

Student Health Insurance Plan

Southern New Hampshire University

Rates & Dates



Coverage Period: 08/30/2021-08/29/2022 Premium:

\$1,478.00

Waive Instructions:

All SNHU students are required to have health insurance. If you do not have coverage, you will be automatically enrolled in a plan through the university, and will be billed annually for this charge. If you have private health insurance, you must complete a Health Insurance Waiver form before August, 1 2021. This form can be obtained online through the my.SNHU student portal, on the left tool bar, under the "Financial" section. For questions call: 603.645.9640 or email: sfscampus@snhu.edu



Create Your Account

Go to gallagherstudent.com/snhu and click on 'Create My Account" on the homepage. Once you create your account you'll have access to your plan ID card and claims online. Don't forget to download the app on your phone by searching for the word **StudentHealth** in your app store.



Find A Doctor

The Provider network for this plan is "Anthem Blue Cross PPO Prudent Buyer - Student Health Network." You may choose any physician or hospital; however, using providers that are part of the network may decrease your share of the costs. For a complete listing of network providers, click "Find a Doctor" at gallagherstudent.com/SNHU



Prescription Drugs

To fill a prescription visit any in-network pharmacy and pay the copay. Participating pharmacies can be found online, click "Pharmacy Program" at gallagherstudent.com/SNHU

Did you know?

Student Health Insurance
Plans are generally less
expensive and have better
coverage than individual
plans purchased through
state marketplaces.
Premiums are lower and your
out of pocket costs will be
low as well. Most plans are
PPO's (Preferred Provider
Networks), which means
easy access to providers
near campus or anywhere
you may live or travel.

	Coverage
Deductible	\$150
Covered Percentage	80% of Preferred Allowance
Office Visit Copay	\$20 Copay
Emergency Room	\$80% of Usual and Customary Charge
Prescription Drug Copay	\$20 Copay Tier 1
	\$30 Copay Tier 2
	\$60 Copay Tier 3
	\$60 Copay Specialty Drugs

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