STUDENT INSURANCE **PLAN 82198**
600 LINCOLN AVENUE
CHARLESTON, IL 61920-3099

Effective Date **E-Number**

Student Signature

This identification card is for group determination only and does not certify coverage. To verify coverage, please call the EIU Student Health Insurance Office at (217) 581-5290. Documents can be faxed to (217)581-6422.
Note: Claims should be directed to the name and address shown above.

–fold along dotted line–

Hospital	**$50 deductible, then 80%**
Surgery	**80% Reasonable and Customary**

Inpatient Physician Medical Care
$50 deductible, 80% up to $100 1st day, 80% up to $50 each day thereafter
Outpatient Physician

Illness	$50 deductible, then 80%
Injury	$50 deductible, then 80%

Lifetime Maximum for any one Accidental Bodily Injury or Illness
$25,000
Combined Lifetime Maximum for Mental Illness & Substance Abuse
$5,000

Any other insurance coverage is used in determining the amount of benefits payable under this plan.