SUNY Canton

2024 - 2025 Student Health Insurance

Who is eligible?

All registered full-time students are required to carry health insurance. Students who are currently insured under family or private medical insurance may waive the student health insurance plan. All part-time students, taking 1 or more credit hours may enroll in this plan on a voluntary basis.

Visit www.haylor.com/suny-canton to enroll or waive this coverage.

Fall deadline: September 20, 2024 Spring deadline: February 21, 2025

Fall rate: August 15, 2024-January 14, 2025

\$1,514

Spring Rate: January 15, 2025-August 14, 2025

\$2.097

Rates pending state approval

For more details regarding the SUNY Canton Student Health Insurance Program please visit:

> www.haylor.com/suny-canton 866.535.0456 student@haylor.com





What does the plan feature?

The Student Health Insurance Plan offers you:

- Affordable, comprehensive insurance benefits
- ACA Compliant Plan (Patient Protection and Affordable Care Act)
- · Free STI testing
- · 24/7 Access to Telehealth Medicine
- Access to a nationwide network of healthcare providers including primary care, specialists and mental health services at: https://connect.werally.com

To create or login to your UHC student ccount, please visit myaccount.uhcsr.com or download UHCSR's Mobile Appe from your smartphone available on the App Store or Google Play



For further details of the coverage including cost, benefits, exclusions, and reductions or limitations and the terms under which the policy may be continued in force, please refer to the overview policy.

2024-2025 SUNY Canton Summary of Benefits

Benefit	In-Network	Out-of-Network
Deductible	\$250	\$500
Coinsurance	20% Coinsurance	40% Coinsurance
Out-of-pocket Maximum	\$8,150	\$16,300
Office Visit	\$30 Copay, then 20% coinsurance	40% coinsurance after deductible
Specialist Copay	\$30 Copay, then 20% coinsurance	40% coinsurance after deductible
Preventative Care	Covered in full	30% Coinsurance after deductible
Urgent Care Center	\$30 Copay, then 20% coinsurance	\$30 Copay, then 40% coinsurance
Emergency Department	\$50 Copay	\$50 Copay
Prescription Drug Coverage - 30 Day Supply	Tier 1: \$20 Copayment Tier 2: \$50 Copayment Tier 3: \$80 Copayment	Generic: \$20 Copay Brand-Name: \$50 Copay

Annual Deductible: An amount you could owe during a coverage period (usually one year) for covered health care services before your plan begins to pay. An overall deductible applies to all or almost all covered items and services.

Annual Out of Pocket Maximum: The most you could pay during a coverage period (usually one year) for your share of the costs of covered services. After you meet this limit the plan will usually pay 100% of the allowed amount.

Copay: A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

Coinsurance: Your share of the costs of a covered health care service, calculated as a percentage (for example, 20%) of the allowed amount for the service. You generally pay coinsurance **plus** any deductibles you owe.