



Linfield University

2024/25 Student Health Insurance

for graduate students (opt-in plans only)

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

Graduate students taking courses on campus, who meet the full-time requirement of 6 credits or more, are eligible to purchase the graduate student health insurance.

To enroll visit: Enroll.PacificSource.com/Linfield

Note: Students wanting to purchase coverage must enroll each coverage period, and payment is due at time of enrollment.

How much does it cost?

Standard Calendar Program Coverage Period	Fall Semester 8/15/24–1/31/25	January Term 1/1/25–8/14/25	Spring Semester 2/1/25–8/14/25
Student Cost	\$2,491.50	\$3,085.50	\$2,491.50
Enrollment Period	8/5/24–9/2/24	12/9/24–1/2/25	1/25/25–2/15/25

Accelerated Calendar Program Coverage Period	Fall Semester 9/16/24–1/5/25	Winter Semester 1/6/25–3/30/25	Spring Semester 3/31/25–6/22/25	Summer Semester 6/23/25–9/15/25
Student Cost	\$1,529	\$1,147	\$1,147	\$1,160
Enrollment Period	9/10/24–10/15/24	1/3/25–1/24/25	3/20/25–4/14/25	6/15/25–7/8/25

myPacificSource mobile app

View your PacificSource member ID and coverage info any time you need it. Download our free app from the Amazon, Android™, or Apple® app stores. For more information, visit PacificSource.com/mobile.

Learn more

PacificSource.com/StudentHealth

Phone

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

Email

StudentHealth@PacificSource.com

Group no.

G0035862



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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.
- **Use our health and wellness portal** to work toward health goals. Access the portal 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.



For more information, visit InTouch.PacificSource.com/members

Benefits at a glance

Provider Network: Navigator	In-network providers	Out-of-network providers
Contract-year deductible	\$300	\$900
Out-of-pocket limit	\$3,500	\$10,500
Plan maximum	Unlimited	

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

Your share of costs

	In-network providers	Out-of-network providers
Routine physicals		
Well woman visits	No deductible, member pays \$0	After deductible, 50%
Immunizations		
Office visits	First 3 visits: No deductible, \$5 Subsequent visits: No deductible, \$25*	After deductible, 50%
Urgent care and naturopath visits	No deductible, \$25	After deductible, 50%
Specialist office visits	No deductible, \$50	After deductible, 50%
Mental health/chemical dependency (MHCD) office visits	First 3 visits: No deductible, \$5 Subsequent visits: No deductible, \$20*	No deductible, \$20
Outpatient rehabilitation services	No deductible, \$25	After deductible, 50%
Inpatient or outpatient surgery/services	After deductible, 20%	After deductible, 50%
Advanced diagnostic imaging		
Diagnostic and therapeutic radiology and lab	Member pays \$0 up to the first \$400, then 20% after deductible	After deductible, 50%
Emergency room visits	No deductible, \$200**	
Ambulance	After deductible, 20%	
Chiropractic manipulations and acupuncture care (20 visits chiropractic, 12 visits acupuncture)	No deductible, \$25	After deductible, 50%
Prescription drugs (up to a 30-day supply at retail)	Tier 1: No deductible, \$20 Tier 2: No deductible, \$35 Tier 3: No deductible, \$55 Specialty Drugs Tier 4: No deductible, \$80 (Drugs on the PacificSource Preventive Drug List have \$0 copay and are not subject to contract-year deductible)	
Linfield Health Center	Office visits are covered at 100%, up to \$15 maximum per visit, no deductible	

Dental and vision included for members through age 18 only. Visit PacificSource.com/StudentHealth for benefit 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.

*The combined first three visits are for each benefit year and apply to professional services office and home visits, telehealth visits, and mental health and substance use disorder services visits.

**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.

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.

Student Health Insurance brokered by USI Insurance Services, 800-251-4246.