Tier 1: No deductible, \$20 Tier 2: No deductible, \$40 Tier 3: No deductible, \$60 Tier 4: No deductible, \$60 Mail order: (31- to 90-day supply): Tier 1: No deductible, \$50 Tier 2: No deductible, \$50 Tier 2: No deductible, \$100 Tier 3: No deductible, \$150 Eligible expenses inc

This is a brief summary of benefits. Refer to the Student Policy for additional information or a further explanation of benefits, limitations, and exclusions.

Insurance term glossary

Deductible: The amount you owe for healthcare services your health insurance or plan covers before your health insurance or plan begins to pay.

Contract Year: The 12-month period on which your insurance plan operates.

Coinsurance: Your share of the cost of a covered service (in addition to copays), calculated as a percentage of the service cost.

For more definitions, visit PacificSource.com/ Glossary.aspx.

myPacificSource mobile app

Stay "InTouch" with your PacificSource coverage, no matter where you are, with our free app. Download our free app from the Amazon, Android™, or Apple® app stores. For more information, visit PacificSource.com/Mobile.

^Copay applies to ER physician and facility charges only. Copay waived if admitted into hospital. For emergency medical conditions, out-of-network providers are paid at the in-network provider level.

