

UNIVERSITY OF CALIFORNIA, IRVINE

2017 – 2018 UNDERGRADUATE STUDENT HEALTH INSURANCE PLAN (USHIP)

Plan Snapshot

Welcome to the 2017 – 2018 Undergraduate Student Health Insurance Plan (USHIP). Below are brief highlights of plan benefits, as well as important dates and costs of coverage. Note that this plan is rated a PLATINUM level plan, as per the Affordable Care Act.

For more information, please consult the plan brochure. If you have questions about medical benefits or claims, please see contact information on the back. For dental and vision plan information or dependent rates and enrollment deadlines, please visit the UCI Student Health Center website at www.shc.uci.edu.

Fees and Important Dates

Fees include medical, behavioral health, dental and vision insurance premiums as well as administrative fees.

	Fall 09/25/17 to 01/02/18	Winter 1/3/18 to 3/27/18	Spring/Summer 3/28/18 to 9/23/18
Waiver Start/ Deadline	6/26/17 - 9/8/17	11/06/17 - 12/8/17	2/05/18 - 3/9/18
Student USHIP Fee	\$593.00	\$593.00	\$592.00

Insurance ID Card

Download your insurance ID using Anthem's mobile app or visit www.anthem.com/ca. Please note that a physical ID card will not be mailed to you. From your mobile device or tablet go to the App Store or Google Play and search for the **StudentHealth app**. Instructions for registering on the student health mobile app are available at www.anthem.com/ca or www.shc.uci.edu.

Referral Requirement

A Student Health Center (SHC) referral is required for non-emergency care within a 50-mile radius from campus, unless the SHC is closed or for certain preventive care. **If you do not obtain a referral, no benefits will be paid including covered benefits.** See brochure for further details.

What's Covered

- Preventive / Wellness services
- Doctor visits and urgent care
- Emergency expenses
- Surgery, inpatient and outpatient
- Physical therapy, chiropractic and acupuncture
- Tests, procedures, X-rays, and laboratory services
- Pregnancy and maternity
- Prescription drugs

Limitations, copays, coinsurance and deductibles may apply. Please see the plan brochure for benefit details.

Additional Plan Information

Please note the following levels for coinsurance, copays, deductibles and other costs of this coverage.

	Covered Person Pays Student Health Center	Covered Person Pays Anthem In-Network PPO	Covered Person Pays Non-PPO
Deductible	Waived	\$200 per policy year	\$300 per policy year
Coinsurance	10% for labs and X-rays 0% for all other services	10% in-network, after deductible	40% in-network, after deductible
Office Visit Copay	Deductible waived, \$0 for preventive service / \$15 for primary care / \$30 for specialist visit / \$10 for chiropractic visit (SHC)		Deductible applies, no copay
Emergency Room Copay	n/a	\$100 per visit (waived only if admitted to hospital)	
Prescription Drug Copays	\$5 generic / \$35 preferred brand / \$50 non-preferred brand (PPO only)		
Out-of-pocket Maximum	n/a	\$1,600 per person per policy year	\$6,000 per person per policy year

Contact Information – Anthem Blue Cross

Insurance Company	Anthem Blue Cross
Customer Service & Benefit Questions <i>For questions regarding eligibility, benefits, locate a provider or to check claims status</i>	(844) 437-0493 www.anthem.com/ca
Claims Submission <i>For submitting claims by mail, complete a claim form or make a copy of your insurance ID card and the bill(s) and send to:</i>	Anthem Blue Cross P.O. Box 60007 Los Angeles CA 90067-0007
Pre-Certification for Hospitalization <i>Pre-Certification is required for all inpatient hospitalization. Prior to scheduled hospitalization, or after an emergency admission</i>	800-274-7767
Prescription Drugs <i>To locate a network pharmacy other than SHC Pharmacy and to manage your medications (including refills and home delivery)</i>	800-700-2541
Travel Assistance Services <i>When you are traveling away from home and you need assistance with things such as transfer of medical records, legal referrals, transfer of funds, and information on travel conditions</i>	Blue Card World Wide 800-810-2583(BLUE)
After-hours Nurse Line <i>If quick, sound medical advice is necessary when the UCI Student Health Center is closed, simply call Anthem's 24/7 Nurseline</i>	800-977-0027

Contact Information – UCI Student Health Center

Appointments – Medical Clinics/Psychiatry Service	949-824-5304
Appointments – Dental Clinic	949-824-5307
General Information	949-824-5301
Pharmacy	949-824-5923
Insurance Services	949-824-2388 Fax: 949-824-5062 shc-insurance@uci.edu
Patient Billing Inquiries	949-824-7084 Fax: 949-824-5062 shc-billing@uci.edu
Medical Records	949-824-5302 Fax: 949-824-3033 shc-medical-records@uci.edu

The rates quoted for these benefits may be subject to change based on final enrollment and/or final underwriting requirements. This material is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of the plan or program benefits and does not constitute a contract. Consult your plan documents (Schedule of Benefits, Certificate of Coverage, Group Agreement, Group Insurance Certificate, Booklet, Booklet-certificate, Group Policy) to determine governing contractual provisions, including procedures, exclusions and limitations relating to your plan. All the terms and conditions of your plan or program are subject to applicable laws, regulations and policies. In case of a conflict between your plan document and this information, the plan documents will always govern.