2021-22

Certificate & Summary of Sickness Benefits For students of: Cornell College



This Plan* is a **SUPPLEMENTAL PLAN** designed to be excess of any other Sickness benefits available. Note: accident benefits are provided under a separate plan. A full description of the Plan benefits, terms and conditions, exclusions, and claim reporting forms may be found online at www.eiia.org. Click on For Students and search for your institution.

IMPORTANT: A referral from the Student Health Clinic is required for outpatient treatment except for Mental Health and Substance Abuse, a Medical Emergency, or when the Student Health Clinic is closed or not accessible.

CLAIM FILING INSTRUCTIONS: One claim reporting form is required per Coverage Period. Please be sure to include the Plan Number, Student's name and ID# on all correspondence. Submit all itemized bills along with the Explanation of Benefits from the primary insurance carrier to:

> NAHGA Inc, PO Box 189, Bridgton, ME 04009 Phone: 877.497.4980 / Fax: 207.647.4569

e-mail: eiia@nahga.com

CLAIM FILING DEADLINE: All Medical Expenses must be filed within 12 months from the date of service

PLAN NUMBER:	SFP21- COR
ELIGIBILITY CLASSIFICATION:	All Full-Time Undergraduate Students
COVERAGE PERIOD:	8/1/2021 - 7/31/22
MAXIMUM SICKNESS LIMIT:	\$5,000 Per Sickness Subject to Coverage Period Maximum below
COVERAGE PERIOD MAXIMUM:	\$10,000
Inpatient Hospitalization:	Subject to Maximum Sickness Limit
 Requires a Hospital Confinement for 18 hours or more. Includes Hospital Confinement Charges, treatment from a surgeon, anesthesiologist, Physician, nurse, radiologist and pathologist. 	Room & Board Limit: Semi-private rate Deductible: \$0 Student Responsibility: 0% of the first \$1,000, 20% thereafter.
Blanket Outpatient Sickness:	\$500 Per Sickness
 Includes treatment from a Physician, diagnostic lab, x-ray, prescriptions, emergency/urgent care services, ground ambulance, and therapeutic services or supplies. 	Deductible: \$0 Student Responsibility: 0% 0% for contraceptives
Wellness:	\$200 Per Plan Year
 Includes preventive age-related services recommended by the CDC and travel vaccines recommended prior to studying abroad through the College. Coverage is limited to expenses as recommended by the CDC https://www.healthcare.gov/preventive-care-benefits/. 	Deductible: \$0 Student Responsibility: 0%

^{*}Terms defined in the Plan document are Capitalized in this certificate. All benefits combined may not exceed the Maximum Sickness Limit.

