



# Reed College 2026/27 Student health insurance

For MALS students

## Your student health insurance plan offers:

- Coverage at an affordable rate
- Access to a wide network of providers locally and across the nation
- Member-focused customer service

## Eligibility and cost

All graduate students are strongly encouraged, but not required, to purchase student health insurance. To enroll, visit [Enroll.PacificSource.com/ReedMALS](https://Enroll.PacificSource.com/ReedMALS). Payment is due at time of enrollment. Enrollment periods are stated in the table below.

Please note: Graduate students must re-enroll each semester. The premium is paid directly to PacificSource at time of enrollment via credit card, debit card, or bank withdrawal.

## How much does it cost?

Coverage Period	Fall Semester 8/15/2026 - 12/31/2026	Spring Semester 1/1/2027 - 5/31/2027	Summer Semester 6/1/2027 - 8/14/2027
Cost	\$2,243	\$2,437	\$1,210
Enrollment Period	Fall Semester 7/15/2026 - 9/15/2026	Spring Semester 12/1/2026 - 2/1/2027	Summer Semester 5/1/2027 - 7/1/2027

## myPacificSource mobile app

View your PacificSource member ID and coverage info any time. Download our free app from the Google Play or Apple® app stores, or visit [PacificSource.com/mobile](https://PacificSource.com/mobile).

## Learn more

[PacificSource.com/students](https://PacificSource.com/students)

## Phone

**855-274-9814**  
TTY: 711  
We accept all relay calls.

## Email

[StudentHealth@PacificSource.com](mailto:StudentHealth@PacificSource.com)

## Group No.

G0047084

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## Helpful online tools

- **Setup your account on our mobile app:** [PacificSource.com/mobile](https://PacificSource.com/mobile).
- **Find doctors and locations:** [PacificSource.com/find-a-doctor](https://PacificSource.com/find-a-doctor).  
Select "Navigator" from the list of provider networks when doing a search.
- **Print your insurance ID card:** [PacSrc.co/printable-ID](https://PacSrc.co/printable-ID).



Set up your account at [InTouch.PacificSource.com/members](https://InTouch.PacificSource.com/members)

## Benefits at a glance

Provider network: Navigator	In-network providers	Out-of-network providers
<b>Contract-year deductible</b>	\$300	\$900
<b>Out-of-pocket limit</b>	\$3,500	\$10,500
<b>Plan maximum</b>	Unlimited	

In-network and out-of-network provider charges accumulate separately.

## Your share of costs

	In-network providers	Out-of-network providers
<b>Routine physicals</b>	No deductible, member pays \$0	After deductible, 50%
<b>Well woman visits</b>		
<b>Immunizations</b>		
<b>Office visits</b>	<b>First 3 visits:</b> No deductible, \$5 <b>Subsequent visits:</b> No deductible, \$25*	After deductible, 50%
<b>Urgent care and naturopath visits</b>	No deductible, \$25	After deductible, 50%
<b>Specialist office visits</b>	No deductible, \$50	After deductible, 50%
<b>Mental health/chemical dependency (MHCD) office visits</b>	<b>First 3 visits:</b> No deductible, \$5 <b>Subsequent visits:</b> No deductible, \$20*	No deductible, \$20
<b>Outpatient rehabilitation services</b>	No deductible, \$25	After deductible, 50%
<b>Inpatient or outpatient surgery/services</b>	After deductible, 20%	After deductible, 50%
<b>Advanced diagnostic imaging</b>		
<b>Diagnostic and therapeutic radiology and lab</b>		
<b>Emergency room visits</b>	No deductible, \$200**	
<b>Ambulance</b>	After deductible, 20%	
<b>Chiropractic manipulations and acupuncture care</b> (20 visits chiropractic, 12 visits acupuncture)	No deductible, \$25	After deductible, 50%
<b>Prescription drugs</b> (up to a 30-day supply at retail)	Tier 1: No deductible, \$20 Tier 2: No deductible, \$35 Tier 3: No deductible, \$55 Specialty Drugs Tier 4: No deductible, \$80 (Drugs on the PacificSource Preventive Drug List have \$0 copay and are not subject to contract-year deductible)	

\*The combined first three visits are for each benefit year and apply to professional services office and home visits, telehealth visits, and mental health and substance use disorder services visits.

\*\*Copay applies to ER physician and facility charges only. Copay waived if admitted into hospital. For emergency medical conditions, out-of-network providers are paid at the in-network provider level.

## Glossary

### Deductible:

The dollar amount you pay out-of-pocket for covered services before your health insurance plan begins to pay for your care.

### Coinsurance:

The amount you owe for a covered healthcare service or prescription, calculated as a percentage of the allowed service amount.

For more definitions, visit [PacificSource.com/glossary](https://PacificSource.com/glossary).

Student health insurance brokered by USI Insurance Services, **800-251-4246**.

Dental and vision included for members through age 18 only. Visit [PacificSource.com/students](https://PacificSource.com/students) for benefit information.

This is a brief summary of benefits. Refer to the Student Policy for additional information or a further explanation of benefits, limitations, and exclusions.