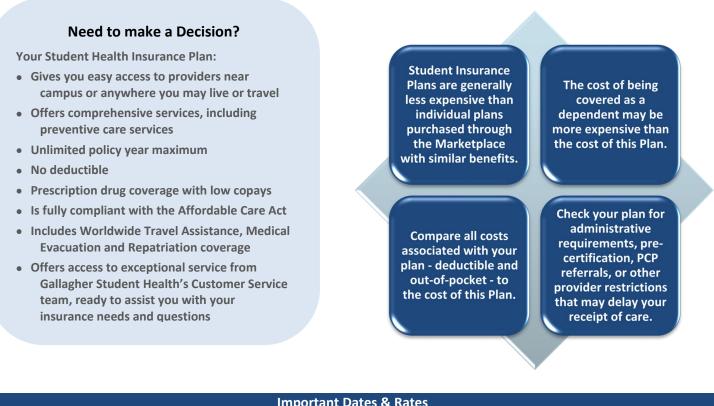
RIT Rochester Institute of Technology

The Affordable Way to Protect Your Most Valuable Asset – Your Health!

Staying healthy is one of the most important things you can do for yourself. When facing a health problem that may come up while you are at college, not getting the care you need due to lack of insurance or high out-of-pocket costs may turn into a roadblock in achieving your academic goals. Student Health Insurance ensures you have coverage for the unexpected, preventive care services and access to the medical services available on-campus, near campus and anywhere that you may live or travel.

All full and part-time International students (except those on H1b visas) will be automatically enrolled in the annual plan and will be billed each semester. International students with adequate coverage can waive out of the Aetna plan by completing the online waiver form. Domestic students do not need to waive, but can voluntarily enroll. Please review the general summary of benefits on the back of this page to assist you in determining if your current plan is comparable.



Important Dates & Rates				
	Annual	Fall	Spring	
Coverage Period	08/15/2024 - 08/14/2025	08/15/2024 - 12/31/2024	01/01/2025 - 08/14/2025	
Enrollment Deadline	September 30, 2024	September 30, 2024	February 28, 2025	
Student Only	\$2,677	\$1,019	\$1,658	
Spouse Only	\$2,677	\$1,019	\$1,658	
Per Child	\$2,677	\$1,019	\$1,658	
2+ Children	\$5,354	\$2,038	\$3,316	

Annual coverage is for domestic students only. International students are enrolled by RIT for Fall and Spring/Summer

CONSIDER THIS:

The information provided below is used as a general summary of benefits and does not include all the benefits. For a detailed plan description, limitations, exclusions, mandates and Coordination of Benefits provision, visit www.gallagherstudent.com/RIT.

	In- Network	Out-of-Network	
Deductible	None	None	
Out-of-Pocket Maximum	\$6,350 per individual, \$12,700 per family, per Policy year	None	
Inpatient Hospital Expense	10% Negotiated Charge (NC)	30% Reasonable & Customary (RC)	
Surgery Expense	10% NC	30% RC	
Doctor/Specialist Office Visit	10% NC, \$0 copay per visit	30% RC, \$0 copay per visit	
Laboratory, X-rays, and Diagnostic Testing	10% NC	30% RC	
Emergency Services Expenses	10% NC \$0 copay	10% RC \$0 copay	
Inpatient Mental Health & Substance Abuse	Same as any other sickness		
Outpatient Pharmacy Benefits	Copays: Generic-\$15; Preferred Brand-\$45; Brand-\$70; \$0 copay for FDA Approved Contraceptives required under the ACA		
Wellness/Preventive Services	100% NC, No Cost Sharing	30% RC	

For additional questions regarding eligibility of benefits, contact Gallagher Student Health's Customer Service Department:

Toll free phone number (Monday – Friday, 8:30 am - 7:00 pm EST)	1-844-333-1464, or <u>www.gallagherstudent.com/RIT</u> , click "Help Center"	
Online Plan Information available 24/7, Live Chat available during business hours	www.gallagherstudent.com/RIT	
Mailing Address	500 Victory Road, Quincy, MA 02171	
This plan is subject to benefit limitations and exclusions and is underwritten by	Aetna Life Insurance Company	
Claims are administered by	Aetna Student Health P.O. Box 981106 El Paso, TX 79998	

PLEASE READ CAREFULLY BEFORE DECIDING WHETHER THIS PLAN IS RIGHT FOR YOU:

• Please read the Rochester Institute of Technology brochure when available located at www.gallagherstudent.com/RIT carefully. While this document describes important features of the plan, there may be other specifics of the plan that are important to you and some limit what the plan will pay.

 If you want to look at the full plan description, which is contained in the Master Policy issued to the school, you may view it at www.gallagherstudent.com/RIT when available or contact us at 1-844-333-1464.

For more information on plan exclusions, limitations, and benefit maximums, please refer to the school brochure and Master Policy. This plan pays benefits only for expenses incurred while the coverage is in force and only for the medically necessary treatment of injury or disease. The coverage displayed in this document reflects certain mandate(s) of the state in which the policy was written. However, certain federal laws and regulations could also affect how this coverage pays. Unless otherwise indicated, all benefits and limitations are per covered. This material is for information only. Discount programs provide access to discounted rates and are NOT insured benefits. The member is responsible for the full cost of the discounted services. Discounts are subject to change without notice. Discount programs may not be available in all states. Discount programs and travel assistance services may be offered by vendors who are independent contractors and not employees or agents of Aetna. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professionals. Preferred providers are independent contractors and are neither employees nor agents of Aetna Life Insurance Company and its applicable affiliated companies (Aetna). Policy forms issued in OK include GR-96134.

Financial Sanctions Exclusions

If coverage provided by any insurance policy or administrative services agreement violates or will violate any economic or trade sanctions, the coverage is immediately considered invalid. For example, Aetna companies cannot make payments for health care or other claims or services if it violates a financial sanction regulation. This includes sanctions related to a blocked person or a country under sanction by the United States, unless permitted under a written Office of Foreign Asset Control (OFAC) license. For more information, visit http://www.treasury.gov/resource-center/sanctions/Pages/default.aspx.

