



# George Fox University

## 2023-24 student health insurance

For undergraduates (U.S. and international)

### Your student health insurance plan includes:

- Gold-level 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

All full-time undergraduate students taking a minimum of 12 credit hours (excluding DPS) are automatically enrolled in this insurance plan at registration, unless proof of comparable coverage is provided. Please visit [PacificSource.com/GeorgeFox](https://PacificSource.com/GeorgeFox) to learn more about your health plan.

### Cost

| Coverage Period            | Fall<br>08/16/2023 – 12/31/2023 | Spring & Summer<br>01/01/2024 – 08/15/2024 |
|----------------------------|---------------------------------|--|
| Undergraduate student cost | \$1,298                         | \$2,137                                    |

The amounts above may include fees charged by your school to cover administrative costs associated with offering the health plan.

### Online tools available at [PacificSource.com](https://PacificSource.com)

- Through **InTouch**, our secure website for members, you can view your member 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/GeorgeFox](https://PacificSource.com/GeorgeFox) to access the nationwide directory of providers.
- **Print an insurance ID card** by visiting [PacificSource.com/IDCard](https://PacificSource.com/IDCard).

### 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](https://PacificSource.com/mobile).

### Learn more

[PacificSource.com/GeorgeFox](https://PacificSource.com/GeorgeFox)

### Phone

855-274-9814

TTY: 711

We accept all relay calls.

### Email

[StudentHealth@PacificSource.com](mailto:StudentHealth@PacificSource.com)

### Group no.

G0035885



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## Benefits at a glance – Navigator network

|                                 | Health and Counseling Center and PacificSource |                          |
|---------------------------------|--|--------------------------|
|                                 | In-network Providers                           | Out-of-network Providers |
| <b>Contract-year deductible</b> | \$500  | \$1,000                  |
| <b>Out-of-pocket maximum</b>    | \$4,000  | \$8,000                  |
| <b>Plan maximum</b>             | Unlimited                                      |                          |

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

## Your share of costs

|   | In-network Providers  | Out-of-network Providers |
|---|---|--------------------------|
| <b>Preventive care (routine physicals, well woman visits, immunizations)</b>                                    | No deductible, member pays \$0  | Not covered              |
| <b>Office visits (primary care, naturopath, specialist, urgent care, and mental health/chemical dependency)</b> | After deductible, 20%   | After deductible, 40%    |
| <b>Outpatient rehabilitation services</b>   | After deductible, 20%   | After deductible, 40%    |
| <b>Inpatient or outpatient surgery/services</b>   | After deductible, 20%   | After deductible, 40%    |
| <b>Advanced diagnostic imaging</b>  | After deductible, 20%   | After deductible, 40%    |
| <b>Diagnostic and therapeutic radiology and lab</b>   | After deductible, 20%   | After deductible, 40%    |
| <b>Emergency room visits</b>  | After deductible, \$100 plus 20%^   |                          |
| <b>Ambulance</b>  | After deductible, 20%   |                          |
| <b>Chiropractic care (20 visits per school year), acupuncture (12 visits per school year)</b>                   | After deductible, 20%   | After deductible, 40%    |
| <b>Prescription drugs</b><br>(up to a 30-day supply at retail, 31- to 90-day supply through mail order)         | Retail pharmacy:<br>Tier 1: No deductible, \$20<br>Tier 2: No deductible, \$40<br>Tier 3: No deductible, \$60<br>Tier 4: No deductible, \$60<br><br>Mail order:<br>(31- to 90-day supply):<br>Tier 1: No deductible, \$50<br>Tier 2: No deductible, \$100<br>Tier 3: No deductible, \$150 | No deductible, 90%       |
| <b>Health and Counseling Center</b>   | Eligible expenses incurred at the Health and Counseling Center are covered at 100%.   |                          |

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

^Copoly 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 provider level.

## InTouch for Members



Create your InTouch account or log in using the code above, or at [InTouch.PacificSource.com/members](https://PacificSource.com/members).

## Insurance term glossary

**Deductible:** The amount you owe for covered services 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/glossary](https://PacificSource.com/glossary).