Dear Domestic SMU Students,

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

For the 2021-2022 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 Domestic students, both undergraduate and graduate, taking nine (9) or more credit hours to have health insurance through either an individual/family plan or the University offered plan. SMU's mandatory policy requires those students with the enrollment status mentioned to provide documentation of current insurance coverage or to enroll in the Student Health Insurance Plan (SHIP) by the deadline date each term. Students will do so, after they have enrolled for classes, by selecting the 'Student Health Insurance' tile in the 'Student Center' component of My.SMU.edu. Select "Mandatory Health Insurance" and enter your Date of Birth and Social Security Number. Select the Enroll button to enroll in the plan, or the Waive button to complete a waiver form (Documentation must be done in My.SMU.edu to be considered for a waiver. Any other documentation will not be accepted. (i.e. providing documentation on a Health History form, by fax, etc.)) You should enroll in the Plan after you have selected your classes and before the waiver deadline.

For domestic students maintaining their own private coverage the student must waive SHIP coverage in order to avoid automatic enrollment into SHIP.

- Semi-annual premium charge of \$1,739.00 applied to the student's University account
- The deadline for Fall 2021 is September 7, 2021.
- The deadline for Spring 2022 is February 7, 2022.

No reversals of premiums or changes to insurance can be made after the deadline each semester.

For more information and instructions on how to WAIVE or ELECT coverage please visit smu.edu/healthinsurance.

The Student Health Center files claims for the Student Health Insurance Plan only. Students who have other insurance will be provided an itemized receipt upon request at the time of service so that they may file the visit with their insurance company on their own. This receipt is adequate to file with insurance companies for reimbursement.

Health insurance is separate from the student health center fees and is paid for independently.

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

ELIGIBILITY

All domestic students taking nine (9) or more credit hours are required to maintain health insurance as a condition of enrollment. A domestic student may waive out of the policy by documenting current, comparable U.S. insurance coverage in the Student Center component of MY.SMU.EDU before the deadline each semester. Domestic students not waiving are required to enroll in the Student Health Insurance Plan. To complete the waiver or elect coverage, go to the Student Center component of MY.SMU.EDU. If you choose not to elect coverage, or do not waive coverage, by the waiver deadline, the premium will be charged to your SMU student account. No changes will be made to a student's SMU account after September 7, 2021 for Fall 2021 or February 7, 2022 for Spring 2022. For more detailed information, please visit smu.edu/healthinsurance.

All domestic students taking between four (4) and eight (8) credit hours are eligible to enroll on a voluntary basis during the open enrollment period each semester and have their premiums billed to their SMU Student Accounts. Students taking eight (8) hours or less will not be automatically enrolled.

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 on-line for full details of participation in the plan, please visit smu.myahpcare.com.

ADDITIONAL BENEFITS

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



Southern Methodist University 2021-2022

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	NETWORK PROVIDER	NON-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 Policy 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 applies unless otherwise stated below)

NETWORK PROVIDER
Payments are based on the Negotiated Charge
Payments are based on the Recognized Charge

Hospital Room and Board Expense

80% per admission 60% per admission

Inpatient/Outpatient Surgery

80% 60%

Physician and specialist services

100% after a \$30 60% per visit

Copayment per visit (deductible waived)

Diagnostic Testing

80% per visit 60% per visit

Hospital Emergency Room (deductible waived)

80% after a \$250 80% after a \$250 Copayment per visit Copayment per visit

Preventive Care Services

For more information, please visit $\underline{\text{healthcare.gov/preventive-care-benefits/}}$

100% per visit 60% per visit

(deductible waived)

NETWORK PROVIDER
Payments are based on the Negotiated Charge

Prescription Drugs
At pharmacies contracting with Aetna

100% after a

\$25 Copayment per Preferred

Generic Drug

\$50 Copayment per

Preferred Brand-Name Drug

\$75 Copayment per

Non-Preferred Brand-Name

Drug

\$75 Copayment per

Specialty Drug

NON-NETWORK PROVIDER
Payments are based on the Recognized Charge

60% after a

\$25 Copayment per Preferred Generic Drug

\$50 Copayment per

Preferred Brand-Name Drug

\$75 Copayment per

Non-Preferred Brand-Name

Drug

\$75 Copayment per

Specialty Drug

COVERAGE PERIOD & COST

Fall	08/01/21 - 12/31/21	Spring/Summer	01/01/22 - 07/31/22	Summer	05/01/22 - 07/31/22
Open Enrollment	04/01/21 - 09/07/21	Open Enrollment	11/01/21 - 02/07/22	Open Enrollment	03/29/22 - 07/02/22
Waiver Deadline	09/07/21	Waiver Deadline	02/07/22	Waiver Deadline	N/A
Student	\$1,739.00	Student	\$1,739.00	Student	\$877.00
Spouse	\$1,739.00	Spouse	\$1,739.00	Spouse	\$877.00
Each Child ¹	\$1,739.00	Each Child ¹	\$1,739.00	Each Child ¹	\$877.00

These rates include an administrative fee.







