

**PART VI (Continued)**  
**SCHEDULE OF BENEFITS**  
**MEDICAL EXPENSE BENEFITS**  
**UNIVERSITY OF TEXAS SYSTEM-SPECIAL EVENTS**  
**SPECIAL EVENTS**  
**PREFERRED PROVIDERS**  
**2002-550-7**  
**INJURY & SICKNESS**

**Outpatient (Continued)**

Anesthetist:	25% of surgery allowance
Outpatient Miscellaneous Benefit:	No Benefits
Physician's Visits:	Usual & Customary Charges
Physiotherapy:	Usual & Customary Charges
<i>(Outpatient Physiotherapy benefits are payable only for a condition that required surgery or Hospital Confinement: 1) within the 30 days immediately preceding such Physiotherapy; or 2) within the 30 days immediately following the attending Physician's release for rehabilitation.)</i>	
Medical Emergency:	Usual & Customary Charges / \$500.00 maximum
X-Rays & Laboratory:	Usual & Customary Charges
<i>(This benefit includes one Pap Smear when rendered at the Student Health Center.)</i>	
Radiation Therapy:	Usual & Customary Charges
Tests & Procedures:	Usual & Customary Charges
Injections:	Usual & Customary Charges
Chemotherapy:	Usual & Customary Charges
Prescription Drugs:	\$300.00 maximum (Per Policy Year)
Student Health Center:	\$2.00 copay for generic \$5.00 for named brand drugs
<i>(Birth control pills are paid up to \$3.00.)</i>	
All other:	\$200.00 maximum
<i>(Copays are \$5.00 for generic and \$10.00 for named brand drugs.)</i>	
Psychotherapy:	Allowable Charges
<i>(\$65.00 per day for individual therapy / \$20.00 per day for group therapy/ \$975.00 maximum)</i>	

**Other**

Ambulance:	Usual & Customary Charges / \$300.00 maximum
Braces & Appliances:	No Benefits
Consultant:	Usual & Customary Charges
Dental:	Paid as any Other Injury
<i>(Benefits paid on Injury to Sound, Natural Teeth only.)</i>	
Alcoholism/Drug Abuse:	Paid under Psychotherapy Benefit
Maternity:	Paid as any other Sickness
<i>(Benefits paid for Newborn Infant care while Hospital Confined.)</i>	
Repatriation:	\$7,500.00 maximum
Medical Evacuation:	\$20,000.00 maximum
Supplemental Injury Benefits:	No Benefits
AD&D:	No Benefits
Intercollegiate Sports:	No Benefits

**Conversion Permitted: No      Continuation Permitted: No**

**Extension of Benefits**

**Other insurance: \*Excess Insurance**

**\*If benefit is designated, see endorsement attached.**