

SUNY International Study Abroad

2026 - 2027

Student Health Insurance

Who is eligible?

All SUNY students, faculty, and staff traveling abroad on SUNY sponsored programs and activities are eligible. Students studying abroad on a SUNY study abroad or exchange program must be enrolled in the plan unless waived out by SUNY. Eligible participants may also insure their Dependents. Eligible Dependents are the participant's spouse or domestic partner and dependent children under 26 years of age.

The Student Health Insurance Plan Offers You:

- Unlimited coverage for primary care providers, specialists, emergency visits and hospitals
- Unlimited coverage for preventative care, including annual physicals, GYN exams, routine screenings and immunizations
- Prescription Drug Coverage: \$0 copay for tier 1, 2 or 3 drugs
- Unlimited coverage for inter-collegiate athletics
- Unlimited coverage for mental health
- Evacuation and Repatriation Services



How to access information:

For pre-trip planning or if you are outside of the USA and you need to locate a doctor abroad or have an emergency, please call UHC Global 24/7 at **844-249-0748** or email them directly at

Assistance@uhcglobal.com

UHC Global can also arrange for direct payment for a provider that you see overseas if you call this number.

To obtain a Visa letter please contact HF&C at student@haylor.com. To check on a current claim or ask a benefit question please reach UHC at **888-714-6544** or by email at

customerservice@uhcsr.com.

For medical providers inside the USA, please log in to your myuhc.com account and then click Find a Doctor.

To create or login to your UHC student account:

Please visit myaccount.uhcsr.com or download UHC's mobile app from your smartphone (UHCSR Mobile App) available on the App Store or Google play.

- View and download your insurance card
- Review claims and dates of service
- Locate participating providers
- Monitor travel risks, medical intelligence reports, daily security briefings of global events, drug & language translation guides
- Teladoc Service for Mental Health

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.

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Summary of Benefits

Plan Design (Per Person, Annually)	In-Network
Annual Deductible	\$0
Coinsurance	0%
In-Patient Hospital Care	0% coinsurance/copay
Office Visit	0% coinsurance/copay
Preventative Care Services	Covered in full
Ambulance	0% coinsurance/copay
Urgent Care Center	0% coinsurance/copay
Emergency Department	0% coinsurance/copay
Prescription Drug Coverage - 30 Day Supply	Tier 1: \$0 Copayment Tier 2: \$0 Copayment Tier 3: \$0 Copayment

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.

The 2026 - 2027 benefits listed above are a summary of the Student Health Insurance Plan design. Additional Schedule of Medical Expense Benefits/ Limitations is specified in the Overview Policy.