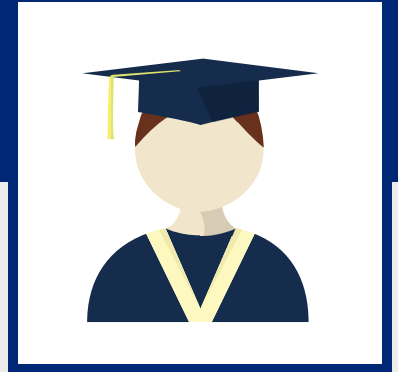


# WELLESLEY COLLEGE

2024-2025

## Student Health Insurance Plan



Per Massachusetts State Law, all students including Davis Scholars are required to enroll in the Wellesley College Student Health Insurance Plan or be covered by a health insurance plan with comparable coverage.



**Annual Premium for Coverage Effective  
08/15/2024 - 08/14/2025**

Please visit [www.universityhealthplans.com/Wellesley](http://www.universityhealthplans.com/Wellesley) for additional information.

## IMPORTANT CONSIDERATIONS

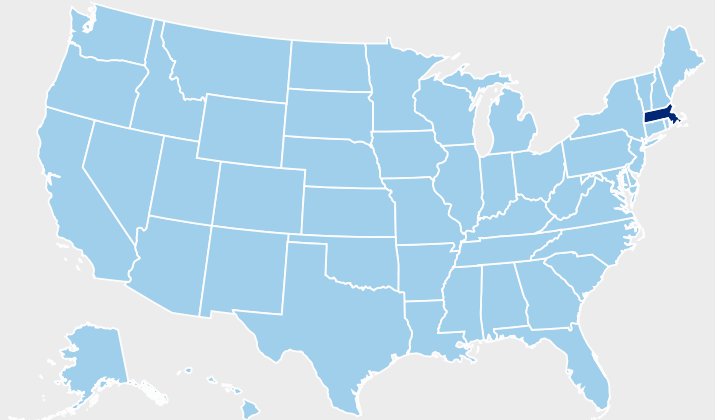
If you have your own health insurance, it is important to confirm your coverage in the Wellesley College area prior to making a decision about the Student Health Insurance Plan.

- **Do you have an out-of-state HMO, EPO or Medicaid plan?**

*Your coverage may be limited or not available while at Wellesley College. **Kaiser and Anthem BCBS are popular out of state HMO plans that do not provide coverage in MA. Students should not waive with these plans.***

- **Do you have a high deductible health plan (HDHP)?**

*You may have high out of pocket costs if/when care is utilized*



Please utilize the benefits comparison worksheet in addition to contacting your insurance company to confirm your coverage in the Wellesley College area.

For questions about the Student Health Insurance Plan, please contact University Health Plans at (833) 251-1116 or [info@univhealthplans.com](mailto:info@univhealthplans.com)

## WELLESLEY COLLEGE HEALTH INSURANCE COMPARISON WORKSHEET

**Please consider your coverage options carefully before making a decision about the Student Health Insurance Plan.**

- (1) To waive, students must have a US filed and approved, ACA (Affordable Care Act) compliant plan
- (2) Not all plans provide comprehensive coverage in Massachusetts, specifically the Wellesley College area.
- (3) While your current plan may provide comprehensive coverage close to home, plan restrictions may limit coverage for students away from home.
- (4) High deductible health plans may create a financial barrier to accessing care or result in high out of pocket costs.

**Review and complete the comparison to confirm your plan provides you with comprehensive coverage while at Wellesley College.**

- (1) Have your plan benefits available before completing the comparison or contact your insurance company's Member Services Team.
- (2) Complete the below comparison and review the benefits of both plans with a parent or guardian to confirm your coverage in Wellesley, MA.
- (3) If you have confirmed your plan is comparable to the Student Health Insurance Plan and would like to waive participation in the Student Health Insurance Plan, an online waiver form must be completed. Visit [www.universityhealthplans.com/Wellesley](http://www.universityhealthplans.com/Wellesley) to complete the insurance waiver form. Please have your insurance ID card available prior to completing the waiver form.

If you have questions about the comparison or the Student Health Insurance Plan, please contact University Health Plans at (833) 251-1116 or [info@univhealthplans.com](mailto:info@univhealthplans.com)

Plan Benefits	Current Health Insurance Plan	Wellesley College Student Health Insurance Plan
<b>Filed and Approved in the US; ACA Compliant</b>		Yes
<b>Plan Type</b>	<input type="checkbox"/> HMO <input type="checkbox"/> EPO <input type="checkbox"/> PPO <input type="checkbox"/> Out-of-State Medicaid <input type="checkbox"/> Other	<input type="checkbox"/> HMO <input type="checkbox"/> EPO <input checked="" type="checkbox"/> PPO <input type="checkbox"/> Out-of-State Medicaid <input type="checkbox"/> Other
<b>Provider Network</b> <i>Does my plan provide coverage throughout the US for emergency and non-emergency care, or is my plan limited to my home state?</i>		National
<b>Travel Assistance, Medical Evacuation and Repatriation Coverage</b>		Yes
<b>Policy Maximum</b>		Unlimited
<b>Annual Deductible (In-Network / Out-of-Network)</b> <i>Amount you pay out of pocket before your health plan contributes towards claims</i>		\$0 / \$250
<b>Out of Pocket Maximum</b> <i>Maximum dollar amount you pay out of pocket, including deductible, copays and coinsurance until your insurance company pays claims at 100%</i>		\$8,700 (student) / \$17,400 (family)
<b>Inpatient Hospitalization</b>		100% at Low Cost-Share Hospitals \$1,000 at High Cost-Share Hospitals
<b>Preventive/Routine Care</b> <i>Physical, annual exams, immunizations, etc.</i>		100%
<b>Office Visits</b> <i>Primary Care Physician(PCP)</i>		\$25 Copay
<b>Mental/Behavioral Health</b> <i>Therapy (individual or group)</i>		\$25 Copay
<b>Specialists</b> <i>(Such as Physical Therapy, Dermatologists, OB/GYN)</i>		\$25 Copay
<b>Urgent Care</b>		\$25 Copay
<b>Emergency Room</b>		\$150 Copay (copay waived if admitted)
<b>Ambulance</b>		100%
<b>X-Ray &amp; Laboratory</b>		100% at Low Cost Share Hospitals \$35 Lab copay at High Cost Share Hospitals \$100 X-ray copay at High Cost Share Hospitals
<b>High Cost Imaging</b> <i>(CT Scan, MRI, PET Scan)</i>		\$100 copay at Low Cost Share Hospitals \$550 copay at High Cost Share Hospitals
<b>Prescription Medications</b> Tier 1 / Tier 2 / Tier 3 / Tier 4 / Tier 5		\$20 / \$35 / \$55 / 30% / 30%