

**INTERNATIONAL COMMUNITY SERVICE  
PLAN A  
UNDERWRITTEN BY MEGA LIFE & HEALTH INSURANCE COMPANY**

**Maximum Benefit  
\$250,000 (For each Injury or Sickness)**

**Deductible**

\$50 at Recognized Student Health Center  
In Network

\$100 for each Injury or Sickness Maximum of \$300 per person per year  
Out of Network

\$200 for each Injury or Sickness -- Maximum of \$600.00 per person per year

**Preferred Provider Coinsurance**

The Company will pay 100% of Covered Medical Expenses up to \$2,500 then 80% of Covered Medical Expenses up to \$47,500 then 100% of Covered Medical Expenses up to the Aggregate Lifetime Maximum of \$250,000 per Injury/Sickness

**Out of Network Provider Coinsurance**

70% of Usual & Reasonable Covered Expenses

**Pre-Existing Conditions**

6 MONTH WAITING PERIOD

**Medical Evacuation / Repatriation**

ASSIST AMERICA

**Partial Plan Highlights**

<b>In Patient</b>	
Room Board/Miscellaneous Charges	\$1500 per day
Surgeon	\$5,000.00
Nervous Mental include Drug/Alcohol	30 days same as any other illness
<b>Out Patient</b>	
Nervous Mental include Drug/Alcohol	30 Visits
Physician Visit	1 per day
Day Surgery Charges	\$1,500.00
Surgeon	\$5,000.00
OMB – Xray/Lab/Misc Test/Emergency Room	\$1,000.00
MRI/CAT Scan	\$1,000.00
Prescription Drugs (w/Disc Card)	80% to \$1000.00
Abortion	\$300 PPY

**RATES**

	Annual	Monthly*
Student	\$ 876.00	\$ 73.00
Spouse	\$3,516.00	\$293.00
Child	\$1,320.00	\$110.00

\*minimum of 3 months required

For questions or more information please contact: Insurance for Students, Inc  
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