Anthem. 🐼 🕅 STUDENT ADVANTAGE



University of Missouri | Kansas City Student Health Insurance Plan (SHIP) Frequently Asked Questions



GETTING STARTED

Where can I learn about the Student Health Insurance Plan (SHIP)?

Go to your campus specific Anthem microsite at <u>https://student.anthem.com/welcome</u> > Select "Student" > Select your state > Select your campus

ABOUT MY BENEFITS

Commonly used insurance terms.

Premium: The cost you pay for the insurance.

<u>Deductible</u>: The amount you pay for covered health care services before your insurance plan starts to pay. Once the claims amount for the covered services equals your deductible amount your deductible has been met and you now will start paying only a copayment or coinsurance for covered services.

<u>Out of Pocket Maximum (OOPM)</u>: The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance for care and services, your health plan pays 100% of the costs of covered benefits. The out-of-pocket limit doesn't include your premiums.

<u>Co-payment/Coinsurance</u>: A copay is a set rate you pay for prescriptions, doctor visits, and other types of care. Coinsurance is the percentage of costs you pay after you've met your deductible.

<u>In-Network (INN)/Out-of-Network (OON) Provider/Facility:</u> INN providers and/or facilities are contracted with Anthem and as an Anthem member we negotiate fair costs for services on your behalf therefore INN providers/facilities are only allowed to charge specific amounts for services rendered lowering out of pocket cost. OON providers and/or facilities are not contracted with Anthem and can charge various fees for care at a much higher out of pocket cost than an INN provider or facility. ***It is recommended to always have services rendered at an INN provider/facility.*

On campus Health Services/Health Center.

There are various services you can have rendered on campus. Seeking care or advice first from your campus Health Services/Health Center is a good idea, since they can connect you with valuable on-campus services or refer you to INN providers they know off campus. For more information, visit your school's Health Services/Health Center website.

What do my medical benefits include?

Your SHIP is fully compliant with the Affordable Care Act (ACA) and all other federal and state mandates. The plan pays for a wide range of medical services, including hospital room and board, inpatient and outpatient surgical procedures, labs and x-rays, chemotherapy and radiation, inpatient and outpatient mental health services, physician office visits, consultant visits, ambulance, emergency care and prescription drugs.

The plan covers preventive care services at no cost when you use In-Network providers. This includes routine physicals and examinations, screenings, GYN examinations and most immunizations.

The plan pays for 80% of your medical fees when you use In-Network providers. This is the advantage to using In Network providers. When you use Out-of-Network providers the coinsurance is less which means your potential out-of-pocket costs are more. You will also be responsible for paying any deductibles and applicable office visit and prescription drug copayments.

- The plan has a \$400 per insured policy year deductible (INN) and \$800 per insured policy year deductible (OON).
- The plan has a \$7,500 per insured/\$15,000 family policy year out-of-pocket limit (INN) and an unlimited policy year out-of-pocket limit (OON).
- \$20 copayment plus 20% coinsurance (INN) and 50% coinsurance (OON) after deductible is met for primary care office visits; the office visit copayment doesn't apply to outpatient mental health service
- 20% coinsurance (INN) and 50% coinsurance (OON) after deductible is met for Urgent Care services
- \$200 copay plus 20% coinsurance after deductible is met for Emergency Room services.
 *It is highly recommended in non-life threatening instances you seek assistance at the Health Services or Health Center prior to going to an emergency room.
- Prescription drugs are covered for a 30-day supply after a:
 - \circ \$15 copay (retail) / \$30 copay (home delivery) for a Tier-1 drug
 - \$40 copay (retail) / \$80 copay (home delivery) for a Tier 2 drug
 - \$65 copay (retail) / \$130 copay (home delivery) for a Tier 3 drug
 - \$100 copay (retail) / \$100 copay (home delivery) for a Tier 4 drug

Note: in some cases, prescription drugs may have a supply or quantity limit or require your doctor to get a Prior Authorization before you can pick-up your prescription.

You can see review an in-depth view of your medical benefits and your plans' pharmacy list or formulary by visiting your campus specific Anthem microsite at <u>https://student.anthem.com/welcome</u>. You can also login to anthem.com or download the Sydney Health app.

What do my dental benefits include?

As with the medical plan it is suggested to see an INN provider as an OON provider can offer services at a much higher rate.

Benefit Information	In Network	Out of Network
Annual deductible (Deductible waived for diagnostic and preventive services)	\$50	\$50
Diagnostic and preventive services (Routine cleanings, X-rays, oral exam)	Plan pays 100%	Plan pays 100% of the max allowed by your plan
Basic restorative services (Consultation, amalgam fillings, space maintainers)	Plan pays 80% of cost, you pay 20%	Plan pays 80% of cost, you pay 20% of the max allowed by your plan
Major restorative services (Crowns, bridges, dentures, oral surgery, root canals)	Not covered	Not covered
Orthodontia (See plan for specifics)	Plan pays 80% of cost, you pay 20%	Plan pays 80% of cost, you pay 20% of the max allowed by your plan

You can see review an in-depth view of your dental benefits by visiting your campus specific Anthem microsite at <u>https://student.anthem.com/welcome</u>. You can also login to anthem.com or download the Sydney Health app.

What do my vision benefits include?

As with the medical plan it is suggested to see an INN provider as an OON provider can offer services at a much higher rate.

Benefit Information	In Network	Out of Network
Routine eye exam (Once every plan year)	\$20 copay	Up to \$42 reimbursement
Eyeglass frames (Once every two plan years)	\$100 allowance, then 20% off any balance	Up to \$45 reimbursement
Eyeglass lenses, single vision (Instead of contact lenses, once every plan year)	\$20 copay	Up to \$40 reimbursement
Contact lenses – conventional (Instead of eyeglass lenses, once every plan year)	\$100 allowance, then 15% off any balance	Up to \$95 reimbursement
Contact lenses – disposable (Instead of eyeglass lenses, once every plan year)	\$100 allowance	Up to \$95 reimbursement

How to find In-Network providers?

If you are a current Anthem member, please login to anthem.com or your Sydney Health app and search providers.

If you are not able to login using the member portals, please see below:

ALL LINES:

- Go to
- Select "Find Care" at the top of the page
- Select "Change State"
- Select "Missouri"
- Select "Guests"
- Dropdown, What type of care are you searching for? See below for steps.

DENTAL

- What type of care are you searching for? Select "Dental"
- What state do you want to search with? Select "Missouri"
- What type of plan do you want to search with? Select "Dental"
- Select a plan/network. Select "Dental Complete"

VISION

- What type of care are you searching for? Select "Vision"
- What state do you want to search with? Select "Missouri"
- What type of plan do you want to search with? Select "Vision"
- Select a plan/network. Select "Blue View Vision"

MEDICAL

• Go to: <u>https://www.anthem.com/find-care/?alphaprefix=102</u>

OR

- What type of care are you searching for? Select "Medical"
- What state do you want to search with? Select "Missouri"
- What type of plan do you want to search with? Select "Medical Networks"
- Select a plan/network. Select "Blue Preferred Network"

ABOUT MY BENEFITS

How do I obtain an ID Card?

Your digital ID card is available on anthem.com or the Sydney Health mobile app when you register with your student ID on your plan effective date. Print a copy of your card anytime or show it to your doctor from your smartphone. Your digital ID card is always available when you need it.

After your plan effective date, you can call and request a hard copy of your ID card if needed.

How do I obtain a tax form/proof of insurance coverage?

Tax forms will be mailed to the address on file at the beginning of each year, for the reporting year prior, and again in March/April.

How do I change my address?

If you are an international student, please contact your school to update your address. If you are a domestic student, please contact Anthem at 1-833-332-0798.