

University of Delaware Student Accident and Sickness Plan

Graduate Student Senate - Health Care Committee

Frequently Asked Questions

(Fall 2011)

Disclaimer:

This information has been gathered by University of Delaware graduate students and support staff. This document is for informative purposes only. It does not constitute a contract. It does not claim to be complete. Please note that the health care policies and the legal terms can be obtained by contacting the health care service providers or/and the health insurance providers. We have provided this document to reflect the common knowledge shared by its authors. For further clarification, please contact your health insurance or health care provider directly.

Frequently Asked Questions:

1. What health care plan is offered by the University of Delaware?

Currently, the University of Delaware offers two Student Accident and Sickness Insurance Plans: the Blue Plan (Comprehensive Major Medical Benefit Plan) and the Blue & Gold Plan (Enhanced Major Medical Benefit Plan) through University Health Plans. Visit www.universityhealthplans.com or <http://www.udel.edu/shs/insurance/guid1011.pdf> for a complete description of the plans.

The difference between the two plans is that the Blue Plan (Comprehensive Major Medical Benefit Plan) has a maximum benefit per condition of \$50,000 and the Blue & Gold Plan (Enhanced Major Medical Benefit Plan) has a maximum benefit per condition of \$1,000,000. However, the maximum for mental/nervous disorders and physical therapy under either plan is limited to \$50,000. Purchasing the Blue & Gold Plan (Enhanced Major Medical Benefit Plan) does not decrease deductibles, increase co-insurance amounts, increase prescription coverage, or add any additional benefits.

2. What is a PPO program?

It is a discount program that insurance companies such as the insurance provided by the University of Delaware make available.

3. Is the health care provided by the University of Delaware enough?

The Blue Plan (Comprehensive Major Medical Benefit Plan) provided by the University of Delaware is designed to: 1) meet the minimum requirements set forth by the United States Government concerning foreign students; 2) provide basic accident & sickness benefits to students while trying to keep the plan cost reasonable. However, purchasing the Blue & Gold Plan (Enhanced Major Medical Benefit Plan) provides you with a \$1,000,000 per condition maximum, compared to the \$50,000 per condition maximum of the Blue Plan (Comprehensive Major Medical Benefit Plan).

Please Note:

- Neither plan will cover routine or preventative services (such as annual physical exams or vaccinations) unless such coverage is mandated by the State of Delaware.
- Neither plan is a primary medical insurance. This means that if you have any other kind of primary medical insurance, including insurance from another country, or if your country of origin covers your health care when you are abroad, the insurance provided by the University of Delaware will not pay for your health care until all of your claims have been processed by your other insurance companies. If you have a pre-existing condition, or if you need surgery, then they will ask for proof of prior coverage.
- Both plans have a limit of \$500 for prescription reimbursement. Please be aware that if you have a serious condition, \$500 is a low amount. For healthy people this amount is normally enough.
- The brochure (including exclusions) should be read thoroughly prior to buying this, or any, insurance plan.

4. What is my alternative to the University of Delaware Student Accident and Sickness Plan?

If you feel that the coverage provided by the University of Delaware will not be sufficient for your needs because of plan limitations, exclusions, prescription reimbursement maximum, etc., then you may want to seek out a different plan privately.

5. Who are the companies involved in the University of Delaware Student Accident and Sickness Plan?

- The insurance company is Nationwide Life Insurance Company.
- The claims administrator is Consolidated Health Plans.
- The plan manager is University Health Plans.

6. What is the difference between University Health Plans and Consolidated Health Plans?

Consolidated Health Plans (CHP) is the claims administrator for our health insurance plan. CHP is responsible for answering questions about insurance benefits, claims and providing replacement ID cards. If you have any questions for CHP, please email info@consolidatedhealthplan.com or call 800-633-7867.

University Health Plans (UHP) is the broker/plan manager who handles the enrollment process for the school health insurance plan. Please email UHP at info@univhealthplans.com or call 800-437-6448 if you have any questions about your enrollment or if you experience customer service issues with CHP.

7. Where can I find more information on the University of Delaware Student Accident and Sickness Plan?

- University of Delaware Webpage: <http://www.udel.edu/shs/insurance/index.html>
- Consolidated Health Plans Webpage: <http://www.consolidatedhealthplan.com/>
- University Health Plans Webpage: <https://www.universityhealthplans.com/intro/UDEL.html>

8. Is it possible for funded domestic students to have the cost for the Student Accident and Sickness Plan deducted from their stipend?

Yes, this can submit an [Authorization for Payroll Deduction Form](#).

9. Is it possible to pay for the Student Accident and Sickness Plan in installments?

1) Yes, see answer #8 above.

2) University Health Plans requires payment in full prior to issuing coverage. However, you may break up your payment by purchasing the Fall Plan (9/1-2/1) and Spring Plan (2/1-9/1) separately. Please note: a) all deadlines mentioned in the answer for Question 9 apply. b) You must be eligible each time you enroll. In other words, if you purchase the Fall Plan and are no longer at the University in the Spring, you may not reenroll. c) If you purchase the Fall Plan while you are a Funded Graduate and your status changes to Non-Funded for the Spring, you must pay the Non-Funded rate when you reenroll for the Spring Plan.

10. When is the enrollment period for the University of Delaware Student Accident and Sickness Plan

Coverage Period	Deadline for Having Effective Date as the 1 st Day of Coverage Period	Final Deadline	Enrollment Period Open to:
9/1-9/1	9/14 *	9/30	Undergraduates, Non-Funded Graduates, Funded Graduates and Post Docs
? 9/1-2/1	9/14 *	9/30	Undergraduates, Non-Funded Graduates, Funded Graduates and Post Docs
1/1-9/1	1/14 *	1/31	Undergraduates and Non-Funded Graduates
2/1-9/1	2/14 *	2/28	Undergraduates, Non-Funded Graduates, Funded Graduates and Post Docs
6/1-9/1	6/14 *	6/30	Undergraduates, Non-Funded Graduates, Funded Graduates and Post Docs

* Enrollments received after this day, but before the Final Deadline will be effective on the day the payment and form are received by University Health Plans.

Funded Graduate Students and Post Docs may contact University Health Plans to inquire about the process for enrolling outside of the periods above if a **Qualifying Event** (loss of other coverage, new student status or new post doc status) occurs. All required documentation and payments must be received within 31 days of the event.

11. When is the enrollment period for Delta Dental PPO Dental Insurance Plan enrollment period for Delta

Dental PPO Dental Insurance Plan?

Coverage Period	Deadline for Having Effective Date as the 1 st Day of Coverage Period	Final Deadline	Enrollment Period Open to:
9/1-9/1	9/14 *	9/30	Undergraduates,

There is no late enrollment allowed for Qualifying Events for the Delta Dental PPO Dental Insurance Plan.

12. When is the enrollment period for the VSP Vision Care Plan?

Coverage Period	Deadline for Having Effective Date as the 1 st Day of Coverage Period	Final Deadline	Enrollment Period Open to:
9/1-9/1	9/14 *	9/30	Undergraduates, Non-Funded Graduates, Funded Graduates and Post Docs
9/1-2/1	9/14 *	9/30	Undergraduates, Non-Funded Graduates, Funded Graduates and Post Docs

There is no later enrollment allowed for Qualifying Events for the VSP Vision Care Plan.

13. What is the process to file a claim?

- You may file a paper claim using the form available at: http://www.universityhealthplans.com/brochures_pdf/ClaimForm.pdf
- Or you may file your claim electronically using Consolidated Health Plans website: https://www.consolidatedhealthplan.com/student_health/university_of_delaware.html
- Your Consolidated Health Plans login information can be found on the letter that comes with your insurance card. If you need a new login, contact Consolidated Health Plans.

14. How do I understand my Explanation of Benefits?

After a claim has been filed, an Explanation of Benefits is sent to you from Consolidated Health Plans to provide information on what portion of the medical services you received will be covered under your insurance policy. If something is listed as ineligible, use the number in the “Ref” column and the “Reference Key” to understand why it is listed as ineligible. Your Explanation of Benefits is NOT a bill. If there is a balance once the insurance has been applied, the office where you received medical services will send a separate bill statement for the remaining balance.

15. How do I get reimbursed for medication prescribed by a non-University of Delaware physician?

Once the prescription is purchased at an “outside” pharmacy, the student must submit for reimbursement by mail. The claim form for prescriptions is the same as for an injury or illness, located here:

http://www.universityhealthplans.com/brochures_pdf/ClaimForm.pdf

Fill in all information and provide appropriate receipts. The required receipt is the paper that is usually attached to your prescription bag that provides the name of the drug, dosage information, cost, fill date and prescribing doctor. It is strongly recommended that you make photocopies of all documents submitted prior to mailing.

16. Can I take a prescription from a University of Delaware physician and get it filled at another (outside) pharmacy?

A prescription written by a University of Delaware physician can be filled at the Student Health Services Dispensary or any “outside” pharmacy. If the prescription is filled at an outside pharmacy, the student must pay out of pocket full price and file a claim form for that prescription. Please refer to the reimbursement process in Question 14.

17. Can I take a prescription from a non-University of Delaware physician and get it filled at Student Health Services?

No, the dispensary at the University of Delaware Student Health Center will only fill prescriptions written by a physician from Student Health Services. If the prescription is written by a non-University of Delaware physician, the student has to bring the prescription to an outside pharmacy, pay for the prescription (Rx) and then file a reimbursement claim. Please refer to Question 14.

18. What do I do if I cannot afford the full price of my non-University of Delaware dispensary prescription?

Currently, there is not a good solution for this. Each person should inquire about prices at several pharmacies. Some pharmacies offer prescription plans. However, the official answer is that the insurance offered to students only covers a maximum of \$500 in prescriptions per year and that prescriptions purchased outside of the Student Health Services Dispensary must be paid for upfront.

19. How is the University of Delaware health insurance plan chosen?

The University of Delaware negotiates for a health care provider and health insurance plans every three years. The last negotiation took place in 2008 for a three year agreement starting in 2009.

20. What information do I need to have ready before I make a visit for health/dental/vision care?

Student Accident and Sickness Plan

Referrals are not required. Bring your insurance card or present the insurance number (**Policy Number: 302-001-0707**) with you to the appointment so that the proper billing information can be noted on your records. It is recommended that you call the health care provider office prior to your visit to ensure the establishment accepts the University of Delaware Student Accident & Sickness Insurance Plan which uses the Multiplan PPO Network.

While the University of Delaware Student Accident and Sickness Insurance Plan does not restrict where you can receive services, receiving treatment from a provider who participates in the Multiplan PPO Network may reduce the student's out-of-pocket costs because of discounts these providers agree to. A "Find a Provider" link can be found on University Health Plans' website (www.universityhealthplans.com). Providers in this network should recognize the name Multiplan PPO Network and will bill Consolidated Health Plans directly.

You may still choose to be treated by a non-Multiplan PPO Network provider; however that health care provider may require you pay out-of-pocket for your services and have not previously agreed to any discounts. The University of Delaware Student Accident and Sickness Insurance Plan will pay a percentage of the Reasonable and Customary Charge for covered services received from a non-Multiplan PPO Network provider.

You will be required to complete a Student Claim Form each policy year for each condition you are treated for. Refer to Question 12.

Delta Dental PPO Dental Plan

Cards are not sent for the Delta Dental PPO Dental Plan. You must print out a Dental Plan Claim Form to bring to your appointment. A claim form is available at: www.universityhealthplans.com.

Referrals are not required. You may go to any dentist, however to maximize your plan benefits, please receive treatment from a dentist who participates in the Delta Dental PPO Network. The website includes a link to "Find a Provider".

VSP Vision Care Plan

Cards are not sent for the VSP Vision Care Plan. Referrals and claim forms are not required. You can search for providers in your area by going to www.universityhealthplans.com.

21. How do I find out if a doctor is in-network?

There is a network of doctors and hospitals who participate in the Multiplan PPO Network. Those providers have agreed to discounted rates. To find these providers go to www.universityhealthplans.com; choose University of Delaware; select your status; click on "Find a Provider". Choose the "Front of Card" logo that says "Multiplan PPO".

22. Is it possible to opt out of the health care plan?

Yes. If you are a domestic student, the plan is offered on a voluntary basis and you will only be enrolled if you voluntarily purchase the plan. International students are automatically enrolled in the Blue Plan (Comprehensive Major Medical Benefit Plan). However, an international student may request to be waived out of the University of Delaware Student Accident and Sickness Insurance Plan. The plan must meet the basic coverage standards required by their Visa Status in the United States. **The student must complete a waiver form and meet with the staff in the Office of International Students and Scholars before the Drop-Add period closes.**

23. I am a funded student, but I am not provided the funded student rate when enrolling for health insurance. Who do I contact?

Each semester, University Health Plans is provided with a list of Funded Graduate and Post Doc ID Numbers by the University of Delaware. The list is periodically updated. If you are having trouble accessing the form, please contact the Office of Graduate & Professional Education to ensure your name has been provided to University Health Plans as a funded student.

24. Who can I contact if I have a question about a claim that I submitted?

For questions concerning claims, you may contact Consolidated Health Plans at 800-633-7867 or you may email online at www.universityhealthplans.com.

25. Can my dependents (spouse and children) be covered by the University of Delaware Student Accident and Sickness Insurance Plan?

Spouses and children who are not students at University of Delaware may be added to your University of Delaware Student Accident and Sickness Insurance Plan using the University Health Plans website (www.universityhealthplans.com), at a price.

You may only enroll your dependents when you first enroll during the policy year. If you purchase the Fall Semester plan as Student Only, you may not switch to a Student + 1 Dependent plan in the Spring Semester. You must wait until the next policy year.

However, all students may add dependents to their plans within 31 days of a Qualifying Life Event (marriage, birth of a child, adoption of a child, or entry of dependents into the U.S.)

26. Does the University of Delaware have a contact person at University Health Plans?

Yes, the current contact person at the broker's office is Dorothea Lyons. You may contact her if you have any issues that you have been unable to resolve with Consolidated Health Plans or if you have any enrollment questions you were unable to have answered by University Health Plans' main phone number or email address. Dorothea Lyons contact information is Plans' main phone number or email address. Dorothea Lyons contact information is Plans' main phone number or email address. Dorothea Lyons contact information is dlyons@univhealthplans.com or 800-437-6448 x10.