

# Insurance FAQ for International Students



## Vanderbilt University, 2007-2008 Student Injury and Sickness Insurance Plan

This information should be used in conjunction with the Student Injury and Sickness Plan brochure. If you need a copy of the Student Injury and Sickness Insurance Plan brochure, you may contact [Click here](#) to download a copy of the Graduate/Professional and International Student Insurance brochure or contact Koster Insurance Agency at 800-457-5599 or email [VUStudentInsurance@kosterins.com](mailto:VUStudentInsurance@kosterins.com). Brochures are also available at the Student Health Center.

### **How do I know if I am eligible to enroll in the Injury and Sickness Plan?**

Vanderbilt University and Federal regulations require international students and their dependents residing in the U.S. to maintain adequate insurance coverage. Consequently, all international students attending Vanderbilt University are automatically enrolled in the Student Injury and Sickness Plan. The deadline for international student to complete and submit an on-line waiver form is September 7, 2007 and January 15, 2008 for students who are newly enrolled for the spring term.

### **How do I Waive Coverage?**

If you are currently enrolled in a plan of comparable coverage (see questions below), you can submit an on-line waiver form. To submit an on-line waiver form, go to [www.kosterweb.com](http://www.kosterweb.com), click on Student Access, select Vanderbilt University and click on Student Enroll/Waive Forms. There are currently four forms available on-line. Select the appropriate form:

1. 2007-2008 Annual Waiver Form (for undergraduate and graduate/professional students)
2. 2007-2008 International Student Waiver Form
3. 2007-2008 May/Summer Waiver Form (for students newly enrolled at Vanderbilt University for the May/Summer Semester). Students who complete this form and continue at Vanderbilt in the fall, will have to also complete the 2007-2008 Annual Waiver Form.
4. 2007-2008 Meningococcal Meningitis and Hepatitis B Immunization Form (required for all new incoming students)

### **How do I know if my current coverage is comparable coverage?**

In order to waive coverage, your current insurance plan must:

1. Be underwritten by an insurance company based in the United States (no international insurance companies are acceptable)
2. Use a claims company in the United States.
3. Provide access to local doctors, specialists, hospitals and other health care providers in the Vanderbilt University area.
4. Cover accident and sickness at a minimum of 80% up to \$100,000 per accident and sickness (\$50,000 for Dependents).
5. Not have deductibles greater than \$100 per policy year or \$300 per policy year if covering eligible Dependents.
6. Cover inpatient and outpatient hospital expenses, outpatient surgical expenses, inpatient and outpatient mental health, prescription drugs, laboratory tests and x-rays, physical therapy, maternity, home health care.
7. Provide coverage for Medical Evacuation and Repatriation of Remains.
8. Must provide coverage for the period of August 12, 2007 to August 11, 2008.

You will need to answer a series of questions about your comparable coverage on the online waiver form. Answering "yes" to these questions is confirmation that your U. S. based insurance company provides

comparable coverage. You will be held responsible for your answers. If it is determined that your current plan is not comparable, you will be immediately enrolled the Student Injury and Sickness Plan effective the date that this is determined and there will no pro-rata of premium.

### **I am a returning student, what changes have been made for the 2007-2008 Policy Year?**

There have been several plan enhancements for the upcoming policy year:

1. Prescription drugs, including birth control drugs, will be covered at 100% up to \$1,000 per policy year, after a \$10 copay/generic or \$25 copay/brand name drugs.
2. The pharmacy program has been further enhanced by introducing the Medco By Mail service program to allow students to obtain a 90-day supply of a maintenance drug (see pharmacy question below for more details).
3. The 3-visit deductible for outpatient mental health visits has been eliminated
4. The Ambulance benefit has been increased from \$150 to \$400 per condition
5. My Nurse Line, a 24-Hour nurse advice service, further enhances your benefits.

### **How does the Injury and Sickness Plan work?**

The Student Injury and Sickness Insurance Plan is offered through the University to provide basic medical coverage to eligible students who are sick or injured. The plan covers injury and sickness expense including hospital room and board, emergency outpatient care, lab and x-rays, inpatient and outpatient surgical procedures, physician's office visits, mental health services and outpatient prescription drugs. Coverage is subject to the limitations and provisions of the policy. Please refer to the brochure for exclusions and limitations.

### **Do I have to get a referral before going to a health provider outside of the Student Health Service?**

A Student's health care needs can best be met through the organized system of health care that the health care professionals of the Vanderbilt University Student Health Center provide. Insured students are required to use the Vanderbilt University Student Health Service first to receive benefits available under the Student Health Insurance Plan. Before seeking treatment, students must first visit the Student Health Center and receive a referral from the Student Health Center in order to have treatment covered under the Student Health Insurance Plan. A written referral must be obtained at the beginning of each academic year. A written referral does not guarantee that the services will be covered by the Student Injury and Sickness Insurance Plan; benefit will be paid according to plan provisions.

### **May I go to any health care provider?**

You may, but there is a financial benefit to receiving care through an In-Network or Preferred Provider. When students see a Preferred Provider, the insurance will generally cover 80%-90% of a Preferred Allowance for covered expenses and these providers have agreed to accept the prearranged fee (Preferred Allowance) as payment of their services. Services rendered by an Out-of-Network Provider are generally covered at 65% of Reasonable and Customary charges and an Out-of-Network provider has not agreed to any prearranged fee schedule, and any charges in excess of the insurance payment will be your responsibility. You should be aware that preferred hospitals might be staffed with non-preferred providers. Receiving services or care from a provider associated with a preferred hospital does not guarantee that all charges will be paid at the preferred allowance. You should always confirm that a Preferred Provider is participating by asking the provider when you make an appointment for services.

### **How do I find a Preferred Provider?**

A Preferred Provider is a provider that is part of the Signature Health Alliance (in Tennessee) or Beech Street Preferred Provider Network (outside of Tennessee). The easiest and most efficient way to check if a provider or facility is part of the Signature Health Alliance is to call 1-800-264-3060 or contact [www.signaturehealth.com](http://www.signaturehealth.com) or the Beech Street Network is to call 1-800-432-1776 or contact Beech Street on-line at [www.BeechStreet.com](http://www.BeechStreet.com).

### **Is there a deductible?**

Yes, there is a \$100 deductible per policy year for any service not provided on-site by the Student Health Center. However, you can be seen free of charge by providers at the Student Health Center, although you may be responsible for lab or medication fees. Insured students are required to use the Vanderbilt University Student Health Center first to receive referral benefits available under the Student Health Insurance Plan.

### **Where and when will ID Cards be distributed?**

If you purchased the Student Injury and Sickness Insurance you will receive an insurance ID card at the address you have on file at the University. Please carry the ID card at all times and you must present it whenever receiving medical care or filling a prescription. If you need to see a doctor before you receive your ID card, tell the provider that you are covered under the Vanderbilt University student insurance plan. Your provider can always call Koster Insurance to verify eligibility at 800-457-5599.

### **Am I covered for a Pre-Existing Condition?**

A "Pre-existing Condition" is a sickness, injury or related condition for which you have received medical treatment or advice, or which was diagnosed by a doctor in the twelve (12) months preceding the effective date of coverage in the Vanderbilt student insurance plan. Expenses incurred as a result of a pre-existing condition are payable but are limited to a maximum of \$2,500 per injury or sickness per policy year. After you have been continuously insured for twelve months under the Vanderbilt University student insurance plan, the pre-existing condition limitation does not apply.

### **What if I leave Vanderbilt University, will I get a refund?**

Once a student attends classes for 31 days, your coverage will be in effect for the full period for which premiums were paid. So, if you leave Vanderbilt after 31 days, you will not be given a refund. This is true for students on leave for medical or academic reasons, graduating students or students electing to enroll in a separate comparable plan during the policy year.

International students who are graduating in December or May and returning to their country of regular domicile, may request a prorated return of premium by contacting the On-Campus Student Insurance Representative. The request must be made within 31 days of the departure date and documentation must be provided proving the student's departure. Insured students who also have coverage for eligible dependents, may request a refund of premium for their covered dependents only if coverage was purchased on an annual basis. Students who are paying for dependent coverage on an installment basis are not eligible for a refund of dependent premium.

Coverage for an insured student entering the armed forces of any country will terminate as of the date of such entry. Those insured students withdrawing from the school to enter military service would be entitled to a pro-rata refund of premium upon written request.

### **Does this plan cover me when I am off-campus during semester breaks or summer vacation?**

Yes, the Student Injury and Sickness Plan provides coverage from August 12, 2007 to August 11, 2008. You will be covered for eligible expenses whether you're on-campus or traveling worldwide. Outside of the United States benefits will be paid on an Out-of-Network basis.

### **Does the Student Injury and Sickness Plan cover me if I decide to study abroad?**

Yes, the Student Injury and Sickness Plan provides worldwide coverage, whether studying abroad or traveling abroad. The plan provides the same benefits as if you were at Vanderbilt University and will be paid as an Out-of-Network provider, plus coverage for Medical Evacuation and Repatriation of Remains and travel assistance services.

## **What is Global Emergency Medical Assistance?**

Through participation in the Vanderbilt University Insurance Plan, each insured student is eligible for the travel assistance services provided by Scholastic Emergency Services (SES) (formerly called Assist America). Services must be approved in advanced by SES. Within the United States, call toll free 877-488-9833, or outside of the United States call collect 609-452-8570. Services are also accessible via email, [medservices@assistamerica.com](mailto:medservices@assistamerica.com).

## **Can I purchase additional coverage above the Student Injury and Sickness Plan?**

Insured students are also eligible to purchase the Optional Major Medical Benefits Plan to increase the aggregate maximum benefit of \$100,000 available under the Student Health Insurance Plan to a combined maximum of \$500,000 for insured students or \$100,000 per insured dependent. The Optional Major Medical Plan must be purchased by August 20, 2007 for the annual policy or January 1, 2008 for the spring semester.

## **Does the Student Injury and Sickness Plan cover a routine eye exam or the cost of eyewear?**

No, the Student Injury and Sickness Insurance Plan does not cover these vision services. However, you are automatically enrolled in the vision discount plan EyeMed, The Eye Care Plan of America. EyeMed's provider network consists of over 45,000 independent providers and retail stores nationwide, including LensCrafters, Target, Pearle Vision, Sears Optical, and JC Penny Optical. You will receive a separate EyeMed ID card. There is no waiting period; you can take advantage of the savings through EyeMed immediately upon receipt of your EyeMed ID card. You can purchase prescription eyeglasses, conventional contact lenses or even non-prescription sunglasses at savings between 15% to 45% off regular retail pricing. In addition, you can receive discounts from 5% to 15% off laser correction surgery at some of the nation's most highly qualified laser correction surgeons. To locate a participating provider, you can call 1-866-8EYEMED or go on-line at [www.enrollwiththeyemed.com](http://www.enrollwiththeyemed.com) (Access Plan). This plan is not underwritten by The Mega Life and Health Insurance Company.

## **Do I have dental coverage?**

The insurance plan covers accidental injury to sound, natural teeth only. However, you are automatically enrolled in a dental savings program. The program is operated by Basix, LLC to provide students access to general and specialty dental care from a select network of local dentists. Students will be responsible for paying for services they receive at the time of the visit. Students will generally save from 20% to 50% of charges for a wide range of dental services – from routine cleanings to root canals. Students can log onto the website, [www.basixstudent.com](http://www.basixstudent.com) to locate participating dental providers, download the fee schedule and learn more about the Program. This plan is not underwritten by The Mega Life and Health Insurance Company.

## **How are Prescription Drugs Covered?**

The Prescription Drug Program is available through the Medco Pharmacy Network. After a \$10.00 Copayment for a generic drug or \$25.00 Copayment for a brand name drug per 30 day supply, the expenses incurred for the cost of prescription drugs will be reimbursed at 100%, up to a \$1,000.00 maximum per policy year. Prescriptions must be filled at a Medco Participating Pharmacy. You will receive an ID card with the Medco pharmacy logo and this must be shown to the pharmacy as proof of coverage. If a prescription needs to be filled prior to receiving an ID card, reimbursement will be made upon a completed and submitted prescription drug claim form. Not all medications are covered.

New for 2007-08 is the option to fill a 90-day supply of a maintenance drug through Medco's mail service program, Medco by Mail. Through this program, a 90-day supply of a generic maintenance drug can be filled with a \$20 copayment or a \$50 copayment for a 90-day supply of a brand name drug. You will need to complete a Medco By Mail Order Form and include that and your doctor's signed prescription form and mail directly to Medco. A brochure describing the Mail Service Program, "Medco By Mail" Order Forms and accompanying mailing envelope are available at the Student Health Center or by contacting Koster Insurance Agency. Once you submit a Medco By Mail Order Form, subsequent refills can be filled online through

[www.medco.com](http://www.medco.com). You can also check to see which prescriptions have been filled, how much a prescription will cost or how much of your pharmacy benefit you have used by logging into Medco's website.

Expenses incurred for the following are excluded under the Medco Plan: contraceptives; fertility medications; legend vitamins or food supplements; smoking deterrents; immunization agents and vaccines; biological sera; blood plasma; drugs to promote or stimulate hair growth; experimental drugs; diabetic supplies; and drugs dispensed at a hospital or rest home. To locate a participating pharmacy, call 800-711-0917 or visit [www.medco.com](http://www.medco.com).

The plan only covers drugs which are approved for the treatment of the Insured Person's Injury or Sickness by the Food and Drug Administration. The plan will also cover a drug prescribed for a treatment for which it has not been approved by the Food and Drug Administration if the drug is recognized as being medically appropriate for the specific treatment for which the drug has been prescribed in one of the following established reference compendia: (a) the American Medical Association Drug Evaluations; (b) the American Hospital Formulary Service Drug Information; (c) the United States Pharmacopoeia Drug Information; or (d) it is recommended by a clinical study or review article in a major peer-reviewed professional journal. However, Covered Medical Expenses do not include experimental or investigational drugs or any drug, which the Food and Drug Administration has determined to be contraindicated for the specific treatment for which the drug has been prescribed.

### **When I receive services, how and where do I submit my bill?**

You do not need a claim form to submit a bill. Physicians can bill the claims administrator, Klais and Company, Inc. directly. If you receive a bill, you can also forward it to Klais and Company, Inc. at the address below. Make sure your name, ID number, address and the University's name are on the bill. All provider bills must be sent to:

Klais and Company, Inc.  
1867 West Market Street  
Akron, OH 44313  
Email: [klaisclaims@klais.com](mailto:klaisclaims@klais.com)  
1-800-331-1096

You can also check the status of any claim online by registering for StatusLink at [www.klais.com](http://www.klais.com).

### **Who do I call if I have questions about enrollment, eligibility, coverage or other service issues?**

Koster Insurance Agency, Inc.  
500 Victory Road  
Quincy, MA 02171  
1-800-457-5599  
Email: [VUStudentInsurance@kosterins.com](mailto:VUStudentInsurance@kosterins.com)

*OR*

On-Campus Student Insurance Program Coordinator  
Student Health Center, Ground or 3rd floor  
1-615-343-4688

### **Who do I call if I have questions about a specific claim or claims payment?**

Klais and Company, Inc.  
1867 West Market Street  
Akron, OH 44313  
1-800-331-1096  
Email: [klaisclaims@klais.com](mailto:klaisclaims@klais.com)

Or register for StatusLink, an on-line claims look-up available at [www.klais.com](http://www.klais.com)

**Who do I call if I have questions about Preferred Providers?**

Signature Health Alliance (for providers in Tennessee)

1-800-264-3060 or [www.signaturehealth.com](http://www.signaturehealth.com)

Beech Street Preferred Provider Network (for providers outside of Tennessee)

1-800-432-1776 or [www.BeechStreet.com](http://www.BeechStreet.com)

**Who do I call for information on participating Medco pharmacies?**

Medco

1-800-711-0917 or [www.medco.com](http://www.medco.com)

**Who do I call for information on the EyeMed Vision Program?**

EyeMed

[www.enrollwitheyemed.com](http://www.enrollwitheyemed.com)

1-866-8EYEMED

**Who do I call for information on the Dental Savings Plan?**

Basix, LLC

[www.basixstudent.com](http://www.basixstudent.com)

1- 801-274-7800

**For information on Scholastic Emergency Services (SES) (formerly called Assist America) Travel Assistance Services, please contact:**

1-877-488-9833 (toll free within the United States)

1-609-452-8570 (collect, outside the United States)

**This policy is underwritten by The Mega Life and Health Insurance Company**

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