

Portland Community College 2022/23 Student health insurance

for international students, provided by PacificSource Health Plans

Your student health insurance plan offers:

- Coverage at an affordable rate
- Access to engaged providers locally and across the nation
- Wellness-focused coverage
- Outstanding customer service

Eligibility

All international students holding an F1 visa through PCC are required to enroll in the PCC-sponsored student health insurance plan. The only exception is students who are being sponsored by a government program that already provides medical insurance coverage. Dependents of F1 international students, who are in the U.S. on F2 visas, are eligible to enroll on the plan on a voluntary basis.

How much does it cost?

Program	Coverage Dates	Cost for Student	Additional Cost per Spouse or Dependent
International Students	Fall: 9/20/22-1/8/23	\$657	\$657
	Winter: 1/9/23-4/2/23	\$657	\$657
	Spring: 4/3/23–6/25/23	\$657	\$657
	Summer: 6/26/23-9/19/23	\$657	\$657

Online tools available at PacificSource.com

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

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.

Learn more

PacificSource.com/PCC

Phone

855-274-9814 TTY: 711 We accept all relay calls.

Email

StudentHealth@ PacificSource.com

Group no.

G0037205



Benefits at a glance – Voyager network

	In-network Providers	Out-of-network Providers
Contract-year deductible	\$500	\$1,000
Out-of-pocket limit	\$5,000	\$10,000
Plan maximum	Unlimited	

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

Your share of costs

	In-network Providers	Out-of-network Providers
Preventive care	No deductible	After deductible, 40%
Office visits (primary care, naturopath, specialist, urgent care, and mental health/chemical dependency)	No deductible, 20%	After deductible, \$20 plus 40%
Outpatient rehabilitation services	No deductible, 20%	After deductible, \$20 plus 40%
Inpatient or outpatient surgery/services Advanced Diagnostic Imaging	After deductible, 20%	After deductible, 40%
Diagnostic and therapeutic radiology and lab	After deductible, 20%	After deductible, 40%
Emergency room visits	After deductible, \$100 plus 20%^	
Ambulance	After deductible, 20%	
Prescription drugs (up to a 30-day supply at retail, 31- to 90-day supply through mail order)	Retail pharmacy: Tiers 1–4: 50% Mail order pharmacy: Tiers 1–3: 50%	

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.

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/ resources/learning-center/ glossary.



[^] Copay waived if admitted into hospital.