



SUNY ONEONTA PLAN HIGHLIGHTS

2022-23 STUDENT HEALTH INSURANCE PLAN

Who is eligible?

All registered full-time students are required to carry health insurance. Students who are currently insured under family or private medical insurance may waive the student health insurance plan. Waivers must be processed prior to the deadline of:

Annual waiver deadline: September 29, 2022
New students beginning in the spring 2023 will have a waiver deadline: February 16, 2023

| | |
|---------------------------------------|-------------------|
| Annual Semester | |
| August 10, 2022-August 9, 2023 | \$3,188.00 |
| Spring Semester | |
| January 4, 2023-August 9, 2023 | \$1,973.00 |

Part-time students coverage is also available to all eligible students. Visit our website below for complete details.

For more details regarding the SUNY Oneonta Student Health Insurance Program please visit:

www.haylor.com/oneonta
866-535-0456
student@haylor.com

SUNY ONEONTA

What does the plan feature?

The Student Health Insurance Plan offers you:

- Affordable, comprehensive insurance benefits
- This plan is ACA Compliant (Affordable Care Act)
- Access to a nationwide network of health care professionals, including primary care, specialists and mental health services.

www.uhcsr.com



**PLEASE NOTE: Voluntary enrollment begins
August 1, 2022**

For further details of the coverage including cost, benefits, exclusions, and 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/sunyoneonta. Please see page 2 for summary of benefits.



Chart below based upon in-network pricing

| | |
|--|---|
| Deductible- Individual | \$250 |
| Out-of-Pocket Maximum- Individual | \$8,150 |
| Office Visits- Primary Care & Specialists | \$30 copayment, then 20% coinsurance |
| Preventive Care Services | Covered in full |
| Emergency Ambulance Transportation (not SUA) | 20% coinsurance |
| Medical Emergency (Emergency Room) | \$50 copayment |
| Urgent Care Services | \$30 copayment, then 20% coinsurance |
| Inpatient/Outpatient Hospital Surgery | 20% coinsurance |
| Anesthesia Services | 0% coinsurance |
| Mental Health Care Services- Inpatient (for a continuous confinement when in a hospital) | 20% coinsurance per admission |
| Mental Health Care Services- Outpatient | \$30 copayment, then 20% coinsurance |
| Inpatient Substance Use Services (for a continuous confinement when in a hospital) | 20% coinsurance per admission |
| Outpatient Substance Use Services | \$30 copayment, then 20% coinsurance |
| Allergy Testing and Treatment- Performed in PCP & Specialist Office | \$30 copayment, then 20% coinsurance |
| Imaging Services | 20% coinsurance |
| Diabetic Equipment and Supplies | \$20 copayment |
| Laboratory Procedures- Performed in a PCP Office, Specialist Office, & Performed as Outpatient Hospital Services | 20% coinsurance |
| Rehabilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) | \$20 copayment, then 20% coinsurance |
| Chiropractic Services | \$30 copayment, then 20% coinsurance |
| Maternity Prenatal Care (Prenatal Care provided in accordance with the comprehensive supported by USPSTF and HRSA) | Covered in full |
| Maternity Care – Inpatient Hospital Services and Birthing Center | 20% coinsurance per admission |
| Maternity Care- Physician and Nurse Midwife Services for Delivery | 20% coinsurance per admission |
| Postnatal Care | \$30 copayment, then 20% coinsurance |
| Prescription Drugs (& Insulin) | Copayment: \$20 generic, \$50 brand name, & \$80 non-formulary brands |

The benefits listed above are a brief summary of the Student Health Insurance Plan design. Additional Schedule of Medical Expense Benefits/Limitations are specified in the full master policy document.

Out of network pricing available by reviewing full master policy document