How to Use UM’s International Insurance Plan

Aetna Student Health until 08/31/2019
Blue Care Network effective 09/01/2019
Who is REQUIRED to have insurance?

▶ F–1 and J–1 students and scholars sponsored by the University of Michigan.

▶ The F–2 and J–2 dependents of U–M sponsored students and scholars.

▶ Entire time as U–M F1/J1 student/scholar or F2/J2 dependent.

▶ INCLUDES TIME NOT ENROLLED IN CLASSES

U–M sponsored means U–M issued I–20 or DS–2019
Why you MUST have insurance

- University of Michigan and federal government requirement.
- Health care in the US is very expensive.
- Insurance is for what MIGHT happen, NOT your current situation.
How to enroll
Health Care & Insurance

ALL new U–M F–1/J–1 students and scholars (U–M sponsored) are **automatically** enrolled in the UM International Health Insurance.

Your insurance begins on your I–20 or DS–2019 start date.

Your insurance will continue until your I–20 or DS–2019 end date. If that end date changes, your insurance end date will also change.

Your insurance end date will also change if you request Optional Practical Training (OPT) or Academic Training (J–1) work authorization after graduation.
Health Care & Insurance

How your plan works
Choosing your doctor

- Enrolled students will save money by going to University Health Service (UHS) if possible.
- Much of your treatment is covered by your health service fee (part of your tuition).
- No deductible and no co-pay at UHS in most cases.
  - See Free or Fees for Students for more information [http://www.uhs.umich.edu/feestudents](http://www.uhs.umich.edu/feestudents)
Choosing your doctor

► Choose where to receive your care:
  - **In-network** – preferred Network provider
  - **Out-of-network** – non-preferred provider

► If you cannot go to UHS, save money by receiving your health care IN NETWORK

► Your in-network provider will provide care and:
  ◦ Get approval from the insurance company before giving you certain services
  ◦ File claims for you
  ◦ To find a provider in the network, use Aetna’s online directory at: [http://www.aetnastudenthealth.com/umich](http://www.aetnastudenthealth.com/umich) or call **800–239–9697**

► No referrals needed
Choosing your doctor

University Health Service (UHS) is in network

**UHS (University Health Service)**
207 Fletcher Street, Ann Arbor 48109
Call for appointment: 734–764–8320
[www.uhs.umich.edu](http://www.uhs.umich.edu)
*Students/Scholars, Spouses, children age 10 or above can visit UHS*

**Also in network:**

**Packard Health**
3174 Packard Road, Ann Arbor 48108
Call for appointment: 734–971–1073
[www.packardhealth.org](http://www.packardhealth.org)
*All ages*

**Packard Health West**
501 North Maple Road, Ann Arbor 48103
Call for appointment: 734–926–4900
*All ages*

**University of Michigan Medical Center**
1500 E. Medical Center Drive
Ann Arbor, MI 48109
[www.uofmhealth.org](http://www.uofmhealth.org)
Choosing your doctor

Out of Network

You can visit any licensed provider; however, you may be responsible to:

- Get approval from insurance company before receiving certain services
- File your own claims
- Pay the difference between the amount paid by your Plan and the amount charged by your provider.
- This option typically costs you more...$$
1. **UHS** (in-network plus)

2. In-network doctor

3. Out-of-network doctor
Description of Benefits

### Annual Deductible

Amount you must pay each policy year (Sept 1–Aug 31) before insurance starts to cover costs

**Individual**
- Students: $100 per policy year
- Spouse: $100 per policy year
- Child: $100 per policy year

**Family**
- Family: $200 per policy year

The annual deductible does not apply to some services. For example:
- Immunizations
- Emergency Room
- Routine physical exam
- Prescription drugs
- Vision exam

### Coinsurance %

The % that you pay and the insurance company pays after you have paid the annual deductible. (See plan brochure)

Insurance pays mostly:
- 90% of Negotiated Charge (INN)
- 80% of Recognized Charge (ONN)

### Co–pay

What you pay, then insurance covers the rest

- Office visit: $20
- Walk–in Clinic or Urgent Care Clinic: $20
- Emergency Room: $75 (waived if admitted)
- Hospital Room/Board/Misc Expenses: $150 per hospital admission
- For most other in–network medical services insurance pays 90%
## Description of Benefits

### Out of Pocket Maximums
- Combined Out-of-Pocket
- Individual Out-of-Pocket: $3,500
- Family Out-of-Pocket: $7,000
- Once the out-of-pocket limit has been met, covered medical expenses will be payable at 100% for the remainder of the policy year.

### Policy Year Maximum
- Unlimited
- This limit explains the amount of money Aetna would pay towards medical care within a policy year, since it is unlimited there is no cap on the insurance coverage you would receive.
How You and Your Insurance Company Share Costs

Deductible $100  ●  Coinsurance 10%  ●  Out-of-Pocket Maximum $3,500

<table>
<thead>
<tr>
<th></th>
<th>Sept. 1</th>
<th>Aug. 31</th>
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<tbody>
<tr>
<td><strong>First Office Visit Costs $120</strong></td>
<td>You Pay 100%  Plan Pays 0%</td>
<td>You Pay 10%  Plan Pays 90%</td>
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<tr>
<td>You have not yet met your $100 deductible. Office visits have a</td>
<td>After your $20 copay the plan pays 90%. Plan pays $252 and you pay $48.</td>
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</tr>
<tr>
<td>$20 copay. So you pay $120 and the plan pays $0.</td>
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| **Mid-Year Office Visit Costs $300**                             | You Pay 10%  Plan Pays 90%                                             | You Pay 0%  Plan Pays 100%                                           |
| By now, you have met your deductible, and coinsurance begins.   | After your $20 copay the plan pays 90%. Plan pays $252 and you pay $48. |                                                                        |
| After your $20 copay the plan pays 90%. Plan pays $252 and you |                                                                        |                                                                        |
| pay $48.                                                         |                                                                        |                                                                        |

| **End-of-Year Office Visit Costs $250**                           | You Pay 0%  Plan Pays 100%                                           |                                                                        |
| After many visits, you have paid $3,500 and met your out-of-     |                                                                        |                                                                        |
| pocket limit. The plan now pays $250 and you pay $0.             |                                                                        |                                                                        |
New Company: Blue Care Network

- Effective 09/01/2019 UM International Health Insurance is switching insurance companies to Blue Care Network (BCN).

- Most coverage remains the same.

- Blue Care Network is a PCP (Primary Care Provider) based plan.

- Most services still do not require referrals, but visiting PCP over other doctors could save you money.
UHS is automatically assigned as your PCP but that can be changed via phone or online at any time.

Look for an email soon with further information regarding your new BCN insurance plan.

You will receive a new BCN insurance card in September.
Questions?

Email us at ihi@umich.edu

Call 734–764–9310

Visit the International Center
1500 Student Activities Building
1p.m. – 4p.m. – Advising hours

*Please note – Advising hours may change, please check website for up to date information
Workshop Evaluation

You will receive an email requesting an evaluation of this workshop.

Your feedback is valuable to us and will help us improve the experience of future participants. Thank you!