

2007-2008 Insurance Plan Worksheet			
	2007-08 Penn Student Plan	Other Plan	
Premium (single student)	<b>\$ 2,468</b>		
Covers you while a registered student at Penn	Yes		
Covers students who are on a leave of absence from Penn	Yes		See brochure for details about PSIP
Offers local provider network in Philadelphia area	Yes (Aetna PPO network)		
Offers national provider network	Yes  Aetna network: <b>672,000</b> providers		
Covers health care expenses anywhere in the world	Yes		
Covers pre-existing conditions	Yes		<b>REQUIRED*</b>
Covers in-patient treatment (including mental health hospitalization)	Preferred Care: <b>100%</b>  Non-Preferred Care: <b>70%</b> of the Reasonable charge		<b>REQUIRED*</b>
Covers out-patient care, including office visits, mental health services, diagnostic testing and other ancillary procedures	Preferred Care: <b>100%</b> after a <b>\$25</b> co-pay for office and mental health visits, (No co-pay at SHS) - <b>\$35</b> co-pay for diagnostic testing  Non-Preferred Care: <b>70%</b> of the Reasonable charge (up to <b>\$80</b> max for mental health visits)		<b>REQUIRED*</b>
Lifetime maximum benefit of at least <b>\$500,000</b>	<b>\$2,000,000</b>		<b>REQUIRED*</b>
Limits out-of-pocket expenses for medical and prescription costs	Out-of-pocket maximum: <b>\$1,500</b> for medical expenses		See brochure for details about PSIP

**\*REQUIRED** – Your private plan must meet all the required areas.

Requires referrals to access health care in the Philadelphia area	SHS referral required for most non-emergency medical care in the Philadelphia area		See brochure for details about PSIP
Requires referrals to access health care out of the Philadelphia area	No		
Provides prescription drug benefits	\$15 co-pay generic/\$30 co-pay brand		
Required Immunizations	Covered <b>100%</b> at SHS  Preferred Care: <b>90%</b> of the Negotiated Rate Non-Preferred Care: <b>60%</b> of the Reasonable charge		

**\*REQUIRED** – Your private plan must meet all the required areas.