# SUNY ESF

2023 - 2024 Student Health Insurance

## Who is eligible?

All full time domestic students are eligible to participate in the Student Health Insurance Plan. Students have the opportunity to enroll in this voluntary program and may purchase it by the enrollment deadline of September 30, 2023 by visiting https://www.haylor.com/esf. If a domestic student wants to enroll in the health plan for spring only, the deadline to enroll is February 15, 2024.

Fall deadline: September 30, 2023 Spring deadline: February 15, 2024

#### Annual rate:

August 15, 2023 - August 14, 2024 \$3,018.00

**Spring Rate**:

January 15, 2024 - August 14, 2024 \$1,756.53

Rates pending state approval

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

> www.haylor.com/suny-esf 866.535.0456 student@haylor.com





State University of New York College of Environmental Science and Forestry

### 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 ccount, please visit myaccount.uhcsr.com or download UHCSR's Mobile App from your smartphone available on the App Store or Google Play



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 overview policy.

# 2023-2024 SUNY ESF Summary of Benefits

Benefit	In-Network	Out-of-Network
Deductible	\$250	\$500
Coinsurance	20% Coinsurance	30% Coinsurance
Out-of-pocket Maximum	\$8,150	\$16,300
Office Visit	\$30 Copay, then 20% coinsurance	40% coinsurance after deductible
Specialist Copay	\$30 Copay, then 20% coinsurance	40% coinsurance after deductible
Preventative Care	Covered in full	30% Coinsurance after deductible
Urgent Care Center	\$30 Copay, then 20% coinsurance	\$30 Copay then 40% coinsurance
Emergency Department	\$50 Copayment	\$50 Copayment
Prescription Drug Coverage - 30 Day Supply	Tier 1: \$20 Copayment Tier 2: \$50 Copayment Tier 3: \$80 Copayment	Generic: \$20 Copay Brand-Name: \$50 Copay

**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.

**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.