You first must pay an upfront deductible of $400 before the insurance will start to pay. After you pay the $400 deductible, the insurance plan will pay 80% of usual and customary benefits while you pay 20% (called coinsurance) until the insurance plan has paid $2,500 in claims during the year. After the insurance plan pays $2,500, you are then responsible for a second deductible of $5,000. After you pay the $5,000 deductible, the insurance plan will again begin to pay at 80% while you pay 20% of covered expenses. When you have paid a total of $6,350 in out-of-pocket payments (which includes the deductibles, co-insurance and pharmacy copays), the insurance plan will pay 100% of covered expenses for the remainder of the plan year.

Note: the above description is for one insured person and is for Preferred Providers. See the policy for family and Out-of-Network details. Policy year is 8/25/14 – 8/24/15.

Prescription drug benefits are not subject to the deductible and coinsurance described above. Your responsibility is a copay per prescription. These copays also apply to the $6,350 maximum out-of-pocket. So if you have pharmacy claims you will reach the out-of-pocket maximum sooner. See the policy for Prescription Drug benefits for further information.

Preventative care is covered in full without having to pay deductibles or co-insurance if received from a preferred provider. There is no insurance benefits for preventative care received from Out-of-Network providers.

All services rendered at the UAF Student Health and Counseling Center are covered at 100%.