

## FONTBONNE UNIVERSITY INTERNATIONAL STUDENT INSURANCE PLAN

### Rates & Important Dates

Rates are effective 07/31/2021 to 07/30/2022. Rates include medical insurance premium and administrative fees.

	STUDENT	SPOUSE/ DOMESTIC PARTNER	EACH CHILD
<b>Annual</b> 07/31/2021 to 07/30/2022	\$ 1,324.00	\$ 4,067.00	\$ 1,684.00
<b>Fall</b> 07/31/2021 to 12/31/2021	\$ 572.58	\$ 1,695.08	\$ 702.17
<b>Spring / Summer</b> 01/01/2022 to 07/30/2022	\$ 751.42	\$ 2,371.92	\$ 981.87
<b>Summer</b> 06/01/2022 to 07/30/2022	\$ 215.84	\$ 678.84	\$ 281.66



### What's Covered (Treatment must be Medically Necessary)

- Physician visits
- Specific emergency benefit expenses
- Surgery, in- and outpatient
- Tests, procedures, and lab services, such as X-rays
- Physical therapy, chiropractic care, and acupuncture (Inpatient: \$1,000 maximum; Outpatient: \$50 per visit maximum; up to 20 visits per policy term)
- Maternity and prenatal care
- Prescription drugs
- ICS Sports (\$5,000 maximum)

**Limitations and exclusions may apply.** Please see the Plan Summary for more details.

**Coinsurance** is the cost sharing between what the insurance pays and what you pay. This insurance plan pays 90% of the Preferred Allowance (PA) when you use **PHCS / MultiPlan PPO** providers, and 70% of Usual, Reasonable, and Customary (URC) Charges when you use out-of-network providers.

### Benefits

	PHCS / MULTIPLAN PPO PROVIDER YOU WILL PAY:	OUT-OF-NETWORK PROVIDER YOU WILL PAY AT LEAST:*
<b>Deductible</b> (Certain benefit deductibles may be applicable.)	\$0 per Policy Term	
<b>Outpatient Office Visit or Urgent Care Visit</b>	10%, after \$20 copay per visit	30%
<b>Emergency Room Benefit</b>	10%, after \$150 copay per visit (copay waived if admitted)	30%, after \$150 deductible per visit (deductible waived if admitted)
<b>Prescription Drugs</b>	\$20 copay Generic \$40 copay Preferred Brand \$60 copay Non-preferred Brand	Not covered

\* Using out-of-network providers will cost you more money! Coinsurance is payable for Usual, Reasonable, and Customary (URC) Charges, the most common charge for similar professional services, drugs, procedures, devices, supplies, or treatment within the area in which the charge is incurred. Some out-of-network providers charge more than URC and you will be responsible for these excess amounts over the listed coinsurance.

### Questions



**Enrollment & Eligibility**  
Relation Insurance Services  
(800) 955-1991

**Benefits**  
Administrative Concepts, Inc. (ACI)  
(800) 476-4802

**Plan Materials & Information**  
[www.4studenthealth.com/fontbonne](http://www.4studenthealth.com/fontbonne)

### Insurance ID Card



You will receive your permanent insurance ID card in the mail after the start of your first term of coverage. You may also download your ID card by visiting [www.4studenthealth.com/fontbonne](http://www.4studenthealth.com/fontbonne). For help, contact Relation at (800) 955-1991.

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

### Getting Care



To locate a provider in the **PHCS / MultiPlan PPO** Network, visit [www.multiplan.com](http://www.multiplan.com) or contact (800) 678-7427.

### Prescription Drugs



Always use an **Express Scripts** pharmacy. To locate a pharmacy, visit [www.express-scripts.com](http://www.express-scripts.com) or call (800) 400-0136.

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