

## 2021-22 STUDENT HEALTH INSURANCE PLAN Who is eligible?

The student health insurance plan is automatic for all 2nd-4th year students enrolled in College of Medicine and College of Pharmacy programs. If a student has coverage that meets the waiver criteria listed below, they can waive out of the student health insurance program. Criteria For Waiving Out of Student Health Insurance Program:

- Alternate insurance plan must be active for the entire academic year
- Alternate insurance plan must cover inpatient and outpatient medical care, mental health care, routine, urgent and emergency care within 100 miles of NEOMED
- If alternate coverage is a Medicaid plan, this plan must only be provided by the Ohio Department of Medicaid.
   Out of state Medicaid's will not be accepted
- Alternate insurance plan must cover the cost of any examinations, testings, screenings, preventive and therapeutic treatment required as a direct result of educational exposure to blood-borne pathogens

College of Graduate Studies may voluntarily enroll in the student health insurance program.

Online waivers and/or enrollments can be submitted by visiting <a href="https://www.haylor.com/northeast">www.haylor.com/northeast</a>

Online waivers must be processed between:

March 10,2021 and May 10, 2021

Rates pending state of Ohio approval

2nd-4th Year Students

Annual: July 1, 2021-June 30, 2022 \$2,648 Fall: July 1, 2021-December 31, 2021 \$1,335 Spring: January 1, 2022-June 30, 2022 \$1,312

## NORTHEAST OHIO MEDICAL UNIVERSITY PLAN HIGHLIGHTS



## **Northeast Ohio**

MEDICAL UNIVERSITY

## What does the plan feature?

- Affordable, comprehensive insurance benefits
- This plan is ACA compliant (Affordable Care Act)
- Access to a nationwide network of health care professionals, including primary care, specialists and mental health services
- Low prescription costs
- Locate a Doctor: <u>www.wellfleetstudent.com</u>
- Plan runs July 1, 2021-June 30, 2022

**Dependent coverage** is also available to all eligible students that enroll in the student health insurance plan.

**Dental & Vision** is also available to all students. This voluntary enrollment is not billed, monitored, tracked, or enrolled by NEOMED. You can voluntarily enroll by visiting the websites below:

**Dental:** <u>mydental.guardianlife.com</u> **Vision:** https://wellfleetstudent.com/davis-vision/

> For more details regarding the Northeast Ohio Medical University student insurance program please visit:

www.haylor.com/northeast 866-535-0456 student@haylor.com



For further details of the coverage including costs, benefits, exclusions, any reductions or limitations and the terms under which the policy may be continued in-force, please refer to the Certificate, available at:



	In Network	Out of Network
Deductible- Individual	\$500	\$1,000
Out-of-Pocket Maximum- Individual	\$5,000	\$8,000
Office Visits- Primary Care, Physician's visits & Specialists	\$25 copayment then 80% coinsurance of the negotiated charge for covered medical expenses	\$25 copayment then 60% coinsurance of the negotiated charge for covered medical expenses
Preventive Care Services (No deductible, copays or coinsurance will be applied when the services are received from a preferred provider)	Covered in full	60% coinsurance of the negotiated charge for covered medical expenses
Hospital Room & Board (Inpatient)	80% of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Emergency Services	\$125 copayment then the plan pays 80% of the negotiated charge for covered medical expenses. Copay waived if admitted	Paid the same as In-Network provided subject to usual and customary charge
Urgent Care Center	\$35 copayment and 80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Ambulance Services	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Surgery	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Anesthetist Services	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Mental Illness Treatment & Substance Use Disorder Treatment	Same as any Sickness	Same as any Sickness
Laboratory Procedures & Diagnostic X- ray Services (for preferred provider services only: one \$25 per visit copay is due if X-ray and Laboratory services are rendered)	\$25 copayment then 80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Physiotherapy, Chemotherapy & Radiation Therapy	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Injections	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
Diabetic Services	Based on setting where service is performed	Based on setting where service is performed
Telemedicine or Telehealth Service	\$25 copayment per visit then the plan pays 80% of the negotiated charge for the covered expense	\$25 copayment per visit then the plan pays 60% of the negotiated charge for the covered expense
Prescription Drugs (30-day supply)	Tier 1- \$15 copayment, Tier 2- \$30 copayment, Tier 3- \$45 copayment	Tier 1- \$15 copayment, Tier 2- \$30 copayment, Tier 3- \$45 copayment then 60% of the negotiated charge for the covered expense