

# Lewis & Clark 2025/26 Student health insurance

For graduate students

# Your student health insurance plan offers:

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

# **Eligibility and cost**

All graduate students are strongly encouraged, but not required, to purchase Student Health Insurance. To enroll, visit <a href="Enroll-PacificSource.com/LClark">Enroll-PacificSource.com/LClark</a>. Payment is due at time of enrollment. Enrollment periods are listed in the table below. The Fall enrollment deadline is **September 16**, **2025**, and the Spring enrollment deadline is **February 3**, **2026**. Graduate students must be actively enrolled in courses to be eligible to purchase the student health insurance.

Please note: Graduate students must re-enroll each semester. Premium is to be paid directly to PacificSource at time of enrollment via credit card, debit card, or by bank withdrawal.

#### How much does it cost?

Graduate student coverage period	Fall semester 9/1/2025-12/31/2025	Spring semester (with summer) 1/1/2026–8/31/2026
Cost	\$2,452	\$2,452
Enrollment period	8/1/2025–10/1/2025	12/1/2025–2/1/2026

New graduate student coverage period	Summer A 5/11/2026–8/31/2026	Summer B 6/10/2026–8/31/2026	Summer C 7/15/2026–8/31/2026
Cost	\$1,518	\$1,115	\$645
Enrollment period	4/9/2026-6/9/2026	5/13/2026-7/13/2026	6/18/2026-7/31/2026

# myPacificSource mobile app

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

#### **Learn more**

PacificSource.com/ students

#### **Phone**

855-274-9814

TTY: 711

We accept all relay calls.

#### **Email**

StudentHealth@ PacificSource.com

### **Group No.**

G0035861



# **Helpful online tools**

- Setup your account on our mobile app: PacificSource.com/mobile
- **Find doctors and locations:** <u>PacificSource.com/find-a-doctor.</u>
  Select "Navigator" from the list of provider networks when doing a search.
- Print your insurance ID card: PacSrc.co/printable-ID.



Set up your account at InTouch.PacificSource.com/members

## Benefits at a glance

Provider network: Navigator	In-network providers	Out-of-network providers
Contract-year deductible	\$500	\$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 Well woman visits Immunizations	No deductible, member pays \$0	After deductible, 40%
Office visits	First 3 visits: No deductible, \$5 Subsequent visits: No deductible, \$20*	After deductible, 40%
Urgent care and naturopath visits	No deductible, \$20	After deductible, 40%
Specialist office visits	No deductible, \$40	After deductible, 40%
Mental health/chemical dependency (MHCD) office visits	First 3 visits: No deductible, \$5 Subsequent visits: No deductible, \$20*	No deductible, \$20
Outpatient rehabilitation services	No deductible, \$20	After deductible, 40%
Inpatient or outpatient surgery/services	After deductible, 20%	After deductible, 40%
Advanced diagnostic imaging	7 (16) doddollolo, 2070	
Diagnostic and therapeutic radiology and lab	Member pays \$0 up to the first \$400, then 20% after deductible	After deductible, 40%
Emergency room visits	No deductible, \$200**	
Ambulance	After deductible, 20%	
Chiropractic manipulations and acupuncture care (20 visits chiropractic, 12 visits acupuncture)	No deductible, \$20	After deductible, 40%
Prescription drugs (up to a 30-day supply at retail)	Tier 1: No deductible, \$15 Tier 2: No deductible, \$30 Tier 3: No deductible, \$50 Specialty Drugs Tier 4: No deductible, \$75 (Drugs on the PacificSource Preventive Drug List have \$0 copay and are not subject to contract-year deductible)	

<sup>\*</sup>The combined first three visits are for each benefit year and apply to professional services office and home visits, telehealth visits, and mental health and substance use disorder services visits.

#### **Glossary**

#### **Deductible:**

The dollar amount you pay out-of-pocket for covered services before your health insurance plan begins to pay for your care.

#### Coinsurance:

The amount you owe for a covered healthcare service or prescription, calculated as a percentage of the allowed service amount.

For more definitions, visit <u>PacificSource.com/</u> glossary.

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

Dental and vision included for members through age 18 only. Visit PacificSource.com/students 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.

<sup>\*\*</sup>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 provider level.