Dear International SMU Students.

On behalf of the Student Health Center, welcome to SMU!

For the 2022-2023 Academic Year, SMU has partnered with Academic HealthPlans, Inc. and **Aetna** to provide high-quality health insurance coverage for our students and their dependents. The University's Student Health Insurance Plan (SHIP) provides coverage for accidents and sicknesses, hospitalizations, emergency room, wellness and other services. Your deductible will be waived for treatment at the Student Health Center. The plan also provides travel assistance services for medical evacuations and repatriation. To learn more, please visit smu.myahpcare.com and select "Benefits."

SMU requires all International students, attending on a visa and taking one (1) or more credit hours, to enroll in the University's Student Health Insurance Plan.**

You should enroll in the Plan <u>after</u> you have selected your classes and before the Fall waiver deadline. To do so:

- 1. Go to the Student Center component of My.SMU.edu
- 2. Click "Student Health Insurance" tile
- 3. Select "Mandatory Health Insurance"
- 4. Add your Date of Birth and Social Security Number
- 5. Click the Enroll button and the semi-annual premium will be charged to your SMU tuition account
- ** There are two possible exceptions to this requirement:
 - The Embassy purchases and provides the student with comparable US health insurance coverage.
 - A spouse or parent extends U.S. medical insurance benefits through their US employer to the international student, including international medical evacuation and repatriation.

If either exception applies to you, you are eligible to submit a waiver from purchasing the University Student Health Insurance Plan. To be considered for a waiver you must take the following steps:

- Click the Waive button from step five in the above instructions to complete the International Waiver form.
- Provide a copy of your health insurance policy or certificate <u>and</u> insurance ID card (front & back).
- Submit the information to the Student Health Center by the required waiver deadline. Students only have to submit a waiver once a year.
 - o Fall 2022: September 7, 2022
 - Spring 2023: February 7, 2023 (New students only)

<u>Please Note</u>: International policies or policies from the student's home country do not qualify for a waiver.

If you take no action to either enroll in the University's Student Health Insurance Plan or seek and receive a waiver approval by the deadline, you will automatically be enrolled in the SMU plan for students and the premium charges will be applied to your account. These charges are non-refundable. Please <u>do not</u> wait be auto-enrolled as this delays your information transferring to Aetna.

If you have any questions, please contact the Insurance Office at the Student Health Center at studenthealthinsurance@smu.edu or (214) 768-3408.

INTERNATIONAL STUDENTS SOUTHERN METHODIST UNIVERSITY

ELIGIBILITY

All international students who are enrolled in one (1) or more credit hours are required to maintain the Student Health Insurance Plan as a condition of enrollment. International students must enroll in the Student Health Insurance Plan unless they have a special waiver personally granted by the Student Health Center (SHC) staff. To view the requirements necessary to apply for a waiver, please go to smu.edu/healthinsurance.

After enrolling for classes, international students must elect coverage online by going to the student center component of MY.SMU.EDU and selecting the "Health Insurance" button. Students only have to enroll or waive one time per school year. The semi-annual premium will be charged to the student's SMU student account after they enroll in MY.SMU.EDU. Any student not enrolled by the deadline will automatically be enrolled and the premium charged to their SMU student account. No changes will be made to a student's SMU account after September 7, 2022 for Fall 2022. For more detailed information, including a "Frequently Asked Questions" page, please visit smu.edu/healthinsurance.

Eligible dependents of those enrolled in the plan may participate in the plan on a voluntary basis.

For more information and to view the complete brochure online for full details of participation in the plan, please visit smu.myahpcare.com.

ADDITIONAL BENEFITS

- · Access to Telehealth
- Coverage when traveling
- Academic Emergency Services*

*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LLC, separate and independent companies from Academic HealthPlans.



AHP (22) Aetna-SMU



Southern Methodist University 2022-2023

This flyer is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits and programs and does not constitute a contract. Covered Medical Expenses are subject to plan maximums, limitations, and exclusions as described in the Policy. The PPO network is Aetna PPO.

Student Health Center: There is no copayment for routine office visits. The Deductible is waived, covered expenses will be payable at 80% for insured students. Adult immunizations covered at the SHC include TB skin test, MMR#1, MMR#2, Tdap, Td and meningitis.

At SMU SHC: Prescriptions are payable at 100% after a \$15 Copayment for each Generic Drug and \$40 Copayment for each Brand Name Drug.

BENEFIT MAXIMUMS	& DEDUCTIBLES	IN-NETWORK PROVIDER	OUT-OF-NETWORK PROVIDER		
Benefit Maximum		Unlimited			
Individual Deductible Per Insured Person, per Policy Year		\$ 400	\$ 1,200		
Family Deductible For all Insureds in a Family, per Po	olicy Year	\$ 1,200	\$ 3,600		
Individual Out-of-Pocket Maximum Per Insured Person, per Policy Year		\$ 7,900	\$ 10,000		
Family Out-of-Pocket Maximum For all Insureds in a Family, per Policy Year		\$ 12,700	\$ 37,500		
BENEFITS (deductible appl	lies unless otherwise stated below)				
IN-NETWORK PROVIDER Payments are based on the Negotiated Charge	OUT-OF-NETWORK PROVIDER Payments are based on the Recognized Charge	IN-NETWORK PROVIDER Payments are based on the Negotiated Charge	OUT-OF-NETWORK PROVIDER Payments are based on the Recognized Charge		
Hospital Room and Board Expense		Prescription Drugs (deductible waived)			
80% per admission	60% per admission	At pharmacies contracting with Aetna	At pharmacies contracting with Aetna		
Inpatient/Outpatient Surgery		100% after a	60% after a		
80%	60%	Preferred Generic Drug:	Preferred Generic Drug:		
Physician and specialist services		\$25 Copayment	\$25 Copayment		
100% after a \$30 Copayment per visit	60% per visit	Preferred Brand-Name Drug: \$50 Copayment	Preferred Brand-Name Drug \$50 Copayment		
(deductible waived)		Non-Preferred	Non-Preferred		
Diagnostic Testing	COO/ many init	Brand-Name Drug: \$75 Copayment	Brand-Name Drug: \$75 Copayment		
80% per visit	60% per visit				
Hospital Emergency Room (c		Specialty Drug: \$75 Copayment	Specialty Drug: \$75 Copayment		
80% after a \$250 Copayment per visit	80% after a \$250 Copayment per visit	Ψ10 σοραγιτοτία	4.0 dopayment		

COVERAGE PERIOD & COST

For more information, please visit healthcare.gov/preventive-care-benefits

60% per visit

Preventive Care Services

100% per visit

(deductible waived)

Fall	08/01/22 - 12/31/22	Spring/Summer	01/01/23 - 07/31/23	Summer	05/01/23 - 07/31/23
Open Enrollment	04/12/22 - 09/07/22	Open Enrollment	11/01/22 - 02/07/23	Open Enrollment	N/A
Waiver Deadline	09/07/22	Waiver Deadline	02/07/23	Waiver Deadline	N/A
Student	\$1,828.00	Student	\$1,828.00	Student	\$922.00
Spouse	\$1,828.00	Spouse	\$1,828.00	Spouse	\$922.00
Each Child ¹	\$1,828.00	Each Child ¹	\$1,828.00	Each Child ¹	\$922.00

These rates include an administrative fee.

¹Coverage for two or more children is calculated at the child rate times two (2).