

# UnitedHealthcare

## Medical Rates for WILLIAM CAREY UNIVERSITY MEDICAL STUDENTS

Effective Date: 8/01/2025 | Customer Number 00911607

	Option 2 - STANDARD		Option 1 - BUY-UP	
Medical Plan Name	ENS6 MOD (Premier)		ENRO (Open Access)	
Rx Plan Name	Rx Plan: L08		Rx Plan: L08	
Product	Choice + INS UHIC *		Choice + INS UHIC *	
Option	ENS6 MOD		ENRO	
Plan Offering	Dual Option		Dual Option	
HRA or HSA	No		No	
<b>Benefits*</b>	<b>Network Single/Family</b>		<b>Network Single/Family</b>	
Office Copay (PCP/SPC)	PCP \$0/\$0 Ltd 3, SPC \$0/\$0 Ltd 3		PCP \$40, SPC \$80	
Hospital Copays	OP \$250 POD, IP \$250 POD		OP D&C, IP D&C	
UC/ER	UC D&C, ER \$250 POD		UC \$50, ER D&C	
Major Diagnostics	MD D&C: DDP		MD D&C: DDP	
X-Ray and Lab	X-Ray D&C, Lab D&C: DDP		X-Ray \$75, Lab \$0: DDP	
Other	N/A		N/A	
Deductible	\$3,000/\$9,000 (Emb)		\$2,500/\$5,000 (Emb)	
Coinsurance	70%		70%	
Out-of-Pocket	\$7150/\$14,300		\$6,000/\$12,000	
Pharmacy	\$10/\$75/\$150/\$300, 3.0 MO (Adv PDL), Natl		\$10/\$75/\$150/\$300, 3.0 MO (Adv PDL), Natl	
	<b>Out of Network Single/Family</b>		<b>Out of Network Single/Family</b>	
Deductible	\$5000/\$10,000 (Emb)		\$5,000/\$10,000 (Emb)	
Coinsurance	50%		50%	
Out of Pocket	\$10,000/\$20,000		\$10,000/\$20,000	
	<b>Rates (Billed)</b>		<b>Rates (Billed)</b>	
<b>Rates</b>	<b>Monthly</b>	<b>Semester</b>	<b>Monthly</b>	<b>Semester</b>
Student	<b>\$269.51</b>	<b>\$1,617.06</b>	<b>\$293.06</b>	<b>\$1,758.36</b>
Student + Spouse	<b>\$646.71</b>	<b>\$3,880.26</b>	<b>\$703.22</b>	<b>\$4,219.32</b>
Student + Child(ren)	<b>\$454.19</b>	<b>\$2,725.14</b>	<b>\$493.86</b>	<b>\$2,963.16</b>
Student + Family	<b>\$872.99</b>	<b>\$5,237.94</b>	<b>\$949.28</b>	<b>\$5,695.68</b>

PCP = Primary Care Physician

SPC = Specialist

OP POD = Out Patient Per Occurrence Deductible

IP POD = In-Patient Per Occurrence Deductible

UC D&C = Urgent Care is subject to Deductible & Co-Insurance

MD D&C: DDP = Major Diagnostic is subject to Deductible & Co-Insurance

Members should seek a Designated Diagnostic Provider for lower out of pocket expenses.

PDL = Prescription Drug List

**Dental Services - in case of emergency only under UHC**

**Vision - not covered under UHC**

**Coverage begins 8-1-2025 and is billed by semester**

**Fall covers 8-1-2025 to 1-31-2026**

**Spring covers 2-1-2026 to 7-31-2026**