



BROWN

# Brown University 2026-2027 Student Health Insurance [studenthealthinsuranceplan@brown.edu](mailto:studenthealthinsuranceplan@brown.edu)

## Who is eligible?

All full-time registered students & part-time undergraduate and graduate level students, and guest students from other institutions, are required to participate in Brown University's student health insurance program, unless an annual waiver has been submitted and approved. **Action must be taken each year.**

## How do I Waive the Fee?

To waive the student insurance requirement, students must submit a waiver application online at [www.haylor.com/brown](http://www.haylor.com/brown) before the waiver deadline:

**Fall waiver portal:** June 8th, 2026 – August 31, 2026

**Spring waiver portal:** November 23, 2026 – January 25, 2027  
(For newly enrolled spring students only)

Annual Coverage: August 15, 2026 - August 14, 2027  
\$5,283.00

Spring/Summer: January 1, 2027 - August 14, 2027  
\$3,270.00

## Financial Aid/Scholarship

For undergraduate students, who are receiving a university need-based scholarship and do not have comparable coverage or current insurance, Brown will provide additional scholarship funds to cover the cost of the Student Health Insurance Plan.

*\* To be eligible for this scholarship, the student must submit a waiver application and receive a denial.*

Graduate and Medical students should reach out to their respective financial aid offices to inquire about funding or financing options.

For more details regarding the Brown University Student Health Insurance Program please visit: [www.haylor.com/brown](http://www.haylor.com/brown)

Phone: 844.312.8024 Email: [brownstudent@haylor.com](mailto:brownstudent@haylor.com)



## What does the plan feature?

- Unlimited coverage for primary care providers, specialists, emergency visits and hospitals
- Unlimited coverage for preventative care including annual physicals, GYN exams, routine screenings and immunizations
- Prescription Drug Coverage:
  - \$15 copay for Tier 1
  - \$30 copay for Tier 2
  - \$50 copay for Tier 3
- Unlimited coverage for mental health
- Evacuation and Repatriation Services
- Tel-A-Doc Service

Contact United Healthcare Student Resources at:

[customerservice@uhcsr.com](mailto:customerservice@uhcsr.com)

# 800.767.0700

Once enrolled, use the QR Code to create a UHCSR account to view benefit details, download your ID card, find a provider and submit claims online:



Dependent coverage is available to all eligible students that enroll in the Student Health Insurance Plan. Please refer to the Haylor landing page for more information.

## **DENTAL & VISION COVERAGE AVAILABLE:**

Students also have the option to voluntarily enroll onto dental or vision through Delta Dental.

Enroll at: [www.haylor.com/brown](http://www.haylor.com/brown)

*\* The student health plan provides dental & vision coverage until age 19. The dental & vision coverage will end on the last day of the month when they turn 19 years old.*

For further details of 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 of Coverage.

# 2026-2027 Brown University Summary of Benefits

Benefit	In-Network	Out-of-Network
<b>Deductible</b>	\$300	\$300
<b>Coinsurance</b>	100% of allowed amount	70% of allowed amount
<b>Out-of-pocket Maximum</b>	\$8,100	\$8,100
<b>Preventative Care</b>	100% of allowed amount	70% of allowed amount after deductible
<b>Physician's Visit Copay</b>	\$15 copay, 100% of allowed amount, deductible may apply	\$15 copay, 70% of allowed amount, deductible may apply
<b>Day Surgery</b>	\$100 copay, 100% of allowed amount, deductible may apply	\$100 copay, 70% of allowed amount, deductible may apply
<b>Room and Board Expense</b>	\$100 copay, 100% of allowed amount not subject to deductible	\$100 copay, 70% of allowed amount not subject to deductible
<b>Medical Emergency</b>	\$100 copay, 100% of allowed amount, deductible may apply	\$100 copay, 100% of allowed amount, deductible may apply
<b>Urgent Care Center</b>	\$15 copay, 100% of allowed amount, deductible may apply	\$15 copay, 70% of allowed amount, deductible may apply
<b>Prescription Drug Coverage - 30 Day Supply</b>	Tier 1: \$15 Copayment Tier 2: \$30 Copayment Tier 3: \$50 Copayment	Tier 1: \$15 Copay for generic Tier 2: \$30 Copay for brand name Tier 3: 70% of billed charge

**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.

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