UC Student Health Insurance Plan
2016-17 Plan Year Waiver Criteria

I. To satisfy UC’s health insurance requirement for enrolled students, the plan held by the student must:
   1) Be a Medi-Cal, Medicare or Tricare/military insurance policy or a Covered California plan, OR
   2) Be an employer-sponsored group health plan or individual plan that meets the following criteria:
      a. Has no overall annual benefit limit
      b. Effective January 1, 2017, has an annual out-of-pocket maximum of $7,150 or less for an individual or $14,300 or less for a family. Deductibles, copayments and coinsurance paid by the member accrue toward meeting the out-of-pocket maximum. A higher out-of-pocket maximum is allowed if the subscriber has a Health Savings Account (HSA) or a Health Reimbursement Account (HRA)
      c. Covers the following services (ACA Essential Health Benefits):
         i. Preventive health care services, including an annual physical exam, preventative immunizations and laboratory/diagnostic tests to help determine your state of health
         ii. Chronic disease management for such conditions as asthma, diabetes or other chronic medical conditions
         iii. Hospital stays for medical and surgical care
         iv. Hospital stays for mental health and alcohol/drug abuse conditions, covered the same as any other medical condition
         v. Doctor office visits for medical, mental health, and alcohol/drug abuse conditions
         vi. Emergency room services
         vii. Diagnostic services including laboratory tests
         viii. Medications prescribed by a doctor (including contraceptives)
         ix. Pre-natal and maternity care, with no pre-existing condition limitation

II. For international students, the following additional criteria apply. The plan must:
   1) have no pre-existing condition exclusion; if the plan has a pre-existing condition waiting period, that period has expired
   2) have no per-medical condition maximum benefit limits
   3) cover medical services for injury from participation in all types of recreational activities or amateur sports
   4) not be a health care reimbursement plan with the student’s home country or another party.
   5) have policy written in standard English with benefits expressed in U.S. dollars
   6) have a claims payment office with an address in the United States
   7) pay at least $50,000 annually for medical evacuation
   8) pay at least $25,000 for repatriation of remains

III. Finally, all plans must provide unrestricted access to an in-network primary care provider, in-network hospital and full, non-emergency medical and behavioral health care within reasonable distance of campus or the student’s place of residence while attending school. Such distance shall be determined at the discretion of each campus based upon its unique geographic considerations and local availability of services. (The waiver form will indicate the distance requirement appropriate for each campus.) NOTE: this criterion applies to all plan types, including Medi-Cal, Medicare, Tricare/military insurance or Covered California plans.

Please note: These Waiver Criteria are subject to change if new legislation or administration requires adjustments of the criteria listed in this Summary.