

Saint Mary's College of California Student Health Insurance Plan 2012–2013

The Saint Mary's College of California Student Health Insurance Plan may not cover all your health care expenses. While this document tells you about some of the important features of the insurance plan, other features may be important to you, and some further limit what the insurance plan will pay. Some illnesses may cost more to treat and health care providers may bill you for what the insurance plan does not cover. Your Certificate of Insurance, which you will receive after you enroll, contains the exact terms and conditions of your Health Net coverage.

<i>Benefits</i>	<i>Member responsibility</i>	
	Preferred care	Non-preferred care
Lifetime maximum	Unlimited	
Deductible	\$200 per insured, per policy year	
After your deductible has been met, eligible expenses are payable as follows:		
Preventive care benefits	100% coverage, not subject to deductible	70% of the maximum allowable amount
Inpatient benefits		
Hospital room and board expenses	90% of the negotiated rate	70% of the maximum allowable amount
Intensive care/hospital expenses	90% of the negotiated rate	70% of the maximum allowable amount
Miscellaneous hospital expenses (Covered medical expenses include, but are not limited to: laboratory tests, X-rays, anesthesia, use of special equipment, medicines, and use of operating room.)	90% of the negotiated rate	70% of the maximum allowable amount
Physician's hospital visit expenses (Nonsurgical services of the attending physician or a consulting physician.)	90% of the negotiated rate	70% of the maximum allowable amount
Surgical (inpatient and outpatient)		
Surgical expenses	90% of the negotiated rate	70% of the maximum allowable amount
Anesthetist expense and assistant surgeon expense	90% of the negotiated rate	70% of the maximum allowable amount
Outpatient benefits		
Physician's office visit expenses	90% of the negotiated rate	70% of the maximum allowable amount
Emergency care expenses	90% of the negotiated rate after \$100 copay	90% of the maximum allowable amount after \$100 copay
X-ray and lab	100% of the negotiated rate; deductible is waived	70% of the maximum allowable amount
Durable medical equipment	90% of the negotiated rate	70% of the maximum allowable amount
Behavioral health services		
Outpatient mental health Please note: For non-severe, benefits are limited to 40 visits per policy year.	90% of the negotiated rate	70% of the maximum allowable amount
Inpatient mental health Please note: For non-severe, benefits are limited to 30 visits per policy year.	90% of the negotiated rate	70% of the maximum allowable amount
Additional benefits		
Inpatient or outpatient substance abuse	90% of the negotiated rate	70% of the maximum allowable amount
Ambulance expenses	Covered medical expenses are payable at 90% of the actual charge.	
Prescription drug expenses ¹	Brand-name drug copay: \$20 Generic drug copay: \$10	

¹For details regarding a specific drug, go to www.healthnet.com.