

Insurance Explained

Our Insurance Explained Center will help you understand more about student insurance, with helpful resources such as our “US Healthcare System Overview”, “Mental Health Awareness” and “Sexual Assault Awareness” videos.”

Find out more today at:
InternationalStudentInsurance.com/explained

Student Zone

Whether you have misplaced your ID card or benefit booklet, need assistance with a claim, or have a question about benefits, we are ready to respond. Frequently, these and other issues can be addressed with a short visit to Student Zone. Student Zone is an online account management and resource tool that allows you to change your personal information, renew coverage, replace your ID card and much more.

You may access Student Zone by logging in at:
InternationalStudentInsurance.com/zone

Security

This plan is insured by Syndicate 4141 at Lloyd’s, London. Lloyd’s is the largest and oldest insurance market in the world and is rated ‘A (Excellent)’ by A.M. Best Company and ‘A+ (Strong)’ by Standard & Poor’s. Lloyd’s provides financial strength and security that is unparalleled in the worldwide insurance market.

Plan Administrator

Tokio Marine HCC - Medical Insurance Services Group, headquartered in the United States in Indianapolis, Indiana, provides the administration on this plan. Tokio Marine HCC – MIS Group is a full-service company offering 24-hour, multi-lingual, emergency assistance and support; claims processing; and provider referrals. Their assistance is never more than a phone call away.



About Us

International Student Insurance is a specialized insurance agency, offering health and travel insurance to students around the world. ISI is owned and operated by Envisage International Corporation, which is headquartered in Neptune Beach, Florida. Online since 2001, ISI has been a trusted industry leader for years.

We are also a NAFSA Global Partner, and accredited with an A+ rating by the Better Business Bureau. Our team of highly trained professionals can help you choose the best insurance product for your school and your students.

Contact Us

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InternationalStudentInsurance.com

The logo for International Student Insurance, featuring a stylized globe icon to the left of the text "International Student Insurance" in a clean, sans-serif font.

International Student Insurance

Student Health Insurance Coverage Summary

Health insurance for international students, study abroad students, and scholars



Benefits

	Smart	Budget	Select	Elite
Certificate Period Maximum	\$200,000	\$250,000	\$300,000	\$500,000
Maximum Benefit per Injury/ Illness	\$100,000	\$250,000	\$300,000	\$500,000
Deductible	\$50 per injury or illness within the PPO, outside the U.S. or student health center; otherwise \$100 per injury or illness.	\$45 per injury or illness within the PPO, outside the U.S. or student health center; otherwise \$90 per injury or illness.	\$35 per injury or illness within the PPO, outside the U.S. or student health center; otherwise \$75 per injury or illness.	\$25 per injury or illness within the PPO, outside the U.S. or student health center; otherwise \$50 per injury or illness.
ER Deductible – Inside the USA Only	\$350 per injury/ illness	\$350 per injury/ illness	\$200 per injury/ illness	\$100 per injury/ illness
Coinurance Claims incurred inside U.S.	For the certificate period, underwriters will pay 80% of eligible expenses after the deductible to the certificate period maximum.	For the certificate period, underwriters will pay 80% of the next \$25,000 of eligible expenses after the deductible, then 100% to the certificate period maximum.	Underwriters will pay 80% of the next \$5,000 of eligible expenses after deductible, then 100% to certificate period maximum.	Within the PPO: Underwriters will pay 100% of eligible expenses after deductible to certificate period maximum. Outside the PPO: Underwriters will pay 80% of the next \$5,000 of eligible expenses after deductible, then 100% to certificate period maximum.
Coinurance Claims incurred outside of U.S.	For the certificate period, underwriters will pay 100% of eligible expenses after the deductible up to the certificate period maximum			
Hospital Room & Board	Average semi-private room rate, including nursing services			
Local Ambulance	Up to \$300 per injury / illness if hospitalized as inpatient	Up to \$500 per injury / illness if hospitalized as inpatient	Up to \$750 per injury / illness if hospitalized as inpatient	Up to \$750 per injury / illness if hospitalized as inpatient
Intensive Care Unit	Usual, reasonable and customary charges			
Outpatient Treatment	Usual, reasonable and customary charges			
Outpatient Prescription Drugs	50% of Actual Charge	50% of Actual Charge	50% of Actual Charge	80% of Actual Charge
	Those within the USA will automatically be enrolled into the VantageAmerica Drug Discount Program			
Mental Health Treatment must not be obtained at a student health center	Outpatient: \$50 maximum per day, \$500 maximum per certificate period. Inpatient: Usual, reasonable, and customary charges to \$10,000 maximum per certificate period. Coverage includes drug abuse or alcohol abuse.	Outpatient: \$50 maximum per day, \$500 maximum per certificate period. Inpatient: Usual, reasonable, and customary charges to \$10,000 maximum per certificate period. Coverage includes drug abuse or alcohol abuse.	Outpatient or inpatient: 80% within the PPO, 60% out of network. Maximum 30 days of coverage. Coverage includes drug abuse or alcohol abuse.	Outpatient or inpatient: 80% within the PPO, 60% out of network. Maximum 30 days of coverage. Coverage includes drug abuse or alcohol abuse.
Dental treatment due to accident	No Coverage	\$250 maximum per tooth; \$500 maximum per certificate period		
Dental treatment to alleviate pain*	No Coverage	\$100 maximum per certificate period		
Pre-existing Conditions	\$25,000 lifetime maximum for eligible medical expenses for the acute onset of pre-existing condition only	12-month waiting period	6-month waiting period	6-month waiting period
		\$25,000 lifetime maximum for eligible medical expenses for the acute onset of pre-existing condition only		
Maternity care for a covered pregnancy	No Coverage	80% within the PPO or 60% outside the PPO, up to \$5,000	80% within the PPO or 60% outside the PPO, up to \$10,000	80% within the PPO or 60% outside the PPO, up to the overall maximum
Routine nursery care of newborn	No Coverage	\$250 maximum per certificate period	\$750 maximum per certificate period	\$750 maximum per certificate period
Therapeutic termination of pregnancy	\$500 maximum per certificate period			
Physical Therapy & Chiropractic Care	Maximum \$25 per day	Maximum \$50 per day	Maximum \$50 per day	Maximum \$75 per day
Intercollegiate, interscholastic, intramural, or club sports	No Coverage	\$3,000 maximum per injury / illness Medical expenses only	\$5,000 maximum per injury / illness Medical expenses only	\$5,000 maximum per injury / illness Medical expenses only
Terrorism	No Coverage	\$50,000 max lifetime limit	\$50,000 max lifetime limit	\$50,000 max lifetime limit
Emergency Medical Evacuation*	\$50,000	\$250,000	\$300,000	\$500,000
Emergency Reunion*	\$1,000 lifetime maximum	\$1,000 lifetime maximum	\$5,000 lifetime maximum	\$5,000 lifetime maximum
Accidental Death & Dismemberment*	No Coverage	No Coverage	\$25,000 principal sum	\$25,000 principal sum
Repatriation of Remains*	\$25,000	\$25,000	\$25,000	\$50,000
Personal Liability*	No Coverage	No Coverage	No Coverage	\$250,000

* Not subject to the deductible or coinsurance

Premiums

The premiums below are in \$USD and are per month of coverage, for daily rate premiums please visit our website.

Coverage including the USA

Age	Smart	Budget	Select	Elite
Under 18	\$39	\$55	\$111	\$155
18-24	\$29	\$44	\$89	\$124
25-30	\$64	\$75	\$187	\$262
31-40	\$131	\$181	\$380	\$532
41-50	\$230	\$322	\$675	\$945
51-64	\$311	\$433	\$910	\$1,273
65+	Contact us for more information			

Coverage excluding the USA

Age	Smart	Budget	Select	Elite
Under 18	\$36	\$48	\$83	\$116
18-24	\$29	\$39	\$66	\$93
25-30	\$33	\$39	\$66	\$93
31-40	\$66	\$89	\$144	\$202
41-50	\$118	\$224	\$324	\$454
51-64	\$171	\$304	\$413	\$578
65+	Contact us for more information			

Group Rates

We offer a range of insurance options and discounted rates for groups of all sizes. Please contact us for further information and a personalized proposal.

Exclusion Summary

The following list contains a summary of the plan exclusions. Charges for the following treatments and/or services and/or supplies and/or conditions are excluded from coverage:

1. Pre-existing Conditions — except as covered under the table of benefits.
2. Maternity, unless directly related to a Covered Pregnancy.
3. Congenital conditions.
4. Charges not presented to Underwriters for payment within 60 days beginning on the last day of the Certificate Period.
5. Services that are not administered or ordered by a Physician, and which are not Medically Necessary.
6. Treatment provided at no cost to the Member.
7. Any services which are Investigational, Experimental or Research purposes.
8. Services for obesity or weight modification.
9. HIV, AIDS or ARC, and all diseases caused by and/or related to HIV.
10. Elective termination of Pregnancy.
11. Dental Treatment, except for Emergency Dental Treatment as listed.
12. Vision and hearing tests and examinations.
13. Diagnosis, testing, or treatment of the temporomandibular joint.
14. Expenses in excess of \$3,000 (Budget), \$5,000 (Select/Elite) and all expenses under the Smart for participation in intercollegiate, interscholastic, intramural, or club sports.
15. Extreme or hazardous sports (please see the website for a full list).
16. Injury sustained while under the influence of intoxicating liquor or drugs.
17. Self-inflicted Injury or Illness.
18. Sexually Transmitted Diseases and conditions.
19. Immunizations and Routine Physical Exams.
20. Mental Health Disorders if treatment is obtained at a Student Health Center.
21. Injuries from violation of the law.
22. Speech, vocational, occupational, biofeedback, acupuncture, recreational, sleep or music therapy.
23. Treatment for hair loss.
24. Sleep apnea or other sleep disorders.
25. Organ or tissue transplants or related services.
26. Diagnosis, testing, or treatment for skin conditions.

Please view the full plan certificate on our website for a complete list of benefits and exclusions.

For full information
or to apply, please visit:

InternationalStudentInsurance.com