# WELLESLEY COLLEGE

### SPRING 2020 Student Health Insurance Plan

Per Massachusetts State Law, all students including Davis Scholars are required to enroll in the Wellesley College Student Health Insurance Plan or be covered by a health insurance plan with comparable coverage.





Spring Premium for Coverage Effective 01/01/2020 - 08/14/2020

Please visit <u>www.universityhealthplans.com/Wellesley</u> for additional information.

#### **IMPORTANT CONSIDER ATIONS**

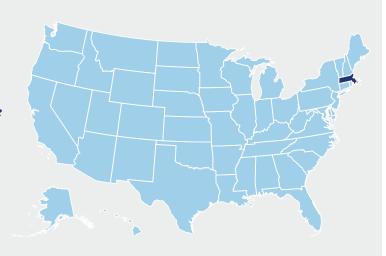
If you have your own health insurance, it is important to confirm your coverage in the Wellesley College area prior to making a decision about the Student Health Insurance Plan.

• Do you have an out-of-state HMO, EPO or Medicaid plan?

Your coverage may be limited or not available while at Wellesley College. Kaiser and Anthem BCBS are popular out of state HMO plans that do not provide coverage in MA.

 Do you have a high deductible health plan (HDHP)?

You may have high out of pocket costs if/when care is utilized



For your benefit, a comparison worksheet has been provided for you.

Please utilize this tool in addition to contacting your insurance company to confirm your coverage in the Wellesley College area.

## WELLESLEY COLLEGE HEALTH INSURANCE COMPARISON WORKSHEET

Please consider your coverage options carefully before making a decision about the Student Health Insurance Plan.

- Not all plans provide comprehensive coverage in Massachusetts, specifically the Wellesley College area.
- While your current plan may provide comprehensive coverage close to home, plan restrictions may limit coverage for students away from home.
- High deductible health plans may create a financial barrier to accessing care or result in high out of pocket costs.

#### Review and complete the comparison to confirm your plan provides you with comprehensive coverage while at Wellesley College.

- (1) Have your plan benefits available before completing the comparison or contact your insurance company's Member Services Team.
- (2) Complete the below comparison and review the benefits of both plans with a parent or guardian to confirm your coverage in Wellesley, MA.
- (3) If you have confirmed your plan is comparable to the Student Health Insurance Plan and would like to waive participation in the Student Health Insurance Plan, an online waiver form must be completed. Visit www.universityhealthplans.com/Wellesley to complete the insurance waiver form. Please have your insurance ID card available prior to completing the waiver form.

If you have questions about the comparison or the Student Health Insurance Plan, please contact University Health Plans at (800) 437-6448 or info@univhealthplans.com

Plan Benefits	Current Heath Insurance Plan	Wellesley College Student Health Insurance Plan
Plan Type	<ul> <li>☐ HMO</li> <li>☐ EPO</li> <li>☐ PPO</li> <li>☐ Out-of-State Medicaid</li> <li>☐ Other</li> </ul>	<ul> <li>☐ HMO</li> <li>☐ EPO</li> <li>☑ PPO</li> <li>☐ Out-of-State Medicaid</li> <li>☐ Other</li> </ul>
Provider Network  Does my plan provide coverage throughout the US for emergency and non-emergency care, or is my plan limited to my home state?		National
Travel Assistance, Medical Evacuation and Repatriation Coverage		Yes
Policy Maximum		Unlimited
Annual Deductible (In-Network / Out-of-Network) Amount you pay out of pocket before your health plan contributes towards claims		\$0 / \$250
Out of Pocket Maximum  Maximum dollar amount you pay out of pocket, including deductible, copays and coinsurance until your insurance company pays claims at 100%		\$4,000
Inpatient Hospitalization		Covered In Full
Preventive/Routine Care Physical, annual exams, immunizations, etc.		Covered In Full
Office Visits Primary Care Physician(PCP)		\$15 Copay
Mental/Behavioral Health Therapy (individual or group)		\$15 Copay
Specialists (Such as Physical Therapy, Dermatologists, OB/GYN)		\$15 Copay
Urgent Care		\$15 Copay
Emergency Room		\$50 Copay
Ambulance		Covered In Full
X-Ray & Laboratory		Covered In Full
High Cost Imaging (CT Scan, MRI, PET Scan)		\$50 Copay
Prescription Medications Tier 1 / Tier 2 / Tier 3		\$20 / \$35 / \$55