

WHEATON COLLEGE SCHEDULE OF MEDICAL BENEFITS 2008-2009

Up to \$50,000 maximum benefit will be paid as specified below per Injury or Sickness.

The plan provides benefits for eligible expenses incurred by an Insured person within 60 days of a Loss due to a covered Injury or Sickness.

Services Provided at the Student Health Center are considered In-Network.

Annual Deductible Per Person: \$150 In Network and Out of Network.

<i>INPATIENT EXPENSE</i>	<u>IN NETWORK PROVIDERS</u>	<u>OUT OF NETWORK</u>
Hospital Room and Board Expense: When Your Injury or Sickness requires Hospital confinement, We will pay the eligible Hospital room and board Expense not to exceed the semi-private rate.	90 % PPO Allowance	70% of Usual & Customary Charge
Hospital Miscellaneous Expense: We will pay eligible expenses incurred during a Hospital confinement for anesthesia, operating room, laboratory tests, x-rays, oxygen, drugs, medicines, dressings and other necessary non-room and board Expenses.	90% PPO Allowance	70% of Usual & Customary Charge
Surgery Expense: When Your Injury or Sickness requires surgery, We will pay the eligible expense based on the Ingenix survey of surgical fees valued at the 80 th percentile. Only one surgical procedure will be covered when multiple procedures are performed, unless deemed necessary by the attending physician up to	90% PPO Allowance	70% of Usual & Customary Charge
Anesthetist Services: If the surgery requires the services of an anesthetist, who is not employed or retained by the Hospital in which the operation is performed, We will pay the Loss incurred up to	90% PPO Allowance	70% of Usual & Customary Charge
Assistant Surgeon: If the surgery requires services of an assistant surgeon, We will pay the Loss incurred up to	90% PPO Allowance	70% of Usual & Customary Charge
In-Hospital Physician Visits Expense: If, while confined to a Hospital, Your Accident or Sickness requires the services of a Physician, We will pay the eligible expense up to	90% PPO Allowance	70% of Usual & Customary Charge
Registered Nurse Expense: If, while confined in a Hospital, Your Injury or Sickness requires the services of an R.N. or licensed practical nurse, We will pay the eligible expense up to	90% PPO Allowance	70% of Usual & Customary Charge
<i>OUTPATIENT EXPENSE</i>		
Hospital Miscellaneous: We will pay the eligible Expenses incurred by You as an outpatient for day surgery for anesthesia, operating room, laboratory test, x-rays, oxygen, drugs, medicines, dressings, and other necessary non-room and board Expenses up to	90% PPO Allowance	70% of Usual & Customary Charge
Surgery: When Your Sickness or Injury requires surgery, We will pay the eligible Expense based on the Ingenix survey of surgical fees valued at the 80 th percentile. Only one surgical procedure will be covered when multiple procedures are performed, unless deemed necessary by the attending physician up to	90% PPO Allowance	70% of Usual & Customary Charge
Anesthetist Services: If the surgery requires the services of an anesthetist, who is not employed or retained by the Hospital in which the operation is performed, We pay the Loss incurred up to	90% PPO Allowance	70% of Usual & Customary Charge
Assistant Surgeon: If the surgery requires services of an assistant surgeon, We will pay the Loss incurred up to	90% PPO Allowance	70% of Usual & Customary Charge
Physician's Visits Expense: If Your Injury or Sickness requires the services of a Physician, while not confined to a Hospital, We will pay the eligible visits expense up to	90% PPO Allowance, after a \$20 co-pay	70% of Usual & Customary Charge
Ambulance: When Your Injury or Sickness requires the use of an ambulance or air ambulance, We will pay the eligible expense up to	90% PPO Allowance	70% of Usual & Customary Charge
Diagnostic X-ray & Laboratory Expense: If Your Injury or Sickness requires diagnostic x-ray or laboratory tests, under the Physician's direction, We will pay the eligible Expense up to	90% PPO Allowance	70% of Usual & Customary Charge
Outpatient Miscellaneous Expense: If Your Injury or Sickness requires the use of an emergency room, not including medications and dispensing of drugs or supplies, We will pay the eligible expense up to	90% PPO Allowance, after a \$20 co-pay	70% of Usual & Customary Charge
Psychotherapy Expense: If, while not confined to a Hospital, You require the Services of a licensed Psychiatrist, licensed Psychologist, or licensed Counselor, We will pay the eligible Expense up to	50% PPO Allowance, after a \$20 co-pay	50% of Usual & Customary Charge
Physical Therapy/Chiropractic: (including diagnosis, evaluation, diagnostic x-ray and lab, and therapeutic modalities), Occupational Therapist, Speech Therapist, Massage Therapy by a licensed Therapist or Chiropractor, licensed Dietitian, and licensed Acupuncturist up to	90% PPO Allowance, after a \$20 co-pay 20 visit limit	70% of Usual & Customary Charge; 20 visit limit
 Serious Mental Illness will be paid the same as any other covered sickness		