Dear Student, Parent, or Guardian:

We are pleased to provide you with this overview of the Marquette University International Student Health Insurance Plan (SHIP). This SHIP is underwritten by National Guardian Life Insurance Company as policy form NBH-280-2016 WI et al and administered by Consolidated Health Plans (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 Cigna PPO network

This Plan is paired with the Cigna Network. Note that the benefits are not insured by Cigna or affiliates.

This Plan also offers the following Value added services. These services are not part of the Student Health Insurance Plan underwritten by National Guardian Life Insurance Company:
- 24 Hour Nurse Line
- Medical Travel Assistance Services

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**Marquette University International Student Insurance Requirements**

Marquette requires all International students to enroll in the student health insurance coverage. Specific details regarding benefits coverage, and Marquette University Medical Clinic can be found at:

[http://www.marquette.edu/riskunit/riskmanagement/student_health_insurance.shtml](http://www.marquette.edu/riskunit/riskmanagement/student_health_insurance.shtml)

**How do I enroll?**

International Students are automatically enrolled in the insurance plan by the University. Students who wish to purchase dependent coverage may enroll at:

[http://www.marquette.edu/riskunit/riskmanagement/student_health_insurance.shtml](http://www.marquette.edu/riskunit/riskmanagement/student_health_insurance.shtml)

Option 1 – Complete the online enrollment form and pay by credit card.
Option 2 – Download and print an enrollment form and return it with a check or money order to:

American Management Advisors, Inc.
333 North Oxford Valley Road, Suite 606
Fairless Hills, PA 19030

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**I need to find:**

**Visit:**

**On Campus Care**

Marquette University Medical Clinic, located at:
545 N. 15th Street.
The medical clinic is only open to students and the hours are:
Monday, Tuesday, Wednesday, and Thursday 9:30am to 4:30pm

**Preferred Provider:**

www.cigna.com

**File a Claim:**

Bills must be submitted within 90 days after the date of injury or sickness, or as soon as reasonably possible.

**Find a Prescription Drug Provider**

www.cigna.com

**Information regarding Eligibility and Enrollment**

[http://www.chpstudent.com](http://www.chpstudent.com)

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**Cost and Period of Coverage**

<table>
<thead>
<tr>
<th></th>
<th>Annual*</th>
<th>Fall*</th>
<th>Spring/Summer*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Only</td>
<td>$1,696</td>
<td>$709</td>
<td>$987</td>
</tr>
<tr>
<td>Dependent rates are in addition to the student rate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Per Dependent</td>
<td>$1,696</td>
<td>$709</td>
<td>$987</td>
</tr>
</tbody>
</table>

*Premiums include an Administrative Service Fee

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**HEALTH INSURANCE BENEFIT SUMMARY**

<table>
<thead>
<tr>
<th>Maximum</th>
<th>NETWORK</th>
<th>NON-NETWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Deductible</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>Out-of-Pocket Maximum</td>
<td>$6,350</td>
<td>Individual $12,700</td>
</tr>
<tr>
<td>Coinsurance</td>
<td>100% of PA</td>
<td>80% of U&amp;R</td>
</tr>
<tr>
<td>Student Health Center/Infirmary at Marquette University</td>
<td>100% of U&amp;R</td>
<td></td>
</tr>
<tr>
<td>Preventive Care</td>
<td>100% of PA (no cost sharing)</td>
<td>80% of U&amp;R</td>
</tr>
<tr>
<td>Inpatient Hospital Expense</td>
<td>100% of PA</td>
<td>80% of U&amp;R</td>
</tr>
<tr>
<td>Physician’s Office Visit</td>
<td>Copayment: $20 then 100% of PA</td>
<td>80% of U&amp;R</td>
</tr>
<tr>
<td>Emergency Room Expense</td>
<td>Copayment: $50 then 100% of PA</td>
<td>Copayment: $50 then 80% of U&amp;R</td>
</tr>
<tr>
<td>X-Ray and Laboratory</td>
<td>100% of PA</td>
<td>80% of U&amp;R</td>
</tr>
<tr>
<td>Bedside Visits</td>
<td>The Usual and Reasonable Charge as stated above up to $5,000 Maximum per policy year</td>
<td></td>
</tr>
<tr>
<td>Prescription Drug Benefits</td>
<td>100% of PA after:</td>
<td></td>
</tr>
<tr>
<td>Prescriptions should be filled at a Participating Cigna Pharmacy Network</td>
<td>$10 Copay for other Generic Drugs; or</td>
<td></td>
</tr>
<tr>
<td>$20 Copay for Preferred Brand; or</td>
<td>$30 Copay for Brand</td>
<td></td>
</tr>
<tr>
<td>PA= PPO Allowance</td>
<td>U&amp;R = Usual &amp; Reasonable</td>
<td></td>
</tr>
</tbody>
</table>

*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. Policy Form NBH-280(2016) WI

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Underwritten by: **National Guardian Life Insurance Company**

National Guardian Life Insurance Company is not affiliated with Guardian Life Insurance Company of America, aka The Guardian or Guardian Life.

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800-633-7867
2077 Roosevelt Avenue
Springfield, MA 01104
www.chpstudent.com