



University of Portland

2025/26 Student health insurance

For domestic undergraduate and graduate students

Your student health insurance plan offers:

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

Eligibility and cost

All undergraduate students are required to carry medical insurance comparable to that offered under the school’s student health insurance plan. Unless specifically waived by the waiver deadline, with proof of coverage with another plan, students will automatically be covered under the student health insurance plan, and the premiums will be charged to their account for the fall and spring semesters. Students who want to waive coverage for the school year must do so per semester. Coverage may be waived online through [Waive](#). [PacificSource.com/univ](#) by **August 30, 2025, for Fall** and **January 17, 2026, for Spring**.

Graduate students are also eligible to purchase coverage. To enroll, visit [Enroll](#). [PacificSource.com/UP](#). Payment is due at time of enrollment. Only students taking courses that meet the full-time requirement of 6 credits or more are eligible to purchase graduate student health insurance. Enrollment periods are listed in the table below. Fall enrollment deadline is **September 15, 2025**.

Please note: Graduate students must re-enroll in coverage each semester. Premium is paid directly to PacificSource at time of enrollment via credit card, debit card, or bank withdrawal.

How much does it cost?

Coverage Period	Fall Semester 8/15/2025 - 12/31/2025	Spring/Summer Semester 1/1/2026 - 8/14/2026	Summer Semester Only 5/12/2026 - 8/14/2026
Undergraduate Student Cost	\$1,643	\$1,643	\$855.50
Graduate Student Cost	\$2,176.50	\$2,176.50	\$1,133
Graduate Student Enrollment Period	7/14/2025-9/15/2025	12/1/2025-2/1/2026	4/12/2026-6/14/2026

myPacificSource mobile app

View your PacificSource member ID and coverage info any time. Download our free app from the Google Play or or Apple® app stores, or visit [PacificSource.com/mobile](#).

Learn more

[PacificSource.com/students](#)

Phone

855-274-9814

TTY: 711

We accept all relay calls.

Email

[StudentHealth@PacificSource.com](#)

Group No.

G0035866



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Helpful online tools

- **Setup your account on our mobile app:** PacificSource.com/mobile
- **Find doctors and locations:** PacificSource.com/find-a-doctor.
Select "Navigator" from the list of provider networks when doing a search.
- **Print your insurance ID card:** PacSrc.co/printable-ID.



Set up your account at
InTouch.PacificSource.com/members

Benefits at a glance

Provider Network: University of Portland Health & Counseling Center and PacificSource Navigator

	University of Portland Health & Counseling Center	In-network Providers	Out-of-network Providers
Contract-year deductible	\$0	\$850	\$2,250
Out-of-pocket limit	\$0	\$5,500	\$18,000
Plan maximum	Unlimited		

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

Your share of costs

	University of Portland Health & Counseling Center	In-network Providers	Out-of-network Providers
Routine physicals	Member pays \$0	No deductible, member pays \$0	After deductible, 50%
Well woman visits			
Immunizations			
Office visits*	Member pays \$0	First 3 visits: No deductible, \$5 Subsequent visits: No deductible, \$30*	After deductible, 50%
Urgent care and naturopath visits	Not available	No deductible, \$30	After deductible, 50%
Specialist office visits	Not available	No deductible, \$60	After deductible, 50%
Mental health/chemical dependency (MHCD) office visits*	Member pays \$0	First 3 visits: No deductible, \$5 Subsequent visits: No deductible, \$25*	No deductible, \$25 copay
Outpatient rehabilitation services	Not available	No deductible, \$30	After deductible, 50%
Inpatient or outpatient surgery/services	Not available	After deductible, 20%	After deductible, 50%
Advanced Diagnostic Imaging			
Diagnostic and therapeutic radiology and lab	Lab services: Member pays \$0 Radiology services: Not available	Member pays \$0 up to the first \$400, then 20% after deductible	After deductible, 50%
Emergency room visits	Not available	No deductible, \$200**	
Ambulance	Not available	After deductible, 50%	
Chiropractic manipulations and acupuncture care (20 visits chiropractic, 12 visits acupuncture)	Not available	No deductible, \$30	After deductible, 20%
Prescription drugs (up to a 30-day supply at retail)	Not available	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)	

*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.

Glossary

Deductible:

The dollar amount you pay out-of-pocket for covered services before your health insurance plan begins to pay for your care.

Coinsurance:

The amount you owe for a covered healthcare service or prescription, calculated as a percentage of the allowed service amount.

For more definitions, visit PacificSource.com/glossary.

Student health insurance brokered by USI Insurance Services, **800-251-4246**.

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