

Linfield University 2023/24 Student Health Insurance

for graduate students (opt-in plans only)

Your student health insurance plan offers:

- Coverage at an affordable rate
- Access to a wide network of providers locally and across the nation
- Wellness-focused coverage
- Member-focused customer service

Eligibility and cost

Graduate students taking courses on campus, who meet the full-time requirement of 6 credits or more, are eligible to purchase the graduate student health insurance.

To enroll visit: Enroll.PacificSource.com/Linfield

Note: Students wanting to purchase coverage must enroll each coverage period, and payment is due at time of enrollment.

How much does it cost?

Standard Calendar Program Coverage Period	Fall Semester 8/15/23-1/31/24	January Term 1/1/24-8/14/24	Spring Semester 2/1/24-8/14/24	
Student Cost	\$2,542.50	\$3,154	\$2,542.50	_
Enrollment Period	8/1/23-8/31/23	12/15/23-1/15/24	1/16/24-2/15/24	-
Accelerated Calendar Program Coverage Period	Fall Semester 9/11/23-1/7/24	Winter Semester 1/8/24-3/31/24	Spring Semester 4/1/24-6/23/24	Summer Semester 6/24/24-9/10/24
Student Cost	\$1,653.50	\$1,167	\$1,167	\$1,097.50
Enrollment Period	9/1/23-9/30/23	1/1/24-1/30/24	3/16/24-4/15/24	6/15/24-7/10/24

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myPacificSource mobile app

View your PacificSource member ID and coverage info any time you need it. Download our free app from the Amazon, Android™, or Apple® app stores. For more information, visit PacificSource.com/mobile.

Learn more

PacificSource.com/ StudentHealth

Phone

855-274-9814 TTY: 711 We accept all relay calls.

Email

StudentHealth@ PacificSource.com

Group no.

G0035862



Online tools available at PacificSource.com

- Through InTouch, our secure website for members, you can view your ID card, claims, status of prior authorizations, accumulated expenses toward your plan's deductibles, and more.
- Use our health and wellness portal to work toward health goals. Access the portal via InTouch.
- Our Provider Directory will help you locate healthcare providers and facilities. Visit PacificSource.com/StudentHealth to access the directory of nationwide providers.
- Print an insurance ID card by visiting PacificSource.com/IDCard.



For more information, visit InTouch.PacificSource.com/ members

Joyages

Let Joyages address the things in life that are hard to talk about - loneliness, stress, depression, anxiety, and suicide - through a confidential, on-demand app.



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Insurance term glossary

Deductible: The amount you owe for healthcare services your health insurance or plan covers before your health insurance or plan begins to pay.

Coinsurance: Your share of the cost of a covered service (in addition to copays), calculated as a percentage of the service cost.

For more definitions.

visit PacificSource.com/ resources/learning-center/ glossary.

provider level.



Get Joyages at OneLink.to/

^Copay applies to ER physician and facility charges only. Copay waived if admitted into hospital. For emergency medical conditions, out-of-network providers are paid at the in-network

Student Health Insurance brokered by USI Insurance Services, 800-251-4246.

Benefits at a glance - Navigator network

	In-network Providers	Out-of-network Providers
Contract-year deductible	\$300	\$900
Out-of-pocket limit	\$3,500	\$10,500
Plan maximum	Unlimited	

In-network and out-of-network provider charges accumulate separately.

Your share of costs

	In-network Providers	Out-of-network Providers
Routine physicals	No deductible, member pays \$0	After deductible, 50%
Well woman visits		
Immunizations		
Office and naturopath visits	No deductible, \$25	After deductible, 50%
Urgent care visits		
Specialist office visits	No deductible, \$50	After deductible, 50%
Mental health/chemical dependency (MHCD) office visits	No deductible, \$20	
Outpatient rehabilitation services	No deductible, \$25	After deductible, 50%
Inpatient or outpatient surgery/services	After deductible, 20%	After deductible, 50%
Advanced Diagnostic Imaging		
Diagnostic and therapeutic radiology and lab	Member pays \$0 up to the first \$400, then 20% after deductible	After deductible, 50%
Emergency room visits	No deductible, \$200^	
Ambulance	After deductible, 20%	
Chiropractic manipulations and acupuncture care (20 visits chiropractic, 12 visits acupuncture)	No deductible, \$25	After deductible, 50%
Prescription drugs (up to a 30-day supply at retail)	Tier 1: No deductible, \$20 Tier 2: No deductible, \$35 Tier 3: No deductible, \$55 Specialty Drugs Tier 4: No deductible, \$80 (Drugs on the PacificSource Preventive Drug List have \$0 copay and are not subject to contract-year deductible)	
Linfield Health Center	Office visits are covered at 100%, up to \$15 maximum per visit, no deductible	

\$15 maximum per visit, no deductible

Dental and vision included for members through age 18 only. Visit PacificSource.com/StudentHealth for benefit information.

This is a brief summary of benefits. Refer to the Student Policy for additional information or a further explanation of benefits, limitations, and exclusions.

