

Frequently Asked Questions For University of San Diego Law Students 2013-2014 Student Health Insurance Plan

Table of Contents

Important Contact Information			
I have questions about what is covered, how to access benefits, enrollment concerns, or replacement ID cards.			
I have questions about a specific claim or claims payment.			
How can I find a Preferred Provider?			
How can I find a Participating Pharmacy?			
How do I learn more about Gallagher Koster Complements?			
How do I learn more about Worldwide Assistance Services?			
Enrollment & Eligibility			
Who is eligible for the plan?			
How do I enroll?			
How do I enroll my eligible dependents?			
Is there anything I need to know before waiving coverage?			
What about Health Care Reform? How does that affect my Student Health Insurance Plan?			
How do I waive coverage under the Student Health Insurance Plan?			
Insurance Plan Benefits			
What changes have been made to the plan for the 2013-2014 Policy Year?			
What is covered under the Student Health Insurance Plan?			
How much does the plan cost?			
How do I get my prescriptions filled?			
Am I covered if I have a pre-existing condition?			
Am I required to get a referral from the USD Student Health Center before I seek treatment?			
Do I get an ID card?			
How do I print an ID card online?			
Does this plan cover me when I am off campus, traveling or studying abroad?			
What is a deductible? Does this plan have a deductible?			
Finding a Provider			
Can I go to any doctor or hospital?			
Claims Processing			
What should I do if I receive a bill, or need to be reimbursed, for services I received?			
Is any other information needed in order to pay a claim?			
How will my claims be paid if I have other health insurance in addition to the Student Health Insurance Plan?			
Plan Enhancements			
What enhancements are available under this plan?			
Will I be covered under the plan after I graduate?			
Are there any additional insurance products available?			

Important Contact Information

I have questions about what is covered, how to access benefits, enrollment concerns, or replacement ID cards.

Gallagher Koster 500 Victory Road Quincy, MA 02171

Website: www.gallagherkoster.com/USDLaw

Phone: 1-877-241-4649

Email: <u>USDStudent@gallagherkoster.edu</u>

I have questions about a specific claim or claims payment.

Aetna Student Health P.O. Box 981106 El Paso, TX, 79998

Website: www.aetnastudenthealth.com

Phone: 1-866-746-6586

How can I find a Preferred Provider?

Aetna Provider Network

Website: www.gallagherkoster.com/USDLaw, click on 'Find a Doctor'

Phone: 1-866-746-6586

How can I find a Participating Pharmacy?

Aetna Pharmacy Management

Website: www.gallagherkoster.com/USDLaw, click on 'Pharmacy Program'

Phone: 1-800-238-6279

How do I learn more about Gallagher Koster Complements?

EyeMed Discount Vision Plan

Website: www.enrollwitheyemed.com

Phone: 1-866-839-3633

Basix Dental Savings and CampusFit Website: www.basixstudent.com

Phone: 1-888-274-9961

How do I learn more about Worldwide Assistance Services?

On Call International

Website: www.oncallinternational.com

Phone: Within the U.S.: 1-866-525-1956 Outside of the U.S.: 1-603-328-1956

Enrollment & Eligibility

Who is eligible for the plan?

Enrollment in a health insurance plan is required for all students at the University of San Diego School of Law. To ensure compliance with this policy, students (as defined below), are automatically enrolled in and billed for the Student Health Insurance Plan unless proof of comparable insurance coverage is documented. Documentation is provided by completing a waiver form identifying the inforce comparable coverage and submitting it by the posted deadline. If a form is not submitted by the deadline, the student will remain enrolled in the Student Health Insurance Plan for the policy year.

• All Law School students enrolled in 8 credit hours or more are automatically enrolled in the Student Health Insurance Plan unless proof of comparable coverage is furnished.

How do I enroll?

Students who would like to actively enroll in the plan, may do so by completing the following steps:

- 1. Go to www.gallagherkoster.com/USDLaw.
- 2. Click on 'Student Waive/Enroll'.
- 3. Create a user account, or log in if you are a returning user.
- 4. Select either the Green 'I want to Waive/Enroll' button. Upon completing the form, you will be asked to review your information for accuracy and then click 'submit'. Immediately upon submitting your online form you will receive a confirmation number. Please save this number and print a copy of your confirmation for your records.

Please note:

- It is recommended that all students submit an online insurance selection form, whether enrolling or waiving.
- All eligible students who do not submit an online waiver by the deadline will be automatically enrolled in the Student Health Insurance Plan.

How do I enroll my eligible dependents?

Students must purchase coverage for their eligible dependent(s) at the same time as their own initial plan enrollment. Dependent coverage must be purchased for the same time period as the student's period of coverage and cannot exceed coverage purchased by the student. For example, a student enrolled for annual coverage cannot purchase dependent coverage for the spring semester unless a qualifying event, as defined below, occurs.

Students can also add eligible dependent(s) if they experience one of the following qualifying events: (a) marriage (b) birth of a child, (c) divorce, or (d) if the dependent is entering the country for the first time. If dependent enrollment meets one of these qualifying events, the Dependent Enrollment Form, supporting documentation and payment must be received by Gallagher Koster within 31 days of the qualifying event. If not received within 31 days of the qualifying event, the effective date of coverage will be the date this form and payment are received at Gallagher Koster. Once a dependent is enrolled, coverage cannot be terminated unless the student loses eligibility.

Students can enroll their eligible dependents online for an additional premium by visiting www.gallagherkoster.com/USDLaw, selecting 'Dependent Enroll', and completing the form by the published deadline.

Is there anything I need to know before waiving coverage?

Before waiving you should review your current policy, considering the following:

- Will your current plan cover medical care beyond emergency services (i.e. doctor's office visits, diagnostic testing, x-rays, prescription drugs, mental health, etc.) in the San Diego, CA area?
- Does your plan have doctors and hospitals in the San Diego, CA area?
- Check the cost -- is the annual cost of this Student Plan less expensive than the cost of being added as a dependent to your parents' plan? Be sure to compare deductibles and total out-of-pocket costs, not just the annual premium.
- Are there administrative pre-requirements, pre-certification, or Primary Care Physician referrals required under your current plan that may delay receipt of care?

What about Health Care Reform? How does that affect my Student Health Insurance Plan?

If you are under the age of 26, you MAY be eligible to enroll as a dependent under the employer health insurance plan held by your parent(s). However, before you do so, you should fully compare the employer plan against this Student Health Insurance Plan to determine which plan's rates, benefits and coverage are most appropriate for you.

In addition to the items mentioned above, keep in mind that Student Health Insurance Plans are generally less expensive than individual plans with similar benefits. In fact, your total out-of-pocket cost (including premium and deductibles) may be significantly LESS with this Student Health Insurance Plan, especially if your parents' employer plan is considered a 'high deductible' plan.

How do I waive coverage under the Student Health Insurance Plan?

If you determine your coverage to be comparable and would like to waive the Student Health Insurance Plan:

- 1. Go to www.gallagherkoster.com/USDLaw.
- 2. Click on 'Student Waive/Enroll' link.
- 3. Create a user account, or log in if you are a returning user.
- 4. Select the Red 'I Want to Waive' button. When waiving the insurance, have your current health insurance ID card ready as you will need this information in order to complete the waiver form. Upon completing the form, you will be asked to review your information for accuracy and then click 'submit'. Immediately upon submitting your online form you will receive a

confirmation number. <u>Receipt of this confirmation number only confirms submission, not acceptance, of your Waiver Form.</u> Please save this number and print a copy of the confirmation for your records.

Please Note:

- It is recommended that all students submit an online insurance selection form, whether enrolling or waiving.
- All eligible students who do not submit an online waiver by the deadline will be automatically enrolled in the Student Health Insurance Plan.

Insurance Plan Benefits

What changes have been made to the plan for the 2013-2014 Policy Year?

The Student Health Insurance Plan is compliant with the second phase of Federal Health Care Reform.

- The plan maximum has been increased from \$100,000 per condition, per policy year to \$500,000 per condition, per policy year.
- The In-Network deductible has been increased from \$75 per condition, per policy year to \$100 per condition, per policy year. As in the past, the deductible is waived with a Student Health Center referral.

What is covered under the Student Health Insurance Plan?

- The plan offers comprehensive benefits that include hospital room and board, inpatient and outpatient surgical procedures, labs and x-rays, chemotherapy and radiation, inpatient and outpatient mental health services, physician office visits, consultant visits, ambulance, emergency care and prescription drugs.
- Preventive Care Services are available to cover routine physicals and examinations, routine screenings, routine GYN
 examinations, and most immunizations with no cost sharing for a student when services are received by Preferred Care
 Providers.
- The maximum benefit allowed for each condition is \$500,000. Students should refer to their brochure schedule for details.
- Services provided by a participating Preferred Care Provider are generally covered at 80%, while services provided by a Non-Preferred Care Provider are generally covered at 65%.
- Please refer to the plan brochure available at www.gallagherkoster.com/USDLaw by clicking on 'My Benefits and Plan Information' for complete details about coverage, limitations, and exclusions.

How much does the plan cost?

Coverage Periods	Effective Date	Termination Date	Student Rates* (Rate published in the brochure)
Annual	8/15/13	8/14/14	\$2,174
Fall	8/15/13	1/1/14	\$837
Spring	1/2/14	8/14/14	\$1,337
Summer	6/1/14	8/14/14	\$323

How do I get my prescriptions filled?

- Prescriptions can be filled at a pharmacy participating in the Aetna Pharmacy Management network. To find a list of
 participating pharmacies near you, visit www.gallagherkoster.com/USDLaw and click on 'Pharmacy Program'.
- At designated Aetna pharmacies you will pay a \$15 copayment for a 30-day supply of a Tier-1 drug, a \$30 copayment for a 30-day supply of a Tier-2 drug, and a \$50 copayment for a 30-day supply of a Tier-3 drug, up to the \$500,000 maximum benefit.
- Prescriptions are also available through a Mail Service Program. Through the Mail Service Program you will pay 2.5x the cost of a 30-day supply for a 90-day supply of your prescription drug. Click on 'Pharmacy Program' at www.gallagherkoster.com/USDLaw to learn the details of the pharmacy program, including the Mail Service Program. Students who take maintenance drugs are encouraged to use the Mail Service Program to be able to receive the maximum benefit available.
- Outpatient medications for treatment of a Covered Expense are covered prescriptions. If the treatment of a medical condition is limited or excluded from the plan, the outpatient prescription is likewise limited or excluded.

Students who are studying or traveling abroad and need more than a 30-day supply of their prescription may fill out a
Prescription Override form by visiting www.gallagherkoster.com/USDLaw and selecting 'Pharmacy Program', then
'Pharmacy Override Form'.

Am I covered if I have a pre-existing condition?

If you are under the age of 19, you are immediately covered for pre-existing conditions.

If you are 19 or older, you will be covered if you were continuously insured through another health insurance plan for the 6 months immediately prior to the effective date of the Student Health Insurance Plan without a lapse in coverage of more than 62 days.

- If you were not continuously insured or had a lapse in coverage of more than 62 days, you will have limited coverage for a pre-existing condition, up to \$1,500. A pre-existing condition is one for which you sought medical advice, were diagnosed, received care or treatment, or were recommended care or treatment during the 6 months prior to the effective date of this plan.
- Once you have been enrolled in this plan for 6 months, your pre-existing condition will be covered as any other condition.

Am I required to get a referral from the USD Student Health Center before I seek treatment?

No, a referral is not required with the USD Student Health Insurance Plan, but there are many benefits to first seeking care or advice from the Student Health Center. For example, your deductible can be waived by receiving a referral from the Student Health Center. Students can learn more about the services available at the Student Health Center by visiting http://www.sandiego.edu/healthcenter.

- The Wellness Units (SHC, CC, CHWP) can provide referrals to community providers (which waives the deductible) when the student has been evaluated by and recommended by the Wellness Unit. Non-emergency care by any community provider may be obtained, but is subject to the deductible per the policy.
- Referrals may not be provided for off campus services obtained prior to evaluation and recommendation by a Wellness Unit.
- Referrals to community providers (which waives the deductible) are not provided when students are no longer eligible for Wellness services (I.e. Recent graduates, leaves of absences).

Do I get an ID card?

Yes, ID Cards are available online. They may be printed using a home computer or viewed on your smart phone. They are also mailed to the address that your school has on file for you.

How do I print an ID card online?

- 1. Go to www.gallagherkoster.com/USDLaw.
- 2. Log in using your University of San Diego e-mail address as your user name and your student ID number as you password.
- 3. You will be redirected to the Account Home page, then click on 'Generate ID Card'.

Does this plan cover me when I am off campus, traveling or studying abroad?

Yes, the USD Student Health Insurance Plan covers you during semester breaks, summer vacation and even if you're traveling or studying abroad. You'll be covered for the period for which you paid premium.

In addition to being covered for medical treatment and services, you will also be covered for Repatriation of Remains, Emergency Medical Expense Benefit and Travel Assistance Services through On Call International, the 24-hour worldwide assistance service. All services must be arranged for in advance and provided by On Call International. Any services not arranged by On Call International will not be considered for payment.

- When studying or traveling abroad, keep your Student Health Insurance Plan identification card with you and take a copy of the brochure for reference.
- When outside of the United States, you will likely be asked to pay for your medical care first and will then need to seek reimbursement. Covered Expenses will be reimbursed on an Out-of-Network basis.
- When you submit claims for reimbursement, you will need to have the itemized bill(s) translated into English and include a letter informing the claims administrator that you are seeking reimbursement for charges previously paid.
- Please ensure that your name, ID number, address (to receive your reimbursement check), and the College/University's name are on the bill.

What is a deductible? Does this plan have a deductible?

A deductible is the amount for which you are responsible before payment is made by the claims company. Once you have paid the deductible, whether it's applied to one service or multiple services, the plan will pay for covered medical expenses as indicated in the plan brochure.

This plan has a \$100 per condition, per policy year deductible that applies to services received from a Preferred Care Provider, and a \$200 per condition, per policy year deductible that applies to services received from a Non-Preferred Care Provider.

Finding a Provider

Can I go to any doctor or hospital?

Yes, you can go to any provider; however, you will save money by seeing providers that participate in the Aetna Student Health Network because providers participating in this network have agreed to accept a predetermined negotiated amount, or Preferred Allowance, as payment for their services.

Go to www.gallagherkoster.com/USDLAW and click on 'Find a Doctor' to locate participating providers.

Claims Processing

What should I do if I receive a bill, or need to be reimbursed, for services I received?

Physicians should bill the claims administrator. The billing information is on the back of your health insurance ID card. However, if you do receive a bill or if you have paid for a service and need to be reimbursed, please send your bill (and proof of payment if seeking reimbursement) to the claims administrator. You do not need an additional claim form. Make sure your name, health insurance ID number, and school name are on the bill. Make a copy for your records before sending to the claims administrator at the following address:

Aetna Student Health P.O. Box 981106 El Paso, TX, 79998

Is any other information needed in order to pay a claim?

If the treatment you received was a result of an accident, you will receive a letter from the claims administrator asking for information about the accident, i.e. was it the result of a car accident, from playing sports, etc. Your claim cannot be processed without this information, so please respond to the letter promptly. You may also receive a letter asking if you are covered by any other health insurance plan. It is important that you respond promptly to this as well.

How will my claims be paid if I have other health insurance in addition to the Student Health Insurance Plan?

The USD Student Health Insurance Plan is an excess policy. This means if you have other health insurance, then that plan will pay first as your primary insurance. The student insurance will not pay for benefits until the primary insurance has paid first. Please refer to your brochure for details.

Plan Enhancements

What enhancements are available under this plan?

Exclusively from Gallagher Koster, enrolled students have access to a menu of products at no additional cost. More information is available by visiting www.gallagherkoster.com/USDLaw and clicking on the 'Discounts and Wellness' link.

Will I be covered under the plan after I graduate?

Students who graduate in May will be covered through the end of the policy year.

If you are expected to graduate in December, your coverage will automatically end on January 1, 2014. If you expect graduate in December and do not, or you do graduate and wish to continue your coverage until August 14, 2014, please contact the Office for Law

Student Affairs (JD Students) or the Graduate Programs Office (LLM/Graduate Students) by January 28, 2014 to extend your coverage under the plan.

Office for Law Student Affairs

Warren Hall, Room 218 University of San Diego School of Law 5998 Alcalá Park San Diego, CA 92110-2492 Telephone: (619) 260-4651 Email: lawstudentaffairs@sandiego.edu

USD Graduate and International Programs

Warren Hall, Room 207 University of San Diego School of Law 5998 Alcalá Park San Diego, CA 92110-2492 Telephone: (619) 260-4596 Email: llminfo@sandiego.edu

Are there any additional insurance products available?

Please visit www.gallagherkoster.com/USDLaw and click on the 'Other Insurance Products' link for complete details about additional insurance products that are available as well as enrollment information.

This document is only a summary of the benefits available. Please refer to the Summary Plan Description for a description of the benefits available and exclusions and limitations of the plan.