

VIU Student Health Insurance Information Sheet

| Medical Coverage Schedule of Benefits | USD |
|---|--|
| Maximum per illness/injury | \$300,000 (Overall Maximum USD 1,000,000) |
| Coinsurance Percentages | Plan pays 100% of eligible charges |
| Outpatient copayment | \$50 |
| Hospital Services | |
| Inpatient Room & Board | 100% (URC) ¹ |
| Intensive Care | 100% (URC) ¹ |
| Emergency Room Deductible (USA only) | For Injury: \$0 For Illness resulting in direct hospitalization: \$0 For Illness which does not result in direct hospitalization: \$250 |
| Outpatient Services | |
| Physical Therapy | 1 visit per day to a maximum of USD 2,500 / EUR 1.750 per Period of Insurance |
| Physician Visit | 100% (URC) ¹ |
| Prescription Drugs | 100% (URC) ¹ |
| Other Services | |
| Eligible Medical Expenses | 100% (URC) ¹ |
| Durable Medical Equipment | 100% (URC) ¹ |
| Local Ambulance | Per Injury: 100% (URC) ¹ Per Illness (only if admitted Inpatient): 100% (URC) ¹ |
| Dental | Sudden & Unexpected Pain: USD 200 / EUR 140 per Occurrence (limited to 3 x per Period of Insurance) Accident exclusively involving dental treatment: USD 500 / EUR 350 per Period of Insurance Major medical injury that also affects teeth: Medical benefits up to the Policy Limit |
| Emergency Medical Evacuation | Up to Maximum Limit |
| Emergency Reunion | USD 15,000 / EUR 10,500 lifetime maximum benefit |
| Urgent Travel Expense (Compassionate Home Visit) | Up to USD 1,000 / EUR 700 payable for transportation to Home Country in the event of death of a close Family Member |
| Return of Mortal Remains | Up to USD 25,000 / EUR 17,500 |
| Sports Coverage | 100% (URC) ¹ for eligible expenses incurred while participating in organized interscholastic or club sporting activities (non professional) (refer to insurance conditions for exclusions) |
| Accidental Death & Dismemberment | Up to USD 25,000 / EUR 17,500 |

¹ **URC = Usual, Reasonable and Customary charges:** The amount that will be covered for a particular procedure through this plan is defined through the fee charged for a certain specified procedure by a particular type of health care provider practicing within a specified geographic area.

- After purchasing the insurance, you must also call the insurance company (International Medical Group) to make sure that you are added into their International Health Insurance plan.
- After purchasing the International Health Insurance plan through International Medical Group, you will have until the last day of add/drop of that semester to cancel the insurance payment (read below for conditions).

If you plan to cancel VIU's health insurance, you must meet the following conditions:

1. You are transferring out of VIU to another institution.
2. You have to leave VIU for a family emergency and have to leave the country.
3. You have purchased international health insurance from a vendor outside of VIU. (You must provide proof of coverage that meets VIU's requirements of medical coverage and complete the Health Insurance Waiver.)

Once you have meet one or more of these above requirements to cancel, you will need to sign the Cancellation Request Form stating that you have cancelled your insurance coverage and you will no longer be covered under the policy of International Medical Group.

Please note that **Virginia International University** is not responsible for any problem that you may have with the insurance company. If you have any questions or problems, and for *outpatient treatment or hospitalization or emergency ward treatment*, please call: 1-800-628-4664.

I have read, I understand, and I agree that Virginia International University is not responsible for any problems that I may have with the International Medical Group. By purchasing the International Health Insurance plan, I understand that I have an agreement with the international health insurance company and not with Virginia International University.

Name: _____

Signed: _____ Date: _____