

Frequently Asked Questions For Azusa Pacific University Hard Waiver Students 2014-2015 Student Health Insurance Plan

Table of Contents

"How do I"	2
Insurance Plan Benefits	3
What changes have been made to the plan for the 2014-2015 Policy Year?	3
What is covered under the Student Health Insurance Plan?	3
Am I covered if I have a pre-existing condition?	3
What is a deductible? Does this plan have a deductible?	3
Am I required to get a referral from my school's Health Services before I seek treatment?	3
Can I go to any doctor or hospital?	3
Do I get an ID card?	3
How do I get my prescriptions filled?	3
Does this plan cover me when I am off campus, traveling or studying abroad?	4
Eligibility, Enrollment & Waiving	4
Who is eligible for the plan?	4
Can I enroll my eligible dependents?	4
What about Health Care Reform? How does that affect my Student Health Insurance Plan?	4
What is considered 'comparable coverage'?	5
Can I waive the Student Health Insurance Plan with any of the insurance plans offered through my State's Marketplace?	5
Is there anything I need to know before waiving coverage?	5
Claims Processing	5
What should I do if I receive a bill, or need to be reimbursed, for services I received?	5
Is any other information needed in order to pay a claim?	<i>6</i>
How will my claims be paid if I have other health insurance in addition to the Student Health Insurance Plan?	<i>6</i>
Plan Enhancements	6
Will I be covered under the plan after I graduate?	<i>6</i>
Are there any additional insurance products available?	<i>6</i>
Important Contact Information	7

"How do I"				
Log in?	 Go to www.gallagherstudent.com/apu. On the top right corner of the screen, click 'Student Login'. Follow the login instructions. 			
Enroll?	 Go to www.gallagherstudent.com/apu. On the left toolbar, click 'Student Waive/Enroll'. Log in (if you haven't already). Click the Green 'I want to Enroll' button. Follow the instructions to complete the form. Print or write down your reference number. 			
Enroll my dependents?	 Go to www.gallagherstudent.com/apu. On the left toolbar, click 'Dependent Enroll'. Log in (if you haven't already). Follow the instructions to complete the form and submit payment. Print or save a copy of the confirmation page. 			
Waive?	 If your current coverage is comparable to the Student Health Insurance Plan: Go to www.gallagherstudent.com/apu. On the left toolbar, click 'Student Waive/Enroll'. Log in (if you haven't already). Click the Red 'I want to Waive' button. Follow the instructions to complete the form. Print or write down your reference number. Receipt of this number only confirms submission, not acceptance, of your form. 			
Print an ID card?	 ID cards are usually available 5-7 business days after your eligibility is confirmed. Go to www.gallagherstudent.com/apu. On the left toolbar, click 'Account Home'. Log in (if you haven't already). You will be redirected to the 'Account Home' page, then click on 'Generate ID Card' under 'Coverage History'. 			
Change my address?	 Go to www.gallagherstudent.com/apu. On the left toolbar, click 'Account Home'. Log in (if you haven't already). You will be redirected to the 'Account Home' page, then click on 'Address'. Click 'Edit Address'. 			
Find a Doctor?	Go to www.gallagherstudent.com/apu and click on 'Find a Doctor'.			
Find a Participating Pharmacy?	Go to www.gallagherstudent.com/apu and click on 'Pharmacy Program'.			

Insurance Plan Benefits

What changes have been made to the plan for the 2014-2015 Policy Year?

- The Student Health Insurance Plan is compliant with the final phase of healthcare reform.
- The maximum benefit per policy year is now unlimited.
- Coverage for pediatric dental and vision up to the age of 19 have been added.
- Pre-existing condition limitations has been removed.
- Durable Medical Equipment and Dental Benefits are no longer subject to a policy year benefit maximum.
- Out-of-network Prescription Drugs have been removed.

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 In-Network
 Providers.
- Services provided by a participating In-Network provider are generally covered at 80%, while services provided by an Out-of-Network Provider are generally covered at 60%.
- Please refer to the plan brochure available at <u>www.gallagherstudent.com/apu</u> by clicking on 'My Benefits and Plan Information' for complete details about coverage, limitations, and exclusions.

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

Yes, pre-existing conditions are covered immediately under the 2014-2015 Student Health Insurance Plan.

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 \$150 per injury and sickness deductible that applies to services received from an In-Network Provider. This plan has a \$300 per injury and sickness deductible that applies to services received from an Out-of-Network Provider.

Am I required to get a referral from my school's Health Services before I seek treatment?

Yes, a referral is required before seeking care or treatment from an off-campus provider. Please refer to the plan brochure for details about the referral requirement and any exceptions to this requirement.

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 UnitedHealthcare Options PPO 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.gallagherstudent.com/apu and click on 'Find a Doctor' to locate participating In-Network providers.

Do I get an ID card?

Yes, ID cards are available online. They may be printed from a computer or viewed on your smart phone.

How do I get my prescriptions filled?

- Prescriptions can be filled at UnitedHealthcare Network participating pharmacy. To find a list of participating pharmacies near you, visit www.gallagherstudent.com/apu and click on 'Pharmacy Program'.
- At participating pharmacies, you will pay a 25% coinsurance for prescriptions.

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.gallagherstudent.com/apu 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.

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.gallagherstudent.com/apu and selecting 'Pharmacy Program', then 'Pharmacy Override Form'.

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.

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

Yes, the 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 Expenses and Travel Assistance Services through FrontierMEDEX, the 24-hour worldwide assistance service. All services must be arranged for in advance and provided by FrontierMEDEX. Any services not arranged by FrontierMEDEX will not be considered for payment.

- When studying or traveling abroad, keep your Student Health Insurance ID 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 school name are on the bill.

Eligibility, Enrollment & Waiving

Who is eligible for the plan?

All domestic undergraduate students who are enrolled in 7 or more credit hours (at least 3 credit hours must be taken on campus) or are living in on-campus housing and all international students, visiting faculty and scholars and other persons possessing and maintaining a current passport and valid visa status (F-1, J-1, or M-1) are automatically enrolled in this insurance plan and the premium for coverage is added to their tuition billing.

Can I enroll my eligible dependents?

Yes, you can enroll your eligible dependent(s) at the same time as your own initial plan enrollment by following the steps described in the 'How do I...' section of this document. 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 <u>must</u> be received by Gallagher Student Health & Special Risk within 31 days of the qualifying event. Forms received more than 31 days after the qualifying event will not be processed. Once a dependent is enrolled, coverage cannot be terminated unless the student loses eligibility.

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.

What is considered 'comparable coverage'?

Determining comparable coverage requires comparison of cost-sharing levels (deductibles and coinsurance) and access to In-Network Providers. The level of benefits should meet or exceed the benefits provided through the Student Health Insurance Plan. Coverage is considered comparable if it provides students with access to a range of services in and around the area where they attend school. Services include, but are not limited to, preventive and primary care, emergency care, surgical care, inpatient and outpatient hospitalization benefits, lab work, diagnostic x-rays, physical therapy and chiropractic care, prescriptions, and mental health and substance abuse treatment. Also, consider the amount of your current plan's deductible and In- and Out-of-Network coinsurance to avoid high out-of-pocket costs. Students should be able to seek these services from providers who are considered In-Network or Preferred. If your current plan is an HMO, it is very likely that coverage is limited, or not available, outside of the HMO's service area.

Plans that only provide emergency services in the campus area are not considered comparable.

Can I waive the Student Health Insurance Plan with any of the insurance plans offered through my State's Marketplace?

Students are eligible for the insurance plans offered through the Marketplace in their home State. If you are a resident of the State in which you are attending college, you can waive your Student Health Insurance Plan with a plan purchased through your State's Marketplace. Please review these plans carefully. Many of these plans will have a deductible greater than the deductibles on the Student Health Insurance Plan which will increase your out-of-pocket costs. Also look at the In-Network and Out-of-Network Provider coverage levels to be sure that In-Network Providers are located near your campus. Please note, choosing to enroll in a State Marketplace plan mid-year is not considered a qualifying event that would allow you to terminate enrollment in the Student Health Insurance Plan.

Is there anything I need to know before waiving coverage?

Before waiving coverage 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.) on- and off-campus?
- Does your plan have doctors and hospitals near campus?
- Check the cost -- is the annual cost of this Student Health Insurance 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?

Please Note:

- Full-time students who did not waive the insurance in the fall are defaulted into the annual Student Health Insurance Plan and do not have the option to waive coverage for the spring.
- International students are enrolled on a mandatory basis and cannot waive coverage.
- Students who do not complete a waiver form by the published deadline will be automatically enrolled in and billed for the Student Health Insurance Plan.
- It is recommended that all students submit an online form, whether enrolling or waiving.

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 Student 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 address provided in the Important Contact Information section of this document.

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 notification 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 promptly. You may also receive a request 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 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 Health Insurance Plan will not pay for benefits until the primary insurance has paid first.

Please refer to the brochure for details.

Plan Enhancements

Will I be covered under the plan after I graduate?

Yes, you will be covered under the Student Health Insurance Plan until the end of the policy period for which you have purchased coverage. There is no option to continue coverage after the policy terminates.

Are there any additional insurance products available?

Please visit <u>www.gallagherstudent.com/apu</u> 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 intended to provide a summary of the available benefits. Please refer to the brochure for a complete description of the benefits, exclusions, and limitations of the plan.

Important Contact Information

Information Needed	Who to contact	Contact Information
Questions about enrollment, coverage, benefits, or ID cards		Gallagher Student Health & Special Risk
		500 Victory Rd.
	Gallagher Student Health &	Quincy, MA 02171
	Special Risk	Phone: 1-800-406-4517
	•	Email: apustudent@gallagherstudent.com
		Website: www.gallagherstudent.com/apu
Questions about claims and claims payment		UnitedHealthcare Student Resources
		P.O. Box 809025
	UnitedHealthcare Student	Dallas, Texas 75380-9025
	Resources	Phone: 1-866-948-8472
		Email: gkclaims@uhcsr.comm
		Website: <u>www.uhcsr.com</u>
Questions about preferred	UnitedHealthcare Options	Phone: 1-866-948-8472
	<u>-</u>	Go to www.gallagherstudent.com/apu, click on 'Find
providers	PPO	a Doctor'
Questions about	UnitedHealthcare Network	Phone: 1-877-417-7345
•		Go to www.gallagherstudent.com/apu, click on
participating pharmacies	Pharmacy	'Pharmacy Program'
Worldwide assistance		Toll-free within the United States:
		1-800-527-0218
services (medical evacuation	FrontierMEDEX	Collect from outside the United States:
and repatriation)		1-410-453-6330
		Email: operations@frontiermedex.com
Questions about assistance	24/7 Nurseline or Collegiate	
programs	Assistance Program	Phone: 1-877-643-5130