

Dear Student, Parent, or Guardian:

We are pleased to provide you with this overview of the North Park University Student Health Insurance Plan (SHIP). This SHIP is underwritten by Nationwide Life Insurance Company and administered by Consolidated Health Plans, Inc. (CHP).

This ACA-compliant plan includes:

- Coverage while at school and at home
- Comprehensive coverage both for emergency and non-emergency situations
- Access to the PHCS PPO network
- Access to OptumRX drug pharmacy network

BENEFIT SUMMARY*				
Benefit Maximum	Unlimited			
	IN-NETWORK	OUT-OF- NETWORK		
Annual Deductible	\$250	\$500		
Coinsurance	80% of PA	60% of R&C		
Out-of-Pocket Maximum	\$6,350 per Covered Person \$12,700 per Family	\$12,700 per Covered Person		
Preventive Care	100% of PA (No cost sharing)	60% of R&C		
Inpatient Hospital Expense	80% of PA	60% of R&C		
Physician's Office Visit	80% of PA	60% of R&C		
Emergency Room Expense (Copay Waived if admitted)	80% of PA after \$100 copay	80% of R&C after \$100 copay		
X-Ray and Laboratory	80% of PA	60% of R&C		
Mental Health/ Substance Abuse	Paid the Same as any other Sickness	Paid the Same as any other Sickness		
Prescription Drug Benefits Deductible does not apply at a Participating Pharmacy	100% of PA after the following: • \$15 copay for Generic Drugs • \$35 copay for Preferred Brand Drugs • \$70 copay for Non-Preferred Brand Drugs • \$70 copay for Specialty Drugs • \$0 copay for Generic Contraceptives	60% of R&C		

PA= Preferred Allowance

R&C = Reasonable & Customary

*This summary is provided as a courtesy and is not meant to replace or override the terms and conditions detailed in the insurance policy/brochure. Please refer to the policy/brochure to verify medical coverage, eligibility, exclusions, limitations, and for more detailed information.

North Park University 2016 – 2017 Student Health Insurance Plan

Insurance Requirements

All full time Undergraduate domestic students taking 6 or more credit hours per term, and their dependents, are eligible to enroll in this insurance plan on a voluntary basis by the deadline dates below.

2016/2017 Enrollment Period Deadlines Dates:

- Annual/Fall Semester: September 15, 2016
- Spring Semester: February 1, 2017

I need to:	Contact or Visit:	
Enroll in the insurance plan:	www.NPUInsurance.com	
Learn about: Insurance Benefits	Associated Insurance Plans International, Inc. 609 N. Pine Street, Suite 202 Burlington, WI 53105 (800) 452-5772 www.NPUInsurance.com	
Learn about: Claims Processing ID Cards	Consolidated Health Plans 2077 Roosevelt Avenue Springfield, MA 01104 (800) 633-7867 www.chpstudent.com	
Find a Prescription Drug Provider:	www.NPUInsurance.com	
Find a Preferred Provider	www.NPUInsurance.com	

Cost and Period of Coverage					
	Annual* 8/15/16- 8/14/17	Fall* 8/1/16- 12/31/16	Spring* 1/1/17- 8/14/17		
Student	\$2,408	\$917	\$1,491		
Per Dependent	\$2,408	\$917	\$1,491		

^{*}The Rates above include an Administrative Fee

This plan also offers the following value-added services:

- Vision Discount Program through Davis Vision
- Medical Travel Assistance Services
- Nurse Line through Ask Mayo Clinic

