

# STUDENT HEALTH ADVANTAGE<sup>SM</sup>



WORLDWIDE MEDICAL INSURANCE FOR  
INTERNATIONAL STUDENTS AND SCHOLARS



Hello. Hola. Hallo. Hej. 您好.

You can greet someone in a foreign country in many ways. When you travel, stay safe and secure by saying hello to Student Health Advantage<sup>SM</sup>, a one-of-a-kind international medical insurance plan that brings you Global Peace of Mind<sup>®</sup> when you're traveling abroad.

G L O B A L   
*peace of mind* <sup>®</sup>



## Secure, Reliable Medical Insurance

As an international student or scholar, the thrill of studying abroad is extraordinary. Your new surroundings are amazing and you're involved in new and exciting experiences. You're seeing and visiting places for the first time, while receiving the benefits of a long-term education.

Caught up in all of the excitement, you may not think about falling ill or becoming injured during your studies. Without warning, your experience abroad can quickly become frightening and risky if you're not prepared for a medical emergency. As an international student, peace of mind is a priority when you study abroad.

Your educational adventure or cultural exchange program should be enjoyable and gratifying. Maintaining the ability to be flexible and responsive, International Medical Group® (IMG®) has developed Student Health Advantage<sup>SM</sup>, an international medical plan designed to specifically meet the needs of international students, scholars, and people involved in long-term educational and cultural exchange programs. The plan offers a robust package of benefits while outside your home country available 24 hours a day, providing you with Global Peace of Mind®. After all, you are global. Your medical insurance should be too.

## Student Health Advantage<sup>SM</sup>

- » Meets U.S. student, scholar, and cultural exchange program visa requirements
- » Coverage for individuals or groups of two or more primaries and their dependents
- » Mental & nervous disorders and substance abuse coverage
- » Intercollegiate/interscholastic/intramural or club sports coverage
- » Maternity coverage (Platinum only)
- » International emergency care

## How Does the United States Affordable Care Act (ACA) Affect My Coverage?

**Non-U.S. Citizens:** As non-resident aliens, international students, scholars, and people involved in cultural exchange programs on F, J, M, and Q visas (and certain family members) are not subject to the individual mandate for their first five years in the U.S. All other J categories (teacher, trainee, work and travel, au pair, high school, etc.) are not subject to the individual mandate for two years (out of the past six). Since international students are not subject to the mandate, they are eligible to purchase Student Health Advantage.

**U.S. Citizens:** Under the ACA, all U.S. citizens, nationals, and resident aliens are required to purchase minimum essential coverage (ACA-compliant coverage), unless they are exempt. Exempt U.S. citizens include U.S. citizens who reside outside of the U.S. for 330 of any 365-day period, or have a tax home (main place of work or employment, or if you don't have a main place of work or employment, your main residence) in a foreign country, and are a bona fide resident of a foreign country.

*Please note that this insurance is not subject to, and does not provide benefits required by, ACA. Since January 1, 2014, ACA requires U.S. citizens, U.S. nationals and resident-aliens to obtain ACA compliant insurance coverage unless they are exempt from ACA (international students on F, J, M and Q visas (and certain family members of students) are not subject to the individual mandate for their first 5 years in the U.S. All other J categories - teacher, trainee, work and travel, au pair, high school, etc. - are not subject to the individual mandate for 2 years out of the past six). Penalties may be imposed on persons who are required to maintain ACA compliant coverage but do not do so. Eligibility to purchase or renew this product, or its terms and conditions, may be modified or amended based upon changes to applicable law, including ACA. Please note that it is solely your responsibility to determine if ACA is applicable to you and the Company and IMG shall have no liability whatsoever, including for any penalties that you may incur, for your failure to obtain required ACA compliant coverage. For information on whether ACA applies to you or whether you are eligible to purchase Student Health Advantage, please see IMG's Frequently Asked Questions at [imglobal.com/en/client-resources/PPACA-FAQ.aspx](http://imglobal.com/en/client-resources/PPACA-FAQ.aspx). The materials available on this website are for informational purposes only and not for the purpose of providing legal advice. You should contact your attorney to obtain advice with respect to any particular issue or problem.*



# The IMG Advantage

Since 1990, IMG has dedicated its efforts to providing international medical insurance, travel insurance, and world-class services to the international community. We understand the intricacies of international healthcare—it's our specialty. Our team of experienced professionals is committed to helping you solve any problems, while making sure you receive superior service.

Many companies claim to offer great service. At IMG, we've set a higher industry standard by integrating independent credentialing services with in-house, fully owned and operated service divisions. These accreditations promote continuous improvement in quality and efficiency while ensuring ongoing compliance. This allows us to deliver the world-class service you deserve. We've served over a million people in more than 170 countries, and we're with you, wherever you go—bringing support for all your insurance needs.

## International Service Centers

To ensure that we are available when and where needed, we maintain multiple international service and assistance centers. From our offices, we provide administrative support and marketing services to our international producers, and claims administration and emergency medical assistance to those living and traveling worldwide. Our offices offer the benefit of multiple time zones and services in tune with local practices.

## Single Resource

All IMG service centers are designed to have the necessary services, staff, and capabilities to provide international service to you, regardless of your location. Every department and service division is integrated on the same proprietary system and in real-time. One call. One company. We are your single international resource.

## Service Without Obstacles

Working in multiple time zones, in multiple languages, and with multiple currencies is not an obstacle for us. We maintain an international staff for our international client base. Our claims specialists and multilingual customer service professionals work seamlessly with you to communicate without barriers. We back up what we promise—Coverage Without Boundaries® that provides Global Peace of Mind®.

## International Provider Access<sup>SM</sup> (IPA)

IMG's proprietary network of over 17,000 accomplished physicians and facilities allows you to access quality care worldwide. Our direct billing arrangements can also ease the time and up-front expense at select providers.

## International Emergency Care

When you're overseas and a medical emergency occurs, you may not be able to wait for regular business hours. With our onsite physician and registered nurses, you have 24-hour access to highly qualified coordinators of emergency medical services and international treatment.

## Accessible Technology

Through technology we make it easy for you to reach us and vice versa. We provide you with a secure member website to quickly and easily access real-time information, submit claims, view the status of your claims, and manage your accounts. You also have access to Live Chat to communicate directly to a Customer Care representative online, and you can easily reach us via email. We respond to all inquiries promptly, with our phone and fax lines open as well.

## Financial Stability

Owned by Sirius Group, a multibillion-dollar, AM Best "A-" rated insurance industry leader, IMG is uniquely positioned to deliver the Global Peace of Mind® our members need.





# SHA Summary of Benefits

Eligible Medical Expenses are limited to Usual, Reasonable and Customary Limits per Period of Coverage unless stated as Maximum Limit

Maximum Limit	Student: \$500,000; Dependent: \$100,000
Maximum Limit per Illness or Injury	Student: \$300,000; Dependent: \$100,000
Deductible	\$100 per illness or injury Student health center: \$5 copay per visit
Coinsurance	Outside of the U.S.: Company pays 100% In PPO network or student health center within the U.S.: Company pays 100% Out of PPO network within the U.S.: Company pays 80% of eligible expenses up to \$1,000; then 100% thereafter
Eligible Medical Expenses	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally
COVID-19/SARS-CoV-2 Coverage	COVID-19/SARS-CoV-2 shall be considered by the Company the same as any other Illness or Injury, subject to all other Terms and conditions of this insurance
Teladoc Consultation (Groups only)	Company pays 100% within the U.S.; mental and nervous disorders not covered
Hospitalization / Room & Board	Average semi-private room rate, including nursing and ancillary services
Hospital Emergency Room Injury	Company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally. Not subject to emergency room deductible
Hospital Emergency Room Illness	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally. Subject to a \$250 deductible for each visit that doesn't result in a direct hospital admission
Intensive Care	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally
Mental or Nervous/Substance Abuse	Outpatient: \$50 per day; \$500 maximum limit. Inpatient: After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally up to \$10,000 maximum limit
Prescription Drugs and Medication	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally; \$250,000 period of coverage limit for insured student and \$100,000 period of coverage limit for dependents. Retail pharmacy prescription drugs and medication are paid at 50% out-of-network and international with a 90 day dispensing maximum.

All coverage and benefits in this Policy are in United States (U.S.) dollars. Benefits are subject to the exclusions and limitations and are payable only at Usual, Reasonable and Customary charges. This is a summary and does not supersede in anyway the Certificate of Insurance and governing policy documents (together the "Insurance Contract"). The Insurance Contract is the only source of the actual benefits provided. Eligible medical expenses are limited to usual, reasonable and customary.

# SHA Summary of Benefits

Eligible Medical Expenses are limited to Usual, Reasonable and Customary Limits per Period of Coverage unless stated as Maximum Limit

Physical Therapy <i>(Medical order or treatment plan required)</i>	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally; limit one visit per day
Emergency Local Ambulance	\$350 per illness resulting in an inpatient hospitalization or injury
Dental	Non-emergency treatment at a dental provider due to an accident - \$500 period of coverage limit per injury; unexpected pain to sound, natural teeth - \$350 period of coverage limit
Interfacility Ambulance Transfer <i>(For services rendered in the U.S.)</i>	Company pays 100%. Transfer must be a result of an inpatient hospital admission
Emergency Medical Evacuation	\$500,000 maximum limit
Emergency Reunion	\$50,000 maximum limit
Return of Mortal Remains	\$50,000 maximum limit
Political Evacuation and Repatriation	\$10,000 maximum limit
Intercollegiate/Interscholastic/Intramural or Club Sports	\$5,000 period of coverage limit per illness or injury
Incidental Trip Coverage	Up to a cumulative 14 days (available for non-U.S. residents only)
Pre-existing Conditions	Charges excluded until after 12 months of continuous coverage
Terrorism	\$50,000 maximum limit
Accidental Death & Dismemberment	Student: \$25,000 principal sum; Spouse: \$10,000 principal sum; Dependent child: \$5,000 principal sum Accidental dismemberment percentage of principal sum
Personal Liability <i>(Secondary to any other insurance)</i>	\$10,000 combined maximum limit Injury to third person: subject to a \$100 per injury deductible Damage to third person's property: subject to a \$100 per damage deductible

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# SHA Platinum Summary of Benefits

Eligible Medical Expenses are limited to Usual, Reasonable and Customary Limits per Period of Coverage unless stated as Maximum Limit

Maximum Limit	Student: \$1,000,000; Dependent: \$100,000
Maximum Limit per Illness or Injury	Student: \$500,000; Dependent: \$100,000
Deductible	For treatment received outside of the U.S.: \$25 per illness or injury For treatment received within the U.S.: PPO provider: \$25 per illness or injury; non-PPO provider: \$50 per illness or injury; student health center: \$5 copay per visit
Coinsurance	Outside of the U.S.: Company pays 100% In PPO network or student health center within the U.S.: Company pays 100% Out of PPO network within the U.S.: Company pays 80% of eligible expenses up to \$5,000; then 100% thereafter
Eligible Medical Expenses	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally
COVID-19/SARS-CoV-2 Coverage	COVID-19/SARS-CoV-2 shall be considered by the Company the same as any other Illness or Injury, subject to all other Terms and conditions of this insurance
Teladoc Consultation (Groups only)	Company pays 100% within the U.S.; mental and nervous disorders not covered
Hospitalization / Room & Board	Average semi-private room rate, including nursing and ancillary services
Maternity and Newborn Care	\$5,000 maximum limit. Benefit includes newborn routine care during the first 31 days of life After deductible is met, company pays 60% of eligible expenses out-of-network (U.S.), 80% in-network (U.S.) and 100% internationally
Hospital Emergency Room Injury	Company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally. Not subject to emergency room deductible
Hospital Emergency Room Illness	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally. Subject to a \$250 deductible for each visit that doesn't result in a direct hospital admission
Intensive Care	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally
Mental or Nervous/Substance Abuse	Outpatient: \$50 per day; \$500 maximum limit. Inpatient: After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally up to \$10,000 maximum limit.
Prescription Drugs and Medication	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally; \$250,000 period of coverage limit for insured student and \$100,000 period of coverage limit for dependents. Retail pharmacy prescription drugs and medication are paid at 50% out-of-network and international with a 90 day dispensing maximum.
Physical Therapy (Medical order or treatment plan required)	After deductible is met, company pays 80% of expenses out-of-network (U.S.) or 100% in-network (U.S.) and internationally; limit one visit per day

All coverage and benefits in this Policy are in United States (U.S.) dollars. Benefits are subject to the exclusions and limitations and are payable only at Usual, Reasonable and Customary charges. This is a summary and does not supersede in anyway the Certificate of Insurance and governing policy documents (together the "Insurance Contract"). The Insurance Contract is the only source of the actual benefits provided. Eligible medical expenses are limited to usual, reasonable and customary.

# SHA Platinum Summary of Benefits

Eligible Medical Expenses are limited to Usual, Reasonable and Customary Limits per Period of Coverage unless stated as Maximum Limit

Emergency Local Ambulance	\$750 per illness resulting in an inpatient hospitalization or injury
Dental	Non-emergency treatment at a dental provider due to an accident - \$500 period of coverage limit per injury; unexpected pain to sound, natural teeth - \$350 period of coverage limit
Interfacility Ambulance Transfer (For services rendered in the U.S.)	Company pays 100%. Transfer must be a result of an inpatient hospital admission
Emergency Medical Evacuation	\$500,000 maximum limit
Emergency Reunion	\$50,000 maximum limit
Return of Mortal Remains	\$50,000 maximum limit
Political Evacuation and Repatriation	\$10,000 maximum limit
Intercollegiate/Interscholastic/Intramural or Club Sports	\$5,000 period of coverage limit per illness or injury
Incidental Trip Coverage	Up to a cumulative 14 days (available for non-U.S. residents only)
Pre-existing Conditions	Charges excluded until after six months of continuous coverage
Terrorism	\$50,000 maximum limit
Accidental Death & Dismemberment	Student: \$25,000 principal sum; spouse: \$10,000 principal sum; dependent child: \$5,000 principal sum; accidental dismemberment percentage of principal sum
Personal Liability (Secondary to any other insurance)	\$10,000 combined maximum limit Injury to third person: Subject to a \$100 per injury deductible Damage to third person's property: Subject to a \$100 per damage deductible

All coverage and benefits in this Policy are in United States (U.S.) dollars. Benefits are subject to the exclusions and limitations and are payable only at Usual, Reasonable and Customary charges. This is a summary and does not supersede in anyway the Certificate of Insurance and governing policy documents (together the "Insurance Contract"). The Insurance Contract is the only source of the actual benefits provided. Eligible medical expenses are limited to usual, reasonable and customary.



## Eligibility

To be eligible to apply to the Student Health Advantage plan, you must:

- » Be a participant: a student, scholar, intern, teacher, or trainee enrolled in an educational or cultural exchange program for the purposes of teaching, study, research, or receiving on the job training for a temporary period of time
- » Be the spouse of a participant or children of a participant and residing outside his/her primary country of residence for a temporary period of time. Primary applicant must hold a J1, M1, F1 or A1 visa, and spouse must apply with primary applicant—they cannot apply alone
- » Be at least 31 days old but not yet 65 years old
- » Be physically and legally residing in the destination country with the intent to reside there for at least 30 days on the effective date and at renewal
- » Not be hospitalized, disabled, pregnant, or HIV+ on the initial effective date

## Enrollment Process:

Before you begin your travel, simply apply online or fill out the application and calculate the estimated premium for the time period you, your group, and/or your dependents will be traveling. Once you have completed the application, return it to your insurance agent and/or IMG.

Eligible individuals listed on the application and for whom premiums have been paid will be covered from the latest of the following dates:

1. The date IMG approves your completed application and receives the appropriate premium
2. The date you depart from your primary country of residence
3. The date requested on your application

Eligible individuals may pay their rates on a monthly basis, but will incur a 4 percent administration fee.

## SHA Optional Riders

**ADVENTURE SPORTS RIDER:** The Adventure Sports Rider is available for eligible participants. Certain activities designated as adventure sports can be covered up to the maximums listed below. Some activities are never covered regardless of whether or not the Adventure Sports Rider is issued. For a list of activities which can be considered to be adventure sports, a sample rider can be provided upon request.

*(Available to insureds through age 64)*

## Fulfillment Kits:

IMG processes applications in a quick, timely manner. Once processing is complete, IMG will mail and/or email the fulfillment kit(s) to the address/email listed in the application. The fulfillment kit(s) will include an IMG identification card(s) and the insurance certificate providing a complete description of the rights and benefits under the contract. For your convenience, we will send you this information you may also access it from the IMG website.

If you do not choose online fulfillment, IMG will mail your fulfillment materials. This may cause delays. We recommend online fulfillment for immediate access to your coverage information.

## Conditions of Coverage:

**1)** Coverage and benefits are subject to the deductible limits, and coinsurance, and all terms of the insurance contract, which includes the master policy and all governing documents as summarized in the certificate of insurance. **2)** Coverage under a Student Health Advantage plan is secondary to any other coverage. **3)** Coverage and benefits are for eligible medical expenses which are medically necessary and usual, reasonable, and customary. **4)** Charges must be administered or ordered by a licensed physician. **5)** Charges must be incurred during the period of coverage.

## Renewal of Coverage:

Eligible insureds whose initial coverage is at least three months can request coverage under the plan be renewed monthly for up to 12 month periods, for a maximum of 60 continuous months, as long as the premium is paid when due and the insured continues to meet the eligibility requirements of the plan.

AGE	MAXIMUM LIMIT PER INJURY OR ILLNESS
Through age 49	\$50,000
50 - 59	\$30,000
60 - 64	\$15,000

*\*Benefits are subject to exclusions and limitations. This is only a summary and does not supersede in any way the Certificate of Insurance and governing policy documents (together the "Insurance Contract"). The Insurance Contract is the only source of the actual benefits provided.*

## Precertification:

Certain treatment and supplies including hospital admission, inpatient or outpatient surgery, and other procedures as noted in the certificate wording, must be precertified for medical necessity, which means the insured person or their attending physician must communicate with an IMG representative at the number listed on the IMG ID card prior to admission to a hospital, before receiving certain treatments and supplies or performance of a surgery. In case of an emergency admission, the precertification must be made within 48 hours of the admission, or as soon as reasonably possible. If a hospital admission or a surgery is not precertified, eligible claims and expenses will be reduced by 50 percent. It is important to note that precertification is only a determination of medical necessity, not an assurance of coverage, verification of benefits, or a guarantee of payment. All medical expenses eligible for reimbursement must be medically necessary and will be paid or reimbursed at usual, reasonable, and customary rates. Please refer to the certificate wording for full details of the precertification requirements.

Contact IMG at **+1.317.655.4500** or **acm. Please be sure to send any private information in a secure manner.**

**Note:** You may begin the precertification process through the MyIMG section of [imglobal.com](http://imglobal.com). Simply look for the precertification option. You will be asked to provide the required information, which can then be submitted electronically. Once we have received all required information and medical records, our utilization management and review team will review the information provided and normally responds to the insured person or the provider within two business days. Please note that this online service will only initiate the process for treatment and supplies outlined in the contract, and it should not be used to request precertification for emergency admissions, procedures or evacuations.

## Claims Payment:

All benefits payable under Student Health Advantage are subject to the terms and conditions in the certificate of insurance. To make claim processing efficient, claims for eligible medical expenses may be paid in two ways:

1. Eligible expenses that have been paid by or on behalf of the insured person may be reimbursed by check or by wire directly to the insured person
1. Eligible expenses that have not yet been paid by the insured person may, at the option of IMG, be paid either to the insured person or directly to the provider

Claims must be presented to IMG for payment within 180 days from the date the claim was incurred.

**Claim form can be submitted online at [imglobal.com/member](http://imglobal.com/member)**, or emailed securely to [insurance, or mailed to International Medical Group, P.O. Box 9162, Farmington Hills, MI 48333 USA. All IMG contact numbers, claim forms, and Certificate of Insurance are included in the fulfillment kit. IMG may also be contacted by fax at 1.317.655.4505.](mailto:insurance<imgglobal.com)



# INNOVATIVE TECHNOLOGY & MEMBER SERVICES

## ■ Self-Service Member Portal



MyIMG<sup>SM</sup> provides service at your fingertips, giving you the information and tools to manage your IMG plans anytime, anywhere, through award-winning, easy-to-use technology. You'll have immediate access to these important resources online, including our 24/7/365 service centers, plan document access, claims management tools, Explanations of Benefits, and much more.

## ■ Pharmacy Discount Savings



Universal Rx is a discount savings program that allows you to purchase prescriptions from one of 35,000 participating pharmacies in the U.S. and receive the lower of **1)** Universal Rx contract price or **2)** the pharmacy regular retail price. This network offers a simplified claims process with minimal paperwork for the member if they visit an in-network provider.

*This program is not insurance coverage; it is purely a discount program.*

## ■ Teladoc (For groups only)



Teladoc provides access to a national network of board-certified doctors and pediatricians in the U.S. who are available 24 hours a day, seven days a week, 365 days a year to help diagnose, treat and prescribe medication (when necessary and available) for many non-emergent medical issues via phone or online video consultations. Teladoc does not replace existing primary care physician relationships, but supplements them as a convenient, affordable alternative for non-emergency medical care. The use of Teladoc will be considered as treatment inside the U.S. - PPO Network.

## ■ U.S. Network Access



UnitedHealthcare provides travelers in the U.S. with direct access to one of the largest networks of providers in the U.S. that includes:

- » Over 1.4M physicians
- » 6,797 hospitals
- » Over 45,000 clinics
- » 67,000 pharmacies
- » 1,800 convenience clinics

## ■ International Provider Access<sup>SM</sup>



Travelers outside of the U.S. can also enjoy access to quality healthcare worldwide with our proprietary IPA network that includes:

- » Over 18,550 physicians and facilities
- » Direct billing arrangements that minimize time and upfront expense

*\*Benefits are subject to exclusions and limitations. This is only a summary and does not supersede in any way the Certificate of Insurance and governing policy documents (together the "Insurance Contract"). The Insurance Contract is the only source of the actual benefits provided.*





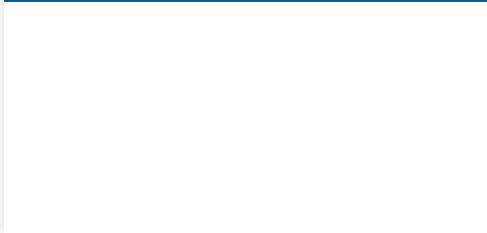
# STUDENT HEALTH ADVANTAGE<sup>SM</sup>



GLOBAL  
*peace of mind*<sup>®</sup>



### Producer Contact Information



*Coverage is underwritten and issued by Sirius Specialty Insurance Corporation, rated "A-" (excellent) by A.M. Best and A- by Standard & Poor's (at the time of printing).*

*This invitation to inquire allows eligible applicants an opportunity to seek information about the insurance offered and is limited to a brief description of any loss for which benefits may be payable.*

*Benefits are offered as described in the Insurance Contract. Benefits are subject to all deductibles, coinsurance, provisions, terms, conditions, limitations and exclusions in the Insurance Contract. Certain contracts do contain a pre-existing condition exclusion and do not cover losses or expenses related to a pre-existing condition.*

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