The following summary highlights the Accident and Sickness Insurance Plan for the students of Oswego State University. Please consult the policy brochure available at the Auxiliary Services Office for a complete description of the policy benefits and exclusions.

**BASIC ACCIDENT EXPENSE BENEFIT**

- **Aggregate Maximum:** $1,500 per Injury
- **Covered Percentage:** 100% of Covered Charges
- **Deductible:** $0

**Benefits Covered:**
- Prescription Drug Expense, Pre-Hospital Medical Emergency Services, Emergency Room Expense, Diagnostic X-ray and Laboratory Expense, Hospital Room & Board Expense, Miscellaneous Hospital (Inpatient and Outpatient) Expense, Surgery Expense (Inpatient and Outpatient), Multiple Surgical Procedure Expense, Anesthesia Expense, Assistant Surgeon Expense, In Hospital Doctor’s Expense, Outpatient Doctor’s Expense, Hospital Outpatient Department Expense, Consultant Expense, Pre-Admission Testing Expense, Accident Dental Injury Expense, and other expenses for the treatment of an Injury.

**Intercollegiate Sports injuries are covered up to a maximum benefit of $1,500 per injury.**

**Claims in excess of $1,500 are covered under a separate policy held by the University.**

**BASIC SICKNESS EXPENSE BENEFIT**

- **Aggregate Maximum:** $2,500 per Sickness
- **Covered Percentage:** 100% of Covered Charges
- **Deductible:** $0

**The following Basic Sickness Benefits are allocated as follows:**

- **Hospital Room & Board Expense Benefit Maximum:** $400 per day; 30 days per Sickness
- **Miscellaneous Hospital Expense Benefit Maximum:** $1,000 per Sickness
- **Surgical Expense:**
  - **Covered Percentage:** 100% of Covered Charges
  - **Benefit Maximum:** $2,500 per Sickness
- **Anesthesia Expense Covered Percentage:** 20% of the amount paid under the Surgical Expense Benefit
- **Assistant Surgeon Expense Covered Percentage:** 25% of the amount paid under the Surgical Expense Benefit
- **Second Surgical Opinion Expense Covered Percentage:** 5% of the amount paid under the Surgical Expense Benefit
- **In-Hospital Doctor’s Visits Benefit Maximum:** $50/visit; 30 visits per Sickness
- **Outpatient Doctor’s Office Visit Expense Benefit Maximum:** $65/visit; 25 visits per Sickness beginning with the second visit unless referred by the Student Health Center. A referral is not required when the Student Health Center is closed for holidays and vacations.
- **Diagnostic X-ray & Lab Test Benefit Maximum:** $750 per Sickness subject to a $25 deductible per Sickness
- **Hospital Outpatient Department Expense Benefit Maximum:** $300 per Sickness
- **Prescription Drug Expense:**
  - **Co-payment:** $10.00 per Prescription Filled
  - **Benefit Maximum:** $1,000.00 per Sickness
- **Outpatient Mental, Nervous or Emotional Disorders Expense Benefit:** $50/visit, $1,000 per sickness
- **Pre-Hospital Emergency Medical Services:** $300.00 per Sickness
- **Consultant Expense Benefit Maximum:** $50.00 per Sickness
- **Abortion Expense Benefit Maximum:** $500.00
- **Home Health Care Expense:**
  - **Covered Percentage:** 75% of Covered Charges
  - **Deductible:** $50.00 per Sickness
  - **Benefit Maximum:** 40 visits per policy year
SUPPLEMENTAL ACCIDENT & SICKNESS EXPENSE BENEFITS

Deductible: $100.00 per Injury or Sickness
Covered Percentage: 80% of Covered Charges
Aggregate Maximum:
- $26,500 per Injury
- $27,500 per Sickness

Benefits Covered:
- Prescription Drug Expense
- Ambulance Expense
- Emergency Room Expense
- Diagnostic X-ray and Laboratory Expense
- Hospital Room & Board Expense (not to exceed $400.00 per day)
- Miscellaneous Hospital Expense (Inpatient and Outpatient)
- Surgery Expense (Inpatient and Outpatient)
- Multiple Surgical Procedure Expense
- Anesthesia Expense
- Assistant Surgeon Expense
- In Hospital Doctor's Expense
- Outpatient Doctor's Expense
- Hospital Outpatient Department Expense
- Consultant Expense
- Pre-admission Tests Expense
- Home Health Care Expense (not to exceed the 40 visits in total for both Basic and Supplemental and will always be paid at 75% of R & C), and Maternity Expense. **Intercollegiate Sports are not covered under the Supplemental Accident & Sickness Expense Benefits.**

PLEASE CONSULT BROCHURE FOR A COMPLETE LISTING OF SCHEDULE OF BENEFITS, STATE MANDATED BENEFITS, TERMS, CONDITIONS AND EXCLUSIONS AND LIMITATIONS

Students who are enrolled in the Student Accident and Sickness Insurance Plan may also enroll their Dependents by completing the dependent enrollment form in the back of the brochure available at Auxiliary Services. Dependent Coverage must be purchased at the time that the student initially enrolls in the Plan. For more information regarding the Student Accident and Sickness Insurance contact Michael Flaherty, Auxiliary Services, Oswego State University, 507 Culkin Hall, Oswego, NY 13126, Phone: (315) 312-2106 Email: flaherty@oswego.edu. Completed Waiver forms should be sent to Auxiliary Services, 507 Culkin Hall, Oswego State University, Oswego, NY 13126.