

Utica University

2026 - 2027

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 2, 2026

Spring deadline: February 13, 2027

Summer deadline: June 4, 2027

Fall rate: August 1, 2026 - December 31, 2026
\$917.59

Spring/Summer Rate: January 1, 2027 - July 31, 2027
\$1,271.41

ABSN Students

Fall rate: August 1, 2026 - December 31, 2026
\$917.59

Spring Rate: January 1, 2027 - April 30, 2027
\$719.67

Summer Rate: May 1, 2027 - July 31, 2027
\$551.74

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



This plan is underwritten by United Healthcare. 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 for force, please refer to the Certificate, available at:
www.haylor.com/utica

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Summary of Benefits

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

Disclaimer: This summary is intended to provide an overview of benefits only and does not include all coverage details, limitations, or exclusions. It is not a contract of insurance. For complete benefit information and coverage provisions, please refer to the official plan documents. In the event of a conflict, the Certificate of Coverage and policy documents will govern.

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.

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.

Coinsurance: 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 2026 - 2027 benefits listed above are a summary of the Utica University Student Health Insurance Plan design. Additional Schedule of Medical Expense Benefits/Limitations is specified in the Overview Policy.