





PLAN **SNAPSHOT**

LOGOS Evangelical Seminary

International Student Insurance Plan

Welcome to the 2018-2019 International Student Insurance Plan! Below are brief highlights of plan benefits, as well as important dates and costs of coverage.

For more information, please consult the Plan Document and other plan materials at www.4studenthealth.com/logos. If you have questions about medical benefits or claims, please call Relation Insurance Administrators at (800) 468-4343. If you have questions about enrollment, please call Relation Insurance Services at (800) 537-1777.

If You Need to See a Doctor

If you need medical care, visit a Preferred Provider Organization (PPO) network provider to obtain medical care. This plan utilizes a PPO network. You pay less if you use providers that belong to the PPO network. Providers include physicians, urgent care centers, hospitals or other specialized practitioners.

PPO Network

To locate a physician, urgent care center, hospital or other provider in the First Health Network, visit www.firsthealthlbp.com or call (800) 226-5116. If you visit a non-PPO provider, you are responsible for additional costs if the medical provider charges over the Usual, Reasonable, and Customary (URC) charges.

Insurance ID Card

Once you are enrolled in the plan, download your insurance ID card at www.4studenthealth.com/logos. No other ID card will be mailed to you. If you go to a physician's office, urgent care center, hospital, or pharmacy, you will be asked for your ID card.

Carry your insurance identification card with you at all times.

Prescription Drugs

The Pharmacy Benefits Manager for this plan is Express Scripts. To fill a prescription, visit any Express Scripts network pharmacy and pay the copay. If you visit a Non-Network provider, you will need to pay for the prescription in full at the time of pick-up, then submit a claim for reimbursement.

To locate an Express Scripts pharmacy, visit www.express-scripts.com or call (800) 447-9638.

Rates and Important Dates

The cost of coverage includes the cost of insurance premiums and administrative fees. Rates are effective 08/01/2018 to 07/31/2019.

Term	Dates	Student Rate
Fall	08/01/2018 to 12/31/2018	\$580.00
Spring	01/01/2019 to 05/31/2019	\$580.00
Summer	06/01/2019 to 07/31/2019	\$232.00

Visit www.4studenthealth.com/logos for more information.

What's Covered

- Doctor visits
- **Emergency expenses**
- Routine physical examinations
- Surgery, in- and out-patient
- Physical therapy, chiropractic care, acupuncture
- **Immunizations**
- Tests, procedures, and laboratory services, such as X-rays and blood draws
- Pregnancy and maternity
- Prescription drugs

Limitations, copays, and deductibles may apply. Please see the Plan Document for full benefit details.

Additional Plan Information

Please note the following levels for copays, deductibles, and other costs of this coverage.

	In-Network	Non-Network
Deductible	\$100 per sickness or injury	\$100 per sickness or injury
Covered Percentage	100% of Preferred Allowance	100% of URC*
Office Visit Copay	None (deductible applies)	None (deductible applies)
Urgent Care Copay	None (deductible applies)	None (deductible applies)
Emergency Room Copay	\$250 per visit (waived if admitted to hospital)	\$250 per visit (waived if admitted to hospital)
Prescription Drug Copays	\$10 generic / \$20 brand name	

^{*} URC means Usual, Reasonable, and Customary charges.

