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Whitman College
2012-2013
Student Health Insurance Plan

Visit **www.aetnastudenthealth.com**

Aetna Student Health, working with [School] offers a student-focused health insurance plan that helps protect students at school, at home, and while traveling or studying abroad.

WHAT IS THE PLAN ALL ABOUT?

Your Student Health Insurance Plan offers you access to:

- Aetna's nationwide network of doctors, hospitals, pharmacies and specialists throughout the country.
- An award-winning online secure member website, Aetna Navigator®.
- Aggregate Benefit Maximum of $100,000 per policy year.
- Informed Health® Line – Call our toll-free number to talk to registered nurses. They can share information on a range of healthy topics*.
- Savings on vision, fitness, alternative health care, weight management, books and many more!
- Travel Assistance Services and Worldwide Medical Coverage while traveling or studying abroad.

HOW MUCH DOES IT COST?

	ANNUAL 8/10/12 – 8/10/13	SPRING/SUMMER 1/10/13 – 8/10/13
DEADLINE	9/30/12	2/12/13
STUDENT ONLY	$1,284	$750
SPOUSE ONLY	$4,300	$2,506
PER CHILD	$1,820	$1,060

WHO IS ELIGIBLE?

All degree-seeking college students and all International students, or other persons possessing and maintaining a current passport and valid visa status (F-1, J-1 or M-1), engaged in educational activities at the College who are temporarily located outside their home country and have not been granted permanent residency status, are automatically enrolled in this insurance Plan unless proof of comparable coverage is furnished by the deadlines listed above.

Learn More!
1-888-295-4872
www.aetnastudenthealth.com

* Not all topics may be covered expenses under your plan. While only your doctor can diagnose, prescribe or give medical advice, the Informed Health Line nurse can provide information on more than 5,000 health topics. Contact your doctor first with any questions or concerns regarding your health care needs.

The Whitman College Student Health Insurance Plan is underwritten by Aetna Life Insurance Company and administered by Chickering Claims Administrators, Inc. Aetna Student Health— is the brand name for products and services provided by these companies and their applicable affiliated companies.

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AGGREGATE MAXIMUM	$100,000 per Policy Year	
PLAN DEDUCTIBLE	$100 Per Person, Per Policy Year	
AFTER DEDUCTIBLE HAS BEEN MET, ELIGIBLE EXPENSES ARE COVERED AT		
ELIGIBLE EXPENSES ARE COVERED AT:	PREFERRED CARE	NON-PREFERRED CARE
INPATIENT EXPENSES		
Hospital Expenses, daily semi-private room rate; general nursing care provided by Hospital.	80% of Negotiated Charge	60% of Recognized Charge
Intensive Care Hospital Expenses	80% of Negotiated Charge	60% of Recognized Charge
Miscellaneous Hospital Expenses, such as the cost of the operating room, laboratory tests, x-ray examinations, anesthesia, drugs (excluding take-home drugs) or medicines, therapeutic services & supplies.	80% of Negotiated Charge	60% of Recognized Charge
Physician Hospital Visit Expenses	80% of Negotiated Charge	60% of Recognized Charge
SURGICAL EXPENSES (INPATIENT AND OUTPATIENT)		
Surgical Expenses	80% of Negotiated Charge	60% of Recognized Charge
Anesthetist Expense & Assistant Surgeon Expenses	80% of Negotiated Charge	60% of Recognized Charge
OUTPATIENT EXPENSES		
Physician's Office Visit Expenses	90% of Negotiated Charge after a $15 Copay	60% of Recognized Charge after a $15 Copay
Emergency Expenses, use of the emergency room and supplies.	80% of Negotiated Charge	60% of Recognized Charge
Preventive Care	100% of Negotiated Charge	60% of Recognized Charge
MENTAL HEALTH – NON SEVERE		
Inpatient Mental Health: Limited to 30 days per policy year	80% of Negotiated Charge	60% of Recognized Charge
Outpatient Mental Health: Limited to 30 days per policy year	80% of Negotiated Charge	60% of Recognized Charge
ADDITIONAL EXPENSES		
Diagnostic X-Ray and Laboratory Expenses	80% of Negotiated Charge	60% of Recognized Charge
Ambulance Expenses	80% of Actual Charge	
THERAPY EXPENSES (PHYSICAL, OCCUPATIONAL, AND ACCUPUNCTURE)		
Inpatient Benefits	80% of Negotiated Charge	60% of Recognized Charge
Outpatient Benefits	80% of Negotiated Charge	60% of Recognized Charge
PRESCRIPTION DRUG EXPENSES		
Plan benefits limited to $100,000 maximum per Policy Year Contraceptives (that do not have a generic alternate) covered at 100%	100% of Negotiated Charge after $20 Copay for Generic Drugs; 100% of Negotiated Charge after $30 Copay for Brand Name Drugs; 100% of Negotiated Charge after $40 Copay for Non-Preferred Care	100% of Recognized Charge after $20 Copay for Generic Drugs; 100% of Recognized Charge after $30 Copay for Brand Name Drugs; 100% of Recognized Charge after $40 Copay for Non-Preferred Care

Your student health insurance coverage, offered by Aetna Student Health*, may not meet the minimum standards required by the health care reform law for the restrictions on annual dollar limits. The annual dollar limits ensure that consumers have sufficient access to medical benefits throughout the annual term of the policy. Restrictions for annual dollar limits for group and individual health insurance coverage are $1.25 million for policy years before September 23, 2012; and $2 million for policy years beginning on or after September 23, 2012 but before January 1, 2014. Restrictions for annual dollar limits for student health insurance coverage are $100,000 for policy years before September 23, 2012, and $500,000 for policy years beginning on or after September 23, 2012, but before January 1, 2014. Your student health insurance coverage includes an annual limit of $100,000 on all covered services including Essential Health Benefits. Other internal maximums (on Essential Health Benefits and certain other services) are described more fully in the benefits chart included inside this Plan summary. If you have any questions or concerns about this notice, contact (888) 295-4872. Be advised that you may be eligible for coverage under a group health plan of a parent's employer or under a parent's individual health insurance policy if you are under the age of 26. Contact the plan administrator of the parent's employer plan or the parent's individual health insurance issuer for more information.

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

- This plan will not pay more than the overall maximum benefit of $100,000 per condition, per policy year
- Once any of these limits have been reached, the plan will not pay any more towards the cost of the applicable services, and your health provider can bill you for what the plan does not pay. Some illnesses cost more to treat than this plan will cover.
- Please read the Whitman College brochure located at your College carefully before enrolling. While this document and Whitman College describe 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 your College or contact us at 1-888-295-4872.

If you have a pre-existing condition, this plan may not pay for the coverage of this condition for up to the first 6 months of coverage. The pre-existing provision does not apply to members under age 19. For more information on pre-existing condition limitations and other plan exclusions, limitations and benefit maximums, please refer to the Whitman College 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 person.

This material is for information only. Health insurance plans contain exclusions, limitations and benefit maximums. 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, Chickering Claims Administrators, Inc. or their affiliates.

Policy forms issued in OK include GR-96134.

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