What is the Plan about?
Aetna Student Health, working with UC Santa Barbara offers a student-focused health insurance plan that covers students at school, at home and while traveling* or studying abroad.

Your Student Health Insurance Plan offers you access to:
- Primary Care Services for students provided at UCSB Student Health at no additional cost include: medical & urgent care visits, advice nurse consultations, preventive physical exams, well woman exams, travel and nutrition visits, immunizations, laboratory testing and x-rays.
- An award-winning online secure member website, Aetna Navigator®.
- Travel Assistance Services and Worldwide Medical Coverage while traveling or studying abroad.
- Copay for pharmacy at in-network pharmacies with an unlimited maximum. Out-of-network pharmacy services covered at 50%.

Learn More!
Read all the Plan documents before deciding whether to enroll. View online at www.aetnastudenthealth.com/ucsb santabarbara.

How much does it cost?

<table>
<thead>
<tr>
<th>Coverage Period</th>
<th>Coverage Dates</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summer</td>
<td>07/01/2017 – 09/23/2017</td>
<td>$179</td>
</tr>
<tr>
<td>Fall</td>
<td>09/24/2017 – 01/07/2018</td>
<td>$179</td>
</tr>
<tr>
<td>Winter</td>
<td>01/08/2018 – 4/01/2018</td>
<td>$179</td>
</tr>
<tr>
<td>Spring</td>
<td>04/02/2018 – 9/22/2018</td>
<td>$179</td>
</tr>
</tbody>
</table>

The rates above include both premiums for the UCSB GHI Medical Plan, as well as University of California, Santa Barbara's administrative fee.

Who is eligible?
All registered Education Abroad Program (EAP) outbound students at UCSB are automatically eligible and are enrolled in the Gaucho Health Insurance Plan and charged a health insurance premium on their registration bill unless they have an approved waiver due to having equivalent insurance.
Here's a brief description of the Plan benefits:

<table>
<thead>
<tr>
<th>Plan Maximum</th>
<th>Preferred Provider</th>
<th>Non-Preferred Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual:</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>Individual Out-of-Pocket Limit</td>
<td>$400 Per Policy Year</td>
<td>$1,200 Per Policy Year</td>
</tr>
<tr>
<td>Physician’s Office Visit</td>
<td>100% after $25 copay</td>
<td>50%</td>
</tr>
<tr>
<td>Inpatient Hospitalization</td>
<td>80% after $500 copay Per Admission</td>
<td>50% after $500 Per Admission deductible for a semi-private room</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>100% after $200 copay (waived if admitted)</td>
<td>100% after $200 deductible (waived if admitted)</td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td>Prescriptions paid at 100% of the Negotiated Charge with the following copays:</td>
<td>Non-Preferred prescriptions paid at 50% of the Recognized Charge with the following copays:</td>
</tr>
<tr>
<td></td>
<td>$10 Copay for Generic Drugs</td>
<td>$10 Copay for Generic Drugs</td>
</tr>
<tr>
<td></td>
<td>$35 Copay for Preferred Brand Drugs</td>
<td>$35 Copay for Preferred Brand Drugs</td>
</tr>
<tr>
<td></td>
<td>$50 Copay for Non-Preferred Brand Drugs</td>
<td>$50 Copay for Non-Preferred Brand Drugs</td>
</tr>
</tbody>
</table>

Services Your Plan Generally Does NOT Cover (Check your policy or Plan document for more information and a list of any other excluded services.):

- Cosmetic Surgery
- Dental Care (Adult)
- Long Term Care
- Private Duty Nursing
- Infertility Treatment - Except for charges made by a physician to diagnose and surgically treat the underlying medical cause.
- Fitness Exercise Program
- Weight Loss Programs

These are brief highlights of the Student Health Plan. The Plan is available for UC Santa Barbara students. The Plan is underwritten by Aetna Life Insurance Company (Aetna). The exact provisions, including definitions, governing this insurance are contained in the Policy issued to you and may be viewed online at [www.aetnastudenthealth.com](http://www.aetnastudenthealth.com), If there is a difference between this Plan Highlights and the Master Policy, the Policy will control.

For full medical benefit details please visit www.aetnastudenthealth.com/ucsantabarbara or Student Health Service Insurance website at http://studenthealth.sa.ucsb.edu/gaucho-health-insurance.
The University of California, Santa Barbara Student Health Insurance Plan is underwritten by Aetna Life Insurance Company. Aetna Student Health℠ is the brand name for products and services provided by Aetna Life Insurance Company and its applicable affiliated companies (Aetna).

Aetna complies with applicable Federal civil rights laws and does not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna provides free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call 1-855-821-9712.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:
Civil Rights Coordinator,
P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779),
1-800-648-7817, TTY: 711,
Fax: 859-425-3379 (CA HMO customers: 860-262-7705), CRCoordinator@aetna.com.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at 1-800-368-1019, 800-537-7697 (TDD).

*Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company, Coventry Health Care plans and their affiliates (Aetna).*
TTY: 711

To access language services at no cost to you, call 1-855-821-9712.

Para acceder a los servicios de idiomas sin costo, llame al 1-855-821-9712. (Spanish)

如欲使用免費語言服務，請致電 1-855-821-9712。 (Chinese)

Afin d'accéder aux services langagiers sans frais, composez le 1-855-821-9712. (French)

Para ma-access ang mga serbisyo sa wika nang wala kayong babayaran, tumawag sa 1-855-821-9712. (Tagalog)

Um auf für Sie kostenlose Sprachdienstleistungen zuzugreifen, rufen Sie 1-855-821-9712 an. (German)

Pou jwenn sèvis lang gratis, rele 1-855-821-9712. (French Creole-Haitian)

Per accedere ai servizi linguistici, senza alcun costo per lei, chiami il numero 1-855-821-9712. (Italian)

言語サービスを無料でご利用いただくには、1-855-821-9712までお電話ください。 (Japanese)

무료 언어 서비스를 이용하려면 1-855-821-9712 번으로 전화해 주십시오. (Korean)

برای دسترسی به خدمات زبان به طور رایگان، با شماره 121-855-821-9712 تماس بگیرید. (Persian-Farsi)

Aby uzyskać dostęp do bezpłatnych usług językowych proszę zadzwonić 1-855-821-9712. (Polish)

Para acessar os serviços de idiomas sem custo para você, ligue para 1-855-821-9712. (Portuguese)

Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону 1-855-821-9712. (Russian)

Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số 1-855-821-9712. (Vietnamese)