



**Weill Cornell
Medicine**



Weill Cornell Medicine 2019-2020 Student Health Insurance Plan (SHIP)

Frequently Asked Questions



Student Health &
Special Risk

“How do I...?”

Find my Student ID

1. Go to <https://learn.weill.cornell.edu/ICS>.
2. Click on 'Home' Tab.
3. Click on 'My Jenzabar ID' in the left navigation under Home.
4. ID will be displayed.

Log in

1. Go to www.gallagherstudent.com/wcmc.
2. On the top right corner of the screen, click on 'Student Login'.
3. Follow the login instructions.

Enroll my Dependents

Contact student-accounting@med.cornell.edu for further information.

Waive

If your current insurance plan is comparable to the SHIP:

1. Go to www.gallagherstudent.com/wcmc.
2. On the left toolbar, click on 'Student Waive'.
3. Log in by following the instructions on the website (if you haven't already).
4. Click on 'I want to Waive'.
5. Follow the instructions to complete the form.
6. Save a copy of your reference number. This number only confirms submission, not approval of your form.

Edit my Form after it's submitted

If it is before the waiver deadline:

1. Go to www.gallagherstudent.com/wcmc.
2. Log in by following the instructions on the website (if you haven't already).
3. On the left, click on 'View My Submitted Forms'.
4. Select the form you want to edit.
5. Update the form as needed.
6. Click on 'Submit Edit'.

After the waiver deadline, forms cannot be edited. Please contact Customer Service if you have any issues.

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“How do I...?”

Obtain an ID Card

ID cards are usually available 5-7 business days after your eligibility is confirmed.

1. Visit www.aetnastudenthealth.com
2. Choose your school name from the drop-down box.
3. Click the purple icon that says “Get your ID card.”
4. Enter your Student ID number and date of birth, then click “Submit” to generate your ID card.
5. Note: This process will only allow access to your ID card. In order to obtain access to claim information and tax documents, you will need to create a User Account using the “Your Member Website” link at the top of the page.

Obtain a Tax Form

If the federal government requires reporting of health insurance coverage for 2019, tax forms will be mailed to the address on file by either the Insurance Carrier or the Claims Administrator. Please refer to the Important Contact Information Section of this document for further information.

Print a Verification Letter

Verification Letters are usually available 5-7 business days after your eligibility is confirmed.

1. Go to www.gallagherstudent.com/wcmc.
2. On the left toolbar, click on ‘Account Home’.
3. Log in by following the instructions on the website (if you haven’t already).
4. You will be redirected to the ‘Account Home’ page, then click on ‘Verification Letter’ under ‘Coverage History’.

View my Account Information

1. Go to www.gallagherstudent.com/wcmc.
2. Log in by following the instructions on the website (if you haven’t already).
3. On the left toolbar, under ‘My Account’, click on ‘Authorize Account’.

Find a Doctor

Go to www.gallagherstudent.com/wcmc and click on “Find a Doctor”.

Find a Participating Pharmacy

Go to www.gallagherstudent.com/wcmc and click on “Pharmacy Program”.

Insurance Plan Benefits

What benefits does your Student Health Insurance Plan (SHIP) provide?

Your SHIP is fully compliant with the Affordable Care Act (ACA) and all other federal and state mandates. It pays for a variety of medical services, including hospital room and board, inpatient and outpatient surgical

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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. It also covers intercollegiate sports injuries the same as any other Injury.

It covers preventive care services at no cost when you use in-network providers. This includes routine physicals and examinations, screenings, GYN examinations, and most immunizations.

It pays for 90% of your medical fees when you use in-network providers. This is the advantage to using in-network providers. When you use out-of-network providers the coinsurance is less which means your potential out-of-pocket costs are more. There may be copayments and deductibles you'll be responsible for paying.

Need more information about your plan? Go to www.gallagherstudent.com/wcmc

Other features of your SHIP:

- It has a combined In-Network and Out-of-Network deductible of \$500 for every year you're in the plan.
- For prescription drugs from participating pharmacies, you will pay:
 - a \$15 copay for a 30-day supply of a generic drug
 - a \$45 copay for a 30-day supply of a preferred brand name drug
 - a \$75 copay for a 30-day supply of a non-preferred brand name drug
- Note: in some cases, your doctor must get permission from the insurance company before prescribing a drug. You can see which drugs require preapproval by visiting your school's page at www.gallagherstudent.com.

Does your plan include dental and/or vision benefits?

If you're 19 or younger, you can get preventive dental and vision benefits with this plan. The same holds true for your enrolled eligible dependents as long as they are 19 or younger. For details, refer to your SHIP brochure or certificate.

There is a separate Guardian Dental Insurance Plan available to all students; and including those students not enrolled in the Student Health Insurance Plan. A description of the Guardian Dental Insurance Plan and applicable plan costs can be found under the “Other Insurance Products” link.

Do I need a referral from my school's Health Services to see an off-campus health provider?

Students are strongly advised to visit Student Health Services (SHS) prior to seeking medical care. While a written referral is not required, SHS has long standing relationships with many Participating Providers both at, and outside, of the Medical Center. If you choose a specialist who is a Non Participating Provider, covered expenses will only be covered at 70% of the Usual and Customary Amount. If you have other health insurance, you are encouraged to obtain a recommendation in order to help you find “student friendly” physicians who participate in your plan. If your health insurance requires you to elect a Primary Care Provider (PCP), please note that the Student Health Services physician is not enrolled in any plan. For further information, please contact Student Health Services at 1-646-962-6942.

Students are strongly advised to visit Student Mental Health Services prior to seeking behavioral/mental health

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care, as this team has significant expertise in the diagnosis, treatment and management of behavioral/mental health problems in professional students and can provide confidential, high quality care at no or low cost to you, while maintaining the utmost privacy and confidentiality. The Student Mental Health Program is directed by Dr. Richard Friedman who can be reached directly at 1-212-746-5775.

Am I still covered if I live off campus or I'm traveling or studying abroad?

Yes, your plan covers you wherever you are – during semester breaks and summer vacation. This is true even if you're traveling or studying abroad. As long as you're enrolled in SHIP and you paid your premiums, you'll be covered.

More information about off-campus, travel and study abroad

In addition to being covered for medical treatment and services, your plan also offers 24-hour Worldwide Travel Assistance which includes services ranging from a lost passport to helping with emergency medical assistance or arranging for emergency medical evacuation or repatriation of remains. For further information regarding this benefit, please refer to www.aetnastudenthealth.com.

Other information about seeking medical care abroad:

- Always keep your SHIP ID card with you.
- Save a copy of the plan brochure and/or bookmark your student health website.
- If you get sick while abroad, you will likely need to pay for your care first and then need submit bills for reimbursement. Your covered expenses will likely be considered an out-of-network expense.
- Before you submit claims for reimbursement, have the itemized bill(s) translated into English. Also include a letter informing the claims administrator you already paid for the healthcare service and need to be reimbursed.
- Write your name, ID number, address, and school name are on your bill(s). This will help the claims company process your reimbursement request correctly and promptly.

Does my plan still cover me after I graduate?

Yes. You will be covered under your SHIP until the end of the policy period for which you are enrolled and have paid your premium. If you enrolled and paid for annual or spring/summer coverage and graduate in the spring, you will be covered until the end of the policy year. For PhD students, the policy ends at the end of the month in which your stipend has terminated. There is no option to continue coverage after the policy terminates.

Eligibility, Enrollment & Waiving

Am I eligible for student health insurance?

Enrollment in a health insurance plan is required for all students at Weill Cornell Medicine. To ensure compliance with this policy, students are automatically billed for the Student Health Insurance Plan unless proof of comparable insurance coverage is documented. Documentation is provided by completing an online waiver form identifying the in-force 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.

You will be covered under the Student Health Insurance Plan until the end of the policy period for which you

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are enrolled or until you leave the program, whichever is earlier. For PhD students, the policy ends at the end of the month in which your stipend has terminated.

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 the student experiences one of the following qualifying events: (a) marriage, (b) birth of a child, (c) divorce, (d) spouse loses coverage through loss of job or (e) if the dependent is entering the country for the first time. If the student experiences one of these qualifying events, the Dependent Enrollment Form and supporting documentation must be completed through the Office of Student Affairs. Gallagher Student Health & Special Risk will add coverage within 48 hours of notification from the college.

Depending on the program a student is enrolled in, the cost of the dependent insurance may be covered.

Qualifying events for enrolling your dependents

You can add eligible dependent(s) if one of these qualifying events occurs:

- You get married
- You have a child
- You get divorced
- Your dependent enters the country for the first time
- Your dependent loses coverage under another insurance plan

In such cases, you must contact student-accounting@med.cornell.edu.

Note: your premium is prorated. Once your dependent is enrolled, you can’t terminate coverage unless you lose your Student Health Insurance eligibility.

What should I know before waiving coverage?

Before waiving coverage, review your current policy and then consider these questions:

- Does your plan comply with the Affordable Care Act? (See the FAQ, “What do you mean by ‘comparable coverage?’”)
- 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?
- If you plan to travel elsewhere during the course of the year, does your coverage also extend to these areas?
- Is the annual cost of your SHIP 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.

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“How do I...?”

- Does your current plan call for administrative pre-requirements, pre-certification, or primary-care physician referrals? Keep in mind that physician referrals may delay your access to treatment.

More information about waiving coverage

- Once you meet eligibility, you are enrolled for the remainder of the policy and can't waive later in the year.
- If you decide to waive coverage, you won't have another opportunity to enroll in SHIP until the following plan year unless you experience a qualifying event.

What do you mean by “comparable coverage”?

If you decide to opt out of your SHIP, you must be insured by a plan that provides comparable coverage. This means it must comply with the Affordable Care Act (ACA) and meet or exceed the benefits provided through the SHIP (SHIP). Your plan must have participating providers and cover a range of services in and around the geographic area where you attend school. Services should include, but aren't limited to:

- Preventive and non-urgent care
- Emergency care
- Surgical care
- Inpatient and outpatient hospitalization
- Lab work
- Diagnostic x-rays
- Physical therapy
- Chiropractic care
- Prescription drugs
- Mental health and substance abuse treatment

More information about “comparable coverage”

If your current plan is an HMO, your coverage will likely be limited—or not available—outside of your HMO's service area. As a result, it probably won't be considered a “comparable” plan.

Confused about waiving your SHIP coverage? Before deciding what to do, compare your current health insurance plan to your SHIP coverage. Consider your possible out-of-pocket costs – deductibles, copays, coinsurance and out-of-pocket maximums. You may find your current plan's out-of-pocket costs to be higher than what you'll pay for SHIP. Moving to your SHIP may well be financially beneficial.

Non-comparable health plans include:

- Those that only provide emergency services
- International plans (includes plans not filed in the US)
- Travel insurance plans
- Health care sharing plans
- Out-of-state Medicaid plans

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“How do I...?”

- Plans from insurance companies not located within the United States
- Prescription discount plans

Will you audit or verify my waiver request?

Yes, we may audit or verify your request. This is to make sure your insurance plan will cover you when you're at school.

More information about our waiver review process

Here's how our waiver review process works:

- We check the insurance company information you entered on your form to make sure it's accurate and that your coverage is active.
- We verify most waiver requests within 24 to 48 hours.
- Once we verify your coverage, we'll let you know whether we approved your waiver via an email to the address you provided on your form. If we deny your request, we'll tell you why. We'll also guide you should you wish to revise and resubmit your form and supporting documentation.
- **Note: The waiver review process is new this year. As a result, it is possible your prior waiver (and submitted insurance) may no longer be accepted.**

If I waive, but then lose coverage, can I enroll in SHIP?

Yes, if you waive and then lose coverage under that plan (called a qualifying event), you may submit a Petition to Add request. Contact student-accounting@med.cornell.edu for information.

If your enrollment in SHIP is on a voluntary basis, there is no option to Petition to Add if you lose coverage with your current health insurance plan. If you missed the enrollment deadline you will need to wait until the next open enrollment period.

How do recent changes to the Affordable Care Act affect my SHIP (SHIP)?

Your SHIP fully complies with the Affordable Care Act (ACA). Being ACA compliant means your plan offers essential health benefits which includes certain preventive services such as annual physical and gynecology exams and some immunizations. It also covers pre-existing conditions without any waiting period.

There is no longer a federal tax penalty for not having health insurance, but the mandate to have health insurance remains. There are some states that have kept a state tax penalty for not having health insurance as well as having additional insurance requirements.

If you are under the age of 26, you may be eligible to enroll as a dependent on your family's employer/group health insurance plan. Contact that plan for more information.

May I use one of my state's marketplace health insurance plans to waive my SHIP?

If you live in the state where you are attending school and bought insurance through your state's marketplace, you may be able to waive your SHIP (SHIP). Please review these plans carefully. Many of them will have a deductible greater than that of your SHIP. This will increase your out-of-pocket costs. Also, many of these plans are HMOs with restrictive provider networks. Look at its provider network to be sure that you'll have in-

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“How do I...?”

network providers near your campus.

More information about buying health insurance through your state’s or the federal marketplace

Are you an international student? If so, then purchasing a subsidized marketplace plan may jeopardize your visa status.

Once I’m enrolled in the SHIP, can I cancel it? Can I get a refund?

In some cases, you can cancel your SHIP and receive a refund.

You can request to terminate the remainder of the coverage (and receive a pro-rated premium refund) in the following situations:

1. You’re entering the armed forces.
2. You’ve submitted a written request to Gallagher Student Health & Special Risk to cancel your coverage. Contact Gallagher Student Health & Special Risk for specific instructions. Note: if your health coverage isn’t comparable to the school plan, you will not be allowed to withdraw from it.

Plan Enhancements

How to enhance your Student Health Insurance Plan (SHIP)

You can enhance your SHIP by accessing several products available exclusively from Gallagher Student Health & Special Risk. They include:

- Basix Dental Savings Program—provides an exclusive discount arrangement, which can save you 20% to 50% off the cost of dental care.
- EyeMed Vision Care Program—allows you to receive discounted services at participating EyeMed providers.

What other types of insurance are available?

Personal property and renters Insurance is available to students on- or off-campus, at home, or abroad. It covers damage or theft to laptops, cell phones, books, electronics, and much more. For details, go to www.gallagherstudent.com/property.

Please visit www.gallagherstudent.com, select your school’s page, and click on the “Other Insurance Products” link for complete details about additional insurance products and how to enroll.

Important Contact Information

Information Needed	Who to Contact
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“How do I...?”

<i>Enrollment and coverage</i>	Gallagher Student Health & Special Risk 500 Victory Road, Quincy, MA 02171 Website: www.gallagherstudent.com/WCMC
<i>Benefits, claims and claims payments</i>	Aetna Student Health Phone: 1-866-746-6590 Website: www.aetnastudenthealth.com
<i>Preferred providers</i>	Aetna PPO Network Website: www.gallagherstudent.com/WCMC Click on 'Find a Doctor'
<i>Participating pharmacies</i>	Aetna Pharmacy Network Phone: 1-888-792-3862 Website: www.gallagherstudent.com/WCMC click on 'Pharmacy Program'
<i>Tax forms</i>	Aetna Student Health Phone: 1-866-746-6590 Website: www.aetnastudenthealth.com
<i>Voluntary Dental</i>	Guardian Phone: 1-800-541-7846 Website: www.guardianlife.com
<i>Worldwide assistance services (medical evacuation and repatriation)</i>	Aetna Student Health Phone: 1-866-746-6590 Website: www.aetnastudenthealth.com

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