

# **Oregon State University** 2020/21 Student Health Insurance

## for Voluntary Students

## **Your Student Health Insurance Plan Offers:**

- 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**

Domestic students are eligible for the Oregon State University Student Health Insurance Plan on a voluntary basis if they are an enrolled student at Oregon State University (six credit hours for undergraduate students; three credit hours for graduate students).

E-campus students with the following criteria have the option to enroll in the OSU Student Health Insurance Plan:

- Student must be degree-seeking.
- Undergraduate students must take a minimum of six credits.
- Graduate students must take a minimum of three credits.
- Student must be living on campus or within a 50 mile radius from the Corvallis campus.
- Student must opt in to the OSU Health Fee.

Postdoctoral Fellows, PharmD, and Vet Residents are eligible for the OSU Student Health Insurance Plan on a voluntary basis.

To enroll in coverage, visit PacificSource.com/OSU. Students will need to complete an enrollment request online. Postdoctoral Fellows/Vet Residents and Visiting Scholars must complete a paper enrollment form. Payment is due at time of enrollment.

Eligible dependents of those enrolled in the plan may participate on a voluntary basis. Please view a complete Student Guide at PacificSource.com/OSU for full details.

## How much does it cost?

Coverage Period	Fall Semester 9/11/20–12/21/20	Winter Semester 12/22/20–3/19/21	Spring Semester (with Summer) 3/20/21–9/10/21	Summer Semester 6/12/21–9/10/21
Domestic, E-campus, Pharmacy Student/Dependent Cost Per Person	\$1,073	\$1,073	\$1,073	\$803
Open Enrollment: Open – Close	9/9/20-10/9/20	12/18/20-1/15/21	3/15/21-4/9/21	6/7/21-7/5/21

Coverage Period	9/11/20–9/10/21
Postdoctoral Fellow, Vet Residents, Visiting Scholar Student/Dependent Cost Per Person	\$268/month

Note: The amount stated above does not include the student insurance administrative fee, which will be charged directly to your student account. This fee is \$70 per term for students or \$17.50 per month for Postdoctoral Fellows/Vet Residents and Visiting Scholars.

Continued >

### **Learn More**

PacificSource.com/OSU

#### Phone

Direct: (541) 225-2741 Toll-free: (855) 274-9814

Toll-free: (800) 735-2900

#### **Email**

StudentHealth@ PacificSource.com

## **Group No.**

G0038976



## Online Tools Available at PacificSource.com

- Through InTouch, our secure website for members, you can view your claims, status of preauthorizations, 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/StudentHealth to access the directory of nationwide providers.
- Print an insurance ID card by visiting InTouch.PacificSource.com/Members/IDCard/Printable.

## **Benefits at a Glance**

	In-network Providers	Out-of-network Providers
Contract-year deductible per person	\$500	\$500
Out-of-pocket limit per person	\$6,000	None
Plan maximum	Unlimited	1

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

### **Your Share of Costs**

Service	In-network Providers	Out-of-network Providers	
Preventive care (routine physicals, well woman visits, immunizations)	No deductible, member pays \$0	After deductible, 40%	
Office visits (primary care, naturopath, specialist, urgent care, and mental health/ chemical dependency)	After deductible, 20%	After deductible, 40%	
Outpatient rehabilitation services	After deductible, 20%	After deductible, 40%	
Inpatient or outpatient surgery/services	After deductible 200/	After deductible, 40%	
Advanced diagnostic imaging	- After deductible, 20%		
Diagnostic and therapeutic radiology and lab	After deductible, 20%	After deductible, 40%	
Emergency room visits	After deductible, \$150 plus 20%^		
Ambulance	After deductible, 20%		
Chiropractic manipulations	After deductible, 20%	After deductible, 40%	
Prescription drugs (up to a 30-day supply at retail, 31- to 90-day supply through mail order)	Retail pharmacy: Tier 1: No deductible, the lesser of \$30 or 50% Tier 2: No deductible, the lesser of \$100 or 50% Tier 3, 4: No deductible, the lesser of \$200 or 50%	Not covered	

Student Health Services (SHS)

The deductible is waived for covered services provided at SHS.

Dental and vision services are also included with your student insurance. Visit **PacificSource.com/OSU** for more information.

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.

