

# Snapshot

2020–2021

## THE CLAREMONT COLLEGES STUDENT HEALTH INSURANCE PLAN (SHIP)

### Rates and Important Dates

Rates include insurance premium and administrative fees.

	Undergraduate Student	Spouse/ Domestic Partner	One Child	Two or More Children
<b>Annual</b> 08/30/2020* to 08/29/2021	\$ 2,655.00	\$ 2,655.00	\$ 2,655.00	\$ 5,310.00
<b>Fall</b> 08/30/2020* to 01/03/2021	\$ 930.00	\$ 930.00	\$ 930.00	\$ 1,860.00
<b>Spring/Summer</b> 01/04/2021 to 08/29/2021	\$ 1,735.00	\$ 1,735.00	\$ 1,735.00	\$ 3,470.00
<b>Summer</b> 05/15/2021 to 08/29/2021	\$ 785.00	\$ 785.00	\$ 785.00	\$ 1,570.00

\* Coverage for new students will be effective 08/01/2020.

### Referral Requirement

A Student Health Services (SHS) referral is required for non-emergency care within a 25-mile radius from campus, unless SHS is closed or for certain preventive care. See [www.4studenthealth.com](http://www.4studenthealth.com) for further details.

### Aetna Network

NOTE: Aetna network providers MUST be used at all times, except for emergency services (emergency room, ambulance).

**Coinsurance** is the cost sharing between what the insurance pays and what you pay. This insurance plan pays 80% when using Aetna OA Elect Choice EPO providers. Non-Preferred Providers are not covered.

### Benefits

	Student Health Services You Will Pay:	Aetna OA Elect Choice EPO Preferred Provider You Will Pay:	Non-Preferred Provider
<b>Deductible</b>	Waived	\$500 per person, per policy year	Not covered
<b>Office Visit</b>	\$0	20%, after \$20 copay per visit	Not covered
<b>Urgent Care</b>	N/A	20%, after \$20 copay per visit	Not covered
<b>Emergency Room</b>	N/A	20%, after \$100 copay per visit (waived if admitted)	\$100 copay per visit (waived if admitted)
<b>Prescription Drugs</b>	N/A	\$20 copay generic \$40 copay preferred brand \$60 copay non-preferred brand (deductible does not apply)	Not covered
<b>Out-of-Pocket Maximum</b>	N/A	\$7,350 per person (\$14,700 per family) per policy year	N/A

THE AETNA NAME AND LOGO ARE REGISTERED TRADEMARKS.

If there are any discrepancies between this document and the Plan Design and Benefits Summary, the Plan Design and Benefits Summary will govern.



### Questions

**Enrollment & Waivers**  
Relation Insurance Services  
**(800) 537-1777**

**Benefits & Claims**  
Aetna Customer Service  
**(877) 480-4161**

**Plan Materials & Information**  
[www.4studenthealth.com](http://www.4studenthealth.com)  
(select your College from the drop-down list)

### Insurance ID Card

Download your ID card from  
[www.aetnastudenthealth.com](http://www.aetnastudenthealth.com).

**Carry your ID card with you at all times!**

### Getting Care

To locate a provider in the  
**Aetna OA Elect Choice EPO Network**, visit  
[www.aetna.com/docfind/custom/studenthealth](http://www.aetna.com/docfind/custom/studenthealth).

### Prescription Drugs

Always use an Aetna pharmacy.  
To locate a pharmacy, visit  
[www.aetnastudenthealth.com](http://www.aetnastudenthealth.com) or  
call **(888) 792-3862**.

*Revised April 12, 2020 9:18 AM*



Relation Insurance Services  
CA License No. 0G55426