The following information below will assist you with understanding how your medical insurance claims will be processed. Please read this information carefully to ensure you understand what processes must occur in order for claim processing.

*Please note that failing to provide any additional information outlined below may result in a delay or denial of your submitted claims.

To determine which of the claims payment provisions described below apply to your plan, please refer to your plan brochure.

- Excess Policy: If your student medical insurance plan is an Excess Policy, this means that if you have another health insurance plan, your other insurance plan is considered your 'primary' insurance plan and will pay first. The student insurance plan will therefore not pay for any eligible benefits until your primary insurance has paid according to their policy terms. It is important that you provide health insurance information for both policies to your provider at the time services are rendered. Not providing this information may significantly delay claims processing.
- **Coordination of Benefits:** If your student medical insurance plan has a Coordination of Benefits provision, this means your student medical insurance plan will coordinate the payment of claims with your other insurance company. You will need to advise your provider that you are covered under two policies and then provide the claims company with information about your other health insurance company. Not providing this information may significantly delay claims processing.
- **Primary Coverage:** If your student medical insurance plan is a Primary Plan, this mean that the student medical insurance plan will pay all claims for eligible covered expenses as the primary carrier and will not coordinate benefits with any other insurance plan. If you have other insurance, you may submit any unpaid charges to your other insurance.

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. if it was the result of a motor vehicle 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 you if you are covered by any other health insurance plan. It is important to respond promptly to this as well.

