

Utica University

2025 - 2026

Student Health Insurance

Who is eligible?

All full-time undergraduate students enrolled in 12 or more credit hours (including accelerated nursing students), and graduate students enrolled in 6 or more credit hours are required to have health insurance. If you would like to waive out of the Student Health Insurance Program you must provide proof of adequate coverage. If you do not waive out of the plan, the charges will remain on your tuition bill and payment will be expected by the due date.

Please note that Medicaid Plans that are based outside of New York will not be accepted.

To Enroll or Waive the Student Health Insurance Program, please visit www.haylor.com/utica

Fall deadline: October 3, 2025

Spring deadline: February 13, 2026

Summer deadline: June 5, 2026

Fall rate: August 1, 2025 - December 31, 2025

\$933.10

Spring/Summer Rate: January 1, 2026 - July 31, 2026

\$1,292.90

ABSN Students

Fall rate: August 1, 2025 - December 31, 2025

\$933.10

Spring Rate: January 1, 2026 - April 30, 2026

\$731.83

Summer Rate: May 1, 2026 - July 31, 2026

\$561.07

Rates pending state approval

For more details regarding the Utica University Student Health Insurance Program please visit:

www.haylor.com/utica

833.401.6010

student@haylor.com



What does the plan feature?

The Student Health Insurance Plan offers you:

- Affordable, comprehensive insurance benefits
- ACA Compliant Plan (Patient Protection and Affordable Care Act)
- Access to a nationwide network of healthcare providers including primary care, specialists and mental health services at:
<https://connect.werally.com>

To create or login to your UHC student count, please visit www.uhcsr.com/myaccount or download UHCSR's Mobile App from your smartphone available on the App Store or Google Play

To contact the carrier:

customerservice@uhcsr.com

800.767.0700



UnitedHealthcare
Student Resources

This plan is underwritten by United Health Care.

For further details of the coverage including costs, benefits, exclusions, any reductions or limitations and the terms under which the policy may be continued in force, please refer to the Certificate, available at:

www.haylor.com/utica

2025-2026 Utica University Summary of Benefits

Benefit	In-Network	Out-of-Network
Deductible	\$500	\$1,000
Coinurance	20% Coinurance	40% Coinurance
Out-of-pocket Maximum	\$5,000	\$10,000
Office Visit	20% Coinurance after deductible	40% Coinurance after deductible
Specialist Copay	20% Coinurance after deductible	40% Coinurance after deductible
Preventative Care	Covered in full	0% of Allowed amount after deductible
Urgent Care Center	20% Coinurance after deductible	40% Coinurance after deductible
Emergency Department	\$500 Copay then 20% coinsurance after deductible	40% Coinurance after deductible
Prescription Drug Coverage - 30 Day Supply	Tier 1: \$20 Copayment Tier 2: \$40 Copayment Tier 3: \$80 Copayment	Not covered

Annual Deductible: An amount you could owe during a coverage period (usually one year) for covered health care services before your plan begins to pay. An overall deductible applies to all or almost all covered items and services.

Annual Out of Pocket Maximum: The most you could pay during a coverage period (usually one year) for your share of the costs of covered services. After you meet this limit, the plan will usually pay 100% of the allowed amount.

Copay: A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

Coinurance: Your share of the costs of a covered health care service, calculated as a percentage (for example, 20%) of the allowed amount for the service. You generally pay coinsurance **plus** any deductibles you owe.

The 2025-2026 benefits listed above are a brief summary of the Utica University Student Health Insurance Plan design. Additional Schedule of Medical Expense Benefits/Limitations is specified in the Overview Policy.