

SUNY Oswego

2025-2026

Student Health Insurance

Who is eligible?

The SUNY Oswego Health Insurance Policy is mandatory for full-time registered students, including in-person and online, unless they submit an online waiver and provide proof of alternate equal or better US based coverage. In order to waive the insurance, students must fill out a waiver application online at www.haylor.com/suny-oswego by the waiver deadline date.

Fall deadline: September 12, 2025

Spring deadline: February 13, 2026

Annual:	August 1, 2025 - July 31, 2026 \$3,835.00
Fall:	August 1, 2025 - January 31, 2026 \$1,917.50
Spring:	February 1, 2026 - July 31, 2026 \$1,917.50

Rates pending state approval

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

www.haylor.com/suny-oswego

833.401.3365

student@haylor.com



What does the plan feature?

- Unlimited coverage for primary care providers, specialists, emergency visits and hospitals
- Unlimited coverage for preventative care, GYN exams, routine screenings and immunizations
- Prescription Drug Coverage
- Unlimited coverage for mental health
- Evacuation and Repatriation Services
- Tel-A-Doc Service

To create or login to your UHC student account, please visit <https://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:

800.767.0700

customerservice@uhcsr.com



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.

2025-2026 SUNY Oswego Summary of Benefits

Benefit	In-Network	Out-of-Network
Deductible	\$100	\$200
Coinsurance	10% Coinsurance	25% Coinsurance
Out-of-pocket Maximum	\$6,350	\$6,350
Office Visit	\$15 Copay then 10% coinsurance	\$15 Copay then 25% coinsurance
Specialist Copay	\$15 Copay then 10% coinsurance	\$15 Copay then 25% coinsurance
Preventative Care	Covered in full	25% Coinsurance
Urgent Care Center	10% Coinsurance	25% Coinsurance
Emergency Department	10% Coinsurance	25% Coinsurance
Prescription Drug Coverage- 30 Day Supply	Tier 1: \$10 Copayment Tier 2: \$10 Copayment Tier 3: \$10 Copayment not subject to deductible	Tier 1: \$10 Copayment Tier 2: \$10 Copayment Tier 3: \$10 Copayment not subject to deductible

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, \$75) 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 2025-2026 benefits listed above are a brief summary of the SUNY Oswego Student Health Insurance Plan design. Additional Schedule of Medical Expense Benefits/Limitations is specified in the Overview Policy.