



2018–2019 Student Injury Only Insurance Plan for Middle Georgia State University

Who is eligible to enroll?

All registered student attending a Board of Regents if the University System of Georgia participating institution or those who are enrolled in a participating university's Student Health Insurance Plan are automatically enrolled in this Injury only plan.

Where can I get more information about the benefits available?

Please read the plan brochure to determine whether this plan is right before you enroll. The plan brochure provides details of the coverage including costs, benefits, exclusions, and reductions or limitations and the terms under which the coverage may be continued in force. Copies of the plan brochure are available from the University and may be viewed at www.uhcsr.com/usg. This plan is underwritten by UnitedHealthcare Insurance Company and is based on policy number 2018-200289-2. The Policy is a Non-Renewable One-Year Term Policy.

Who can answer questions I have about the plan?

If you have questions please contact Customer Service at 1-866-403-8267 or customerservice@uhcsr.com.

Highlights of Coverage offered by UnitedHealthcare StudentResources

Highlights of the Student Injury and Sickness Insurance Plan Benefits

This plan covers all Activities (excluding Intercollegiate sports) sponsored and supervised by the institution, including travel with a group in connection with such activities, and travel directly and without delay to or from the Insured Person's home or residence and the site of such activities.

Overall Plan Maximum	\$200,000 (For each Injury)
Plan Deductible	\$0
Coinsurance <i>All benefits are subject to satisfaction of the Deductible, specific benefit limitations, maximums and Copays as described in the plan brochure.</i>	The Plan pays 100% Usual and Customary Charges for Covered Medical Expenses
Prescription Drugs	100% of Usual and Customary Charges

Exclusions and Limitations

No benefits will be paid for: a) loss or expense caused by, contributed to, or resulting from; or b) treatment, services or supplies for, at, or related to:

1. Dental treatment, except for accidental Injury to Sound, Natural Teeth;
2. Elective Surgery or Elective Treatment;
3. Hypnosis;
4. Preventive medicines or vaccines, except where required for treatment of a covered Injury;
5. Injury caused by, contributed to, or resulting from the use of alcohol, illegal drugs, or any drugs or medicines that are not taken in the recommended dosage or for the purpose prescribed by the Insured Person's Physician;
6. Injury for which benefits are paid or payable under any Workers' Compensation or Occupational Disease Law or Act, or similar legislation;
7. Injury sustained while (a) participating in any interscholastic, intercollegiate, or professional sport, contest or competition; (b) traveling to or from such sport, contest or competition as a participant; or (c) while participating in any practice or conditioning program for such sport, contest or competition;
8. Investigational services;
9. Motor vehicle Injury;
10. Participation in a riot or civil disorder; commission of or attempt to commit a felony;
11. Prescription Drugs, services or supplies as follows:
 - a) Therapeutic devices or appliances, including: hypodermic needles, syringes, support garments and other non-medical substances, regardless of intended use;
 - b) Immunization agents, biological sera, blood or blood products administered on an outpatient basis;
 - c) Drugs labeled, "Caution - limited by federal law to investigational use" or experimental drugs;
 - d) Anabolic steroids used for body building;
 - e) Growth hormones; or
 - f) Refills in excess of the number specified or dispensed after one (1) year of date of the prescription;
12. Routine physical examinations and routine testing; preventive testing or treatment; screening exams or testing in the absence of Injury;
13. Services provided normally without charge by the Health Service of the Policyholder; or services covered or provided by the student health fee;
14. Sickness or disease in any form;
15. Flight in any kind of aircraft, except while riding as a passenger on a regularly scheduled flight of a commercial airline;
16. Suicide or attempted suicide while sane or insane; or intentionally self-inflicted Injury;
17. Supplies, except as specifically provided in the policy;
18. Treatment in a Government hospital, unless there is a legal obligation for the Insured Person to pay for such treatment; and
19. War or any act of war, declared or undeclared; or while in the armed forces of any country (a pro-rata premium will be refunded upon request for such period not covered).

Highlights of Services offered by UnitedHealthcare StudentResources

Healthiest You: National Telehealth Service

Starting on the effective date of your policy, you have 24/7 access to medical advice through HealthiestYou, a national telehealth service. By calling the toll-free number listed on the front of your medical ID card or visiting www.telehealth4students.com, you have access to board-certified physicians via phone and/or video, where permitted. This service is especially helpful for minor illnesses, such as allergies, sore throat, earache, pink eye, etc. Based on the condition being treated, the doctor can also prescribe certain medications, saving you a trip to the doctor's office. Using HealthiestYou can save you money and time, while avoiding costly trips to a doctor's office, urgent care facility, or emergency room. As an insured with **StudentResources**, there is no consultation fee for this service.* Every call with a HealthiestYou doctor is covered 100% during your policy period.

This service is meant to compliment your Student Health Center. If possible, we encourage you to visit your SHC first before using this service.

HealthiestYou is not health insurance. HealthiestYou is designed to complement, and not replace, the care you receive from your primary care physician. HealthiestYou physicians are an independent network of doctors who advise, diagnose, and prescribe at their own discretion. HealthiestYou physicians provide cross coverage and operate subject to state regulations. Physicians in the independent network do not prescribe DEA controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. HealthiestYou does not guarantee that a prescription will be written. Not available in Arkansas; limited services in Idaho and Texas.

*If you are an Insured under this insurance Plan, and you call prior to the plan effective date, you will be charged a \$40 service fee before being connected to a board-certified physician.

Student Assistance

Insureds have immediate access to the Student Assistance Program, a service that coordinates care using a network of resources. Services available include counseling, financial and legal advice, as well as mediation. Counseling services are offered by Licensed Clinicians who can provide insureds with someone to talk to when everyday issues become overwhelming. Financial services, provided by licensed CPA's and Certified Financial Planners offer consultations on issues such as financial planning, credit and collection issues, home buying and renting and more. Legal Services are provided by fully credentialed attorneys with at least 5 years of experience practicing law. Mediation services are available to help resolve family-related disputes. Translation services are available in over 170 languages for most services. Insureds also have access to LiveAndWorkWell.com where they can take health risk assessments, use health estimators to calculate things like their target heart rate and BMI, and participate in personalized self-help programs. More information about these services is available by logging into My Account at www.uhcsr.com/MyAccount.

This Summary Brochure is based on Policy #2018-200289-2.

NOTE: The information contained herein is a summary of certain benefits which are offered under a student health insurance policy issued by UnitedHealthcare. This document is a summary only and may not contain a full or complete recitation of the benefits and restrictions/exclusions associated with the relevant policy of insurance. This document is not an insurance policy document and your receipt of this document does not constitute the issuance or delivery of a policy of insurance. Neither you nor UnitedHealthcare has any rights or responsibilities associated with your receipt of this document. Changes in federal, state or other applicable legislation or regulation or changes in Plan design required by the applicable state regulatory authority may result in differences between this summary and the actual policy of insurance.

