

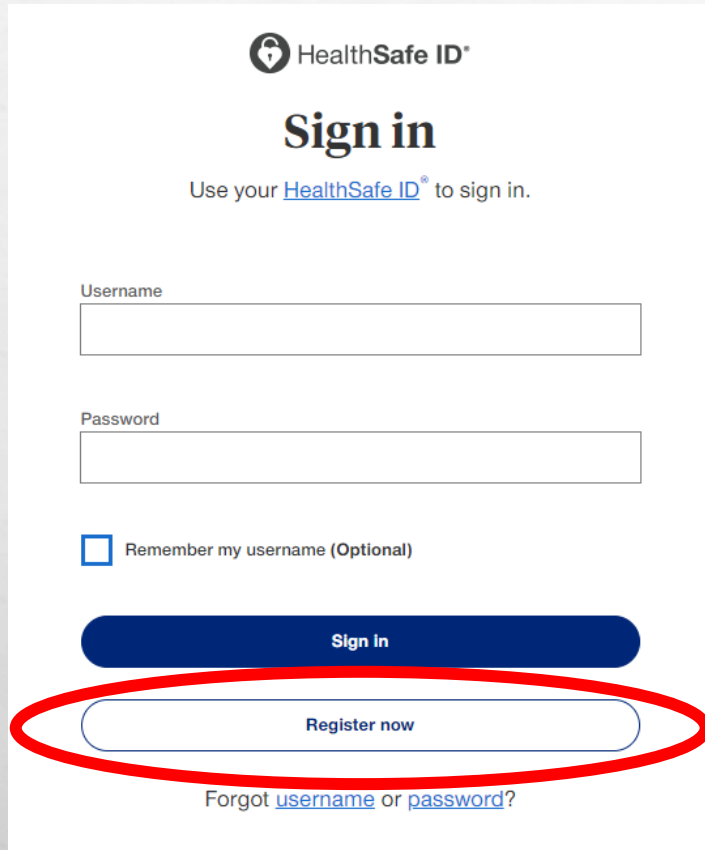
INTERNATIONAL STUDENT INSURANCE



MINNESOTA STATE



Create your Account: www.uhesr.com



HealthSafe ID®

Sign in

Use your [HealthSafe ID®](#) to sign in.

Username

Password

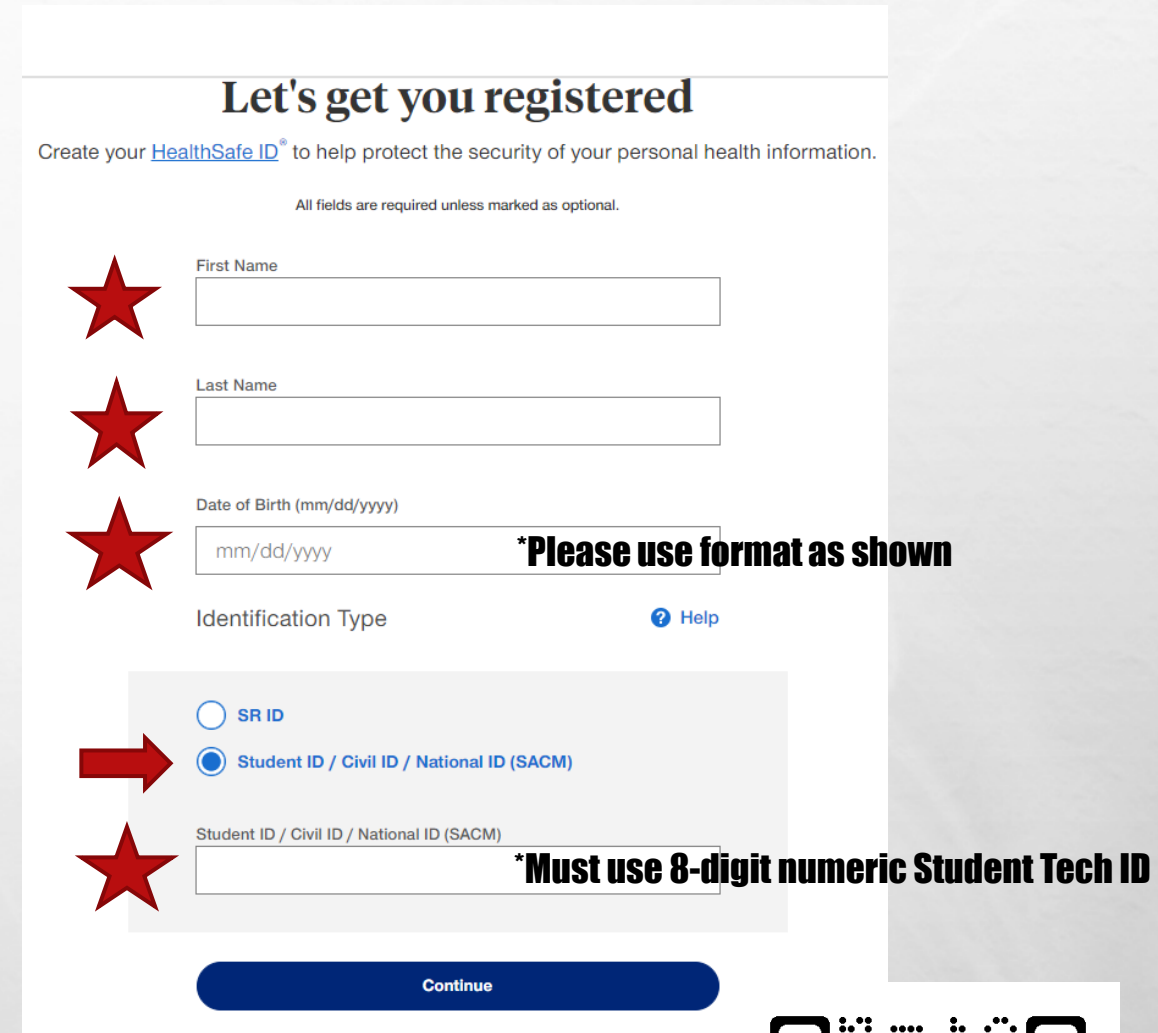
☐ Remember my username (Optional)

Sign in

Register now

Forgot [username](#) or [password](#)?

***You will be notified by email when your account is ready to create, approximately 7-10 days after you submit payment to your school for insurance.**



Let's get you registered

Create your [HealthSafe ID®](#) to help protect the security of your personal health information.

All fields are required unless marked as optional.

First Name

Last Name

Date of Birth (mm/dd/yyyy)

 ***Please use format as shown**

Identification Type [? Help](#)

☐ SR ID

☒ Student ID / Civil ID / National ID (SACM)

Student ID / Civil ID / National ID (SACM)

 ***Must use 8-digit numeric Student Tech ID**

Continue



Complete your Action Items

Action Center

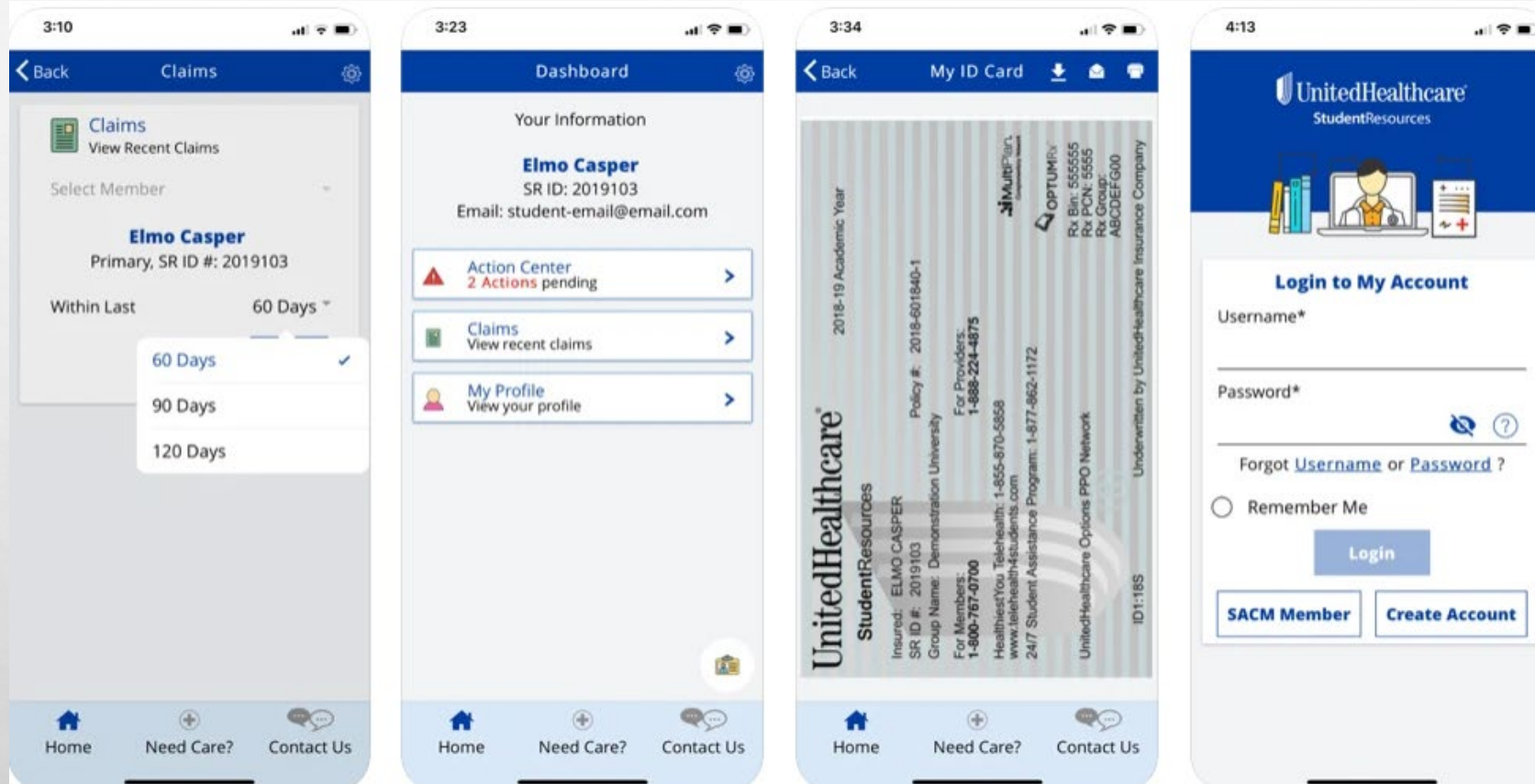


Take Action
3 actions pending

REQUIRED ACTIONS

\$	Have other Medical Insurance?	No	Yes
i	Provide Tax Information	Provide Info	
i	Provide Contact Information	Provide Info	

Download the UHCSR App on your mobile phone for 24/7 access to your insurance information!



You can request a laminated copy on your UHCSR.com/myaccount.
Please allow 7-10 business days to receive the copy.

Schedule of Benefits

With In-Network Providers

<u>DEDUCTIBLE</u>	<u>\$50 (FOR EACH INJURY OR SICKNESS)</u>
<u>COINSURANCE PREFERRED PROVIDER</u>	<u>80% TO \$2,500, THEN 100% THEREAFTER</u>
<u>COINSURANCE OUT-OF-NETWORK</u>	<u>80% TO \$2,500, THEN 100% THEREAFTER</u>
<u>OUT-OF-POCKET MAXIMUM FOR INSURED INDIVIDUAL</u>	<u>\$6,350, PER INSURED PERSON, PER POLICY YEAR</u>
<u>OUT-OF-POCKET MAXIMUM FOR INSURED FAMILY</u>	<u>\$12,700, PER INSURED FAMILY, PER POLICY YEAR</u>

What is a Deductible

A specified amount of money that the insured (you) must pay before the insurance company (UHCSR) will pay a claim.

PATIENT RESPONSIBILITY:

DEDUCTIBLE: \$50 - FOR EACH INJURY OR SICKNESS

Coininsurance

A percentage that you and your insurance pay for your covered medical expenses after you've paid your deductible.

INSURANCE RESPONSIBILITY:

80% UP TO \$2,500* THEN 100% THEREAFTER

PATIENT RESPONSIBILITY:

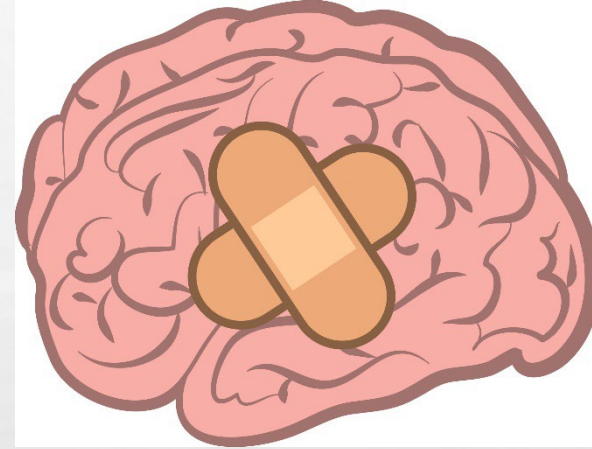
20% UP TO \$2,500*

***For each covered illness or injury, the patient will pay 20% up to \$2,500.
The insurance company will pay the remaining balance.**

MENTAL HEALTH VISITS - ALSO KNOW AS BEHAVIORAL HEALTH

EXAMPLES OF VISIT TYPES:

- **ANXIETY**
- **DEPRESSION**
- **STRESS**
- **POST-PARTUM DEPRESSION**
- **POST-TRAUMATIC STRESS DISORDER (PTSD)**



Off-Campus, In-Network Provider

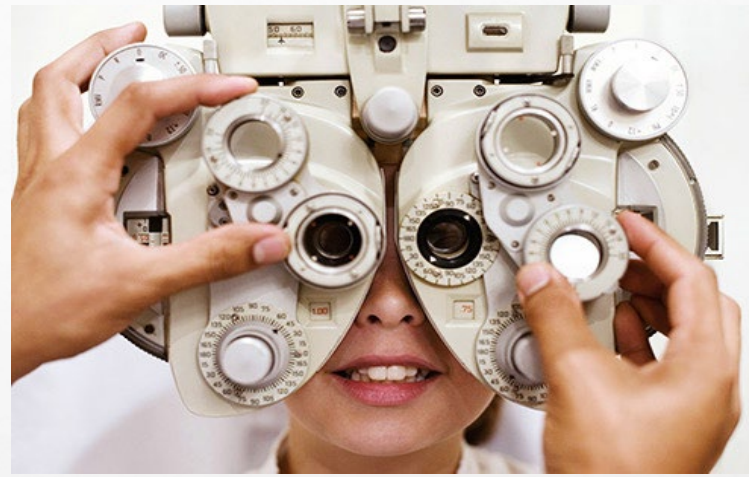
UHCSR insurance pays 80% of final bill.

Student pays \$50 deductible and 20% of visit.

VISION EXAMS

UHCSR SEARCH, KEYWORD: OPTOMETRIST

WHAT'S COVERED THROUGH MEDICAL PLAN



- **ONE VISION EXAM PER POLICY YEAR, WITH AN IN-NETWORK EYE DOCTOR.**
- ***STUDENT WILL PAY A \$50 DEDUCTIBLE.***

INSURANCE PAYS 80% OF THE BILL, UP TO \$100 - STUDENT RESPONSIBLE FOR 20% OF FINAL BILL.

WHAT'S NOT COVERED

- **EYE GLASSES**
- **CONTACT LENSES**
- **NOTE:**
VISION EXAMS DO NOT INCLUDE CONTACT LENS FITTING COSTS.

If you need glasses or contact lenses, look for a place offering sale or discount pricing.



DENTAL IS NOT INCLUDED IN YOUR MEDICAL PLAN

IN THE UNITED STATES, DENTAL INSURANCE IS A SEPARATE COVERAGE. BECAUSE IT IS NOT MANDATORY, WE DO NOT INCLUDE IT IN THIS PLAN BECAUSE IT WOULD GREATLY INCREASE YOUR YEARLY PREMIUM.

OPTIONAL DENTAL & VISION INSURANCE

Optional Dental & Vision insurance is offered through UnitedHealthOne/Golden Rule in your UHCSR student portal. Once logged in, you can access this by clicking on Voluntary Dental/Vision.

****These policies may be purchased anytime throughout the year****

The screenshot displays the UnitedHealthcare StudentResources portal for Saint Cloud State University. At the top, there is a navigation bar with the UnitedHealthcare logo, a COVID-19 update notice, and a login link. Below the navigation bar, a welcome message is centered on the page. A blue button labeled 'Additional Info' is positioned below the welcome message. To the right of the button, there is a 'Policy Year' dropdown menu. Below the 'Additional Info' button, there is a section titled 'To begin, choose a plan description.' with a 'View Plan:' dropdown menu set to 'All'. Two plan options are displayed in a grid. The first option is 'Medical - International Student Plan' with a red cross icon and a button labeled 'Explore Policy'. The second option is 'Voluntary Dental/Vision' with a blue tooth icon and a button labeled 'Read More'. The 'Voluntary Dental/Vision' option is circled in red.

UnitedHealthcare
StudentResources

COVID-19 Updates
Stay informed on resources available to you.

Login to My Account

Saint Cloud State University

ID Card Find Providers Find Pharmacy Helpful Links

Welcome to your student health insurance plan page.
For plan details, including benefits and rates, please refer to the Plan Information section below.

Additional Info

Policy Year

To begin, choose a plan description.

View Plan:

All

Medical - International Student Plan
Policy #2022-1666-4

Explore Policy

Voluntary Dental/Vision

Read More

HOW TO FIND IN-NETWORK PROVIDERS OFF CAMPUS

TO FIND A NETWORK PROVIDER/CLINIC
VISIT:

WWW.UHCSR.COM/STCLOUDSTATE

SELECT UHC OPTIONS PPO

- FIND PROVIDERS
- UPDATE ZIP CODE
- ENTER SEARCH CRITERIA
- SELECT SPECIALTY
- VIEW RESULTS
- RECEIVE COST ESTIMATE

UNITEDHEALTHCARE OPTIONS PPO

United Healthcare

CHOICE PLUS

Home > Find Care & Costs

Find Care & Costs

Search for providers and services

Set a location
Sartell, MN 56377

Search

Recent search activity
No recent search activity.

Estimate your costs
Get clear, up-front price estimates and avoid unplanned expenses. Find costs for services and treatment at any stage in your care journey.

Medical Cost Estimate

Browse for providers

Primary Care Providers

Medical Specialists

Medical Groups

Facilities

Services and Treatments

Questions?

CONTACT: TRISHA FEIA – STUDENT INSURANCE ADVOCATE

PHONE: (320) 308-4855

EMAIL: STUDENTINSURANCE@STCLOUDSTATE.EDU

UHCSR CUSTOMER SERVICE:

1-888-251-6243

WWW.UHCSR.COM/MYACCOUNT