



# **STUDENT MEDICOVER**

## **Summary of Benefits**

**23-24 Student Health Insurance Plan**

**Student Medcover Health Benefits**  
**For Ball State University**



# STUDENT MEDICOVER

DEDICATED TO  
INTERNATIONAL STUDENTS



STUDENT  
MEDICOVER  
Health Insurance

## ABOUT US

Student Medicover is the largest health insurance plan administrator and healthcare service platform for international students.

We're a team of experienced health enthusiasts who serve students with compassion, professionalism, and dedication. By partnering with UnitedHealthcare, we provide cost-effective, comprehensive insurance plans and strive to make high-quality, affordable care accessible to every international student, aiming to build a supportive, vibrant, and healthy community.

## ACHIEVEMENT



**120K+**

INSURED NUMBER



**350K+**

INTERNATIONAL STUDENTS



**889**

UNIVERSITIES



**43+**

COUNTRIES



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# Student Medicover

## 2023-2024 STUDENT HEALTH INSURANCE PLAN

Designed Exclusively for International Students

Underwritten by: H&W Indemnity (SPC), Ltd. for and on behalf of Student Resources SP A UnitedHealth Group Company

Administered by:

UnitedHealthcare StudentResources

### Introduction

This plan is a preferred provider organization or "PPO" plan. It provides a higher level of coverage when Covered Medical Expenses are received from healthcare providers who are part of the plan's network of "Preferred Providers." The plan also provides coverage when Covered Medical Expenses are obtained from healthcare providers who are not Preferred Providers, known as " Out-of-Network Providers." However, a lower level of coverage may be provided when care is received from Out-of-Network Providers and the Insured Person may be responsible for paying a greater portion of the cost. If the Covered Medical Expense is incurred for Emergency Services when due to a Medical Emergency Services, benefits will be paid at the Preferred Provider level of benefits.

### Who is Eligible?

International students or other persons with a current passport who: 1) are engaged in educational activities; 2) are temporarily located outside his/her home country as a non-resident alien; 3) have not obtained permanent residency status in the U.S.; and 4) are enrolled in an associate, bachelor, master or Ph.D. degree program at a university or other educational institution, with no less than 6 credit hours (unless such school's full-time status requires less credited hours or if the student is graduating at the end of the term for which coverage is purchased); Visiting Scholars, Optional Practical Training Students and formal English as a Second Language program students with an F-1 or J1 visa are eligible to enroll in this insurance Plan.

### 23-24 Academic Year Coverage and Rates

\*PRICE PER 30 DAYS

ALL PREMIUM APPLY TO STUDENT AGE UNDER 25

| SUPREME | ELITE   | PRIME 100 | PRIME 500 | BASIC  |
|---------|---------|-----------|-----------|--------|
| \$193.2 | \$180.9 | \$126.9   | \$110.4   | \$68.1 |

Financial Rating : A.M. Best has affirmed the financial strength rating (FSR) of "A" (excellent) and the issuer credit rating of "A" for the majority of the UnitedHealth Group Incorporated (UnitedHealth)(Minnetonka, MN) [NYSE:UNH]. Currently A.M. Best has affirmed the ICR of "bbb+" and debt rating of UnitedHealth.

# Medicover Plans Benefit Highlights - Preferred Provider

|  | SUPREME   | ELITE   |
|--|---|---|
| Policy Maximum Benefit   | Unlimited   | Unlimited   |
| Coinsurance  | 90%   | 90%   |
| Deductible   | \$0   | \$0   |
| Out of Pocket Maximum  | \$5,000   | \$5,000   |
| UHC Network  | Choice Plus   | Choice Plus   |
| Surgery  | 90% after Deductible  | 90% after Deductible  |
| Physician's visit  | 90% after \$20 Copay per visit  | 90% after \$20 Copay per visit  |
| Physiotherapy's visit  | 90% after \$30 Copay per visit  | 90% after \$30 Copay per visit  |
| Medical Emergency Expense  | 90% after \$150 Copay per visit   | 90% after \$150 Copay per visit   |
| Diagnostic X-ray Services  | 90% after Deductible  | 90% after Deductible  |
| Radiation Therapy  | 90% after Deductible  | 90% after Deductible  |
| Laboratory Procedures  | 90% after Deductible  | 90% after Deductible  |
| Tests & Procedures   | 90% after Deductible  | 90% after Deductible  |
| Ambulance Services   | 90% after Deductible  | 90% after Deductible  |
| Vision Benefit   | \$100 Routine Eye Exam & \$100 Vision Care Supplies Benefit (100% Coinsurance)  | \$100 Routine Eye Exam & \$100 Vision Care Supplies Benefit (100% Coinsurance)  |
| Preventive Care Services   | 100%  | 100%  |
| Urgent Care Center   | 90% after \$50 Copay per visit  | 90% after \$50 Copay per visit  |
| Wellness Program Benefits  | \$500   | N/A   |
| Prescription Drugs<br>*UnitedHealthcare Pharmacy,<br>Retail Network Pharmacy<br>UHCP Mail Order Network<br>Pharmacy or Preferred 90 Day<br>Retail Network Pharmacy | \$15 Copay per prescription Tier 1<br>\$30 Copay per prescription Tier 2<br>\$50 Copay per prescription Tier 3<br>up to a 31-day supply per prescription<br>not subject to Deductible | \$15 Copay per prescription Tier 1<br>30% Copay per prescription Tier 2<br>50% Copay per prescription Tier 3<br>up to a 31-day supply per prescription<br>not subject to Deductible |

This is not a schedule of benefit. For full schedule of benefit, please refer to the [Policy Certificate](#).

## Medicover Plans Benefit Highlights - Preferred Provider

|   | PRIME 100  | PRIME 500  | BASIC   |
|---|--|--|---|
| Policy Maximum Benefit  | Unlimited  | Unlimited  | \$500,000<br>For Each Injury of Sickness      |
| Coinsurance   | 80%  | 80%  | 80%   |
| Deductible  | \$100  | \$500  | \$500   |
| Out of Pocket Maximum   | \$6,350  | \$7,350  | N/A   |
| UHC Network   | Choice Plus  | Choice Plus  | Options PPO                                   |
| Surgery   | 80% after Deductible   | 80% after Deductible   | 80% after Deductible                          |
| Physician's visit   | 80% after \$25 Copay per visit   | 80% after \$50 Copay per visit   | 80% after \$50 Copay per visit                |
| Physiotherapy's visit   | 80% after \$30 Copay per visit   | 80% after \$50 Copay per visit   | 80% after \$35 Copay per visit, 30 Visits Max |
| Medical Emergency Expense   | 80% after \$200 Copay per visit  | 80% after \$200 Copay per visit  | 80% after \$300 Copay per visit               |
| Diagnostic X-ray Services   | 80% after Deductible   | 80% after Deductible   | 80% after Deductible                          |
| Radiation Therapy   | 80% after Deductible   | 80% after Deductible   | 80% after Deductible                          |
| Laboratory Procedures   | 80% after Deductible   | 80% after Deductible   | 80% after Deductible                          |
| Tests & Procedures  | 80% after Deductible   | 80% after Deductible   | 80% after Deductible                          |
| Ambulance Services  | 80% after Deductible   | 80% after Deductible   | 80% after Deductible                          |
| Vision Benefit  | \$100 Routine Eye Exam & \$100 Vision Care Supplies Benefit (100% Coinsurance)   | N/A  | N/A   |
| Preventive Care Services  | 100%   | 100%   | N/A   |
| Urgent Care Center  | 80% after \$50 Copay per visit   | 80% after \$75 Copay per visit   | 80% after \$100 Copay per visit               |
| Prescription Drugs<br><br>*UnitedHealthcare Pharmacy, Retail Network Pharmacy<br>UHCP Mail Order Network Pharmacy or Preferred 90 Day Retail Network Pharmacy | \$15 Copay per prescription Tier 1<br>30% Copay per prescription Tier 2<br>50% Copay per prescription Tier 3<br>up to a 31-day supply per prescription | \$25 Copay per prescription Tier 1<br>30% Copay per prescription Tier 2<br>50% Copay per prescription Tier 3<br>up to a 31-day supply per prescription | N/A   |

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# Access Medical Service

For Student Medicover customers, you can search for participating physicians, hospitals, facilities, medical equipment, or supplies in your local area within 5 minutes online.

1. Access through <https://smcovered.com/visit-a-doctor/find-a-doctor/>.
2. Input zip code
3. Call and make an appointment
4. Bring your Insurance ID Card. SR ID is your insurance member ID.

The website is pretty intuitive to use, but the more conscious decision-making falls into choosing the right health facilities and doctors. Below we list the different types of facilities in the US and the common situations when choosing one.

## ❖ Primary Care

Visit your Primary Care Physician for Preventive Care/Follow-up Care/Sicknesses and Injuries during business hours.

## ❖ Special Care

A specialist is a doctor with expertise in a specific area of medicine. For PPO type insurance, you do not need a referral from a primary care physician to visit a specialist. We highly recommend you visit a primary care physician if you are not sure about which type of special care you are looking for.

## ❖ Urgent Care

Sometimes you may need care fast but your primary care physician may be unavailable. Urgent care centers can help treat different minor injuries so you don't have to wait as long as in the emergency room. Chances are, the price goes down as well.

## ❖ Emergency Room

If you're seriously injured or experience other life-threatening health conditions, call the emergency hotline (911) or visit the nearest emergency facility. If you are experiencing non-life-threatening symptoms, visit urgent care instead.