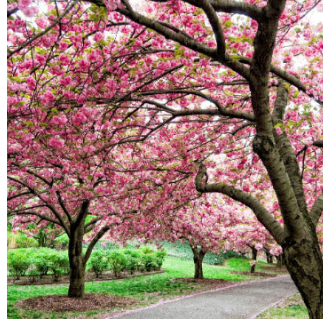




**WPI**



**Worcester Polytechnic Institute  
Insurance Plan  
Academic Year 2021-2022**

***Frequently Asked Questions***



# 2021-2022 Student Health Insurance Plan (SHIP)

## Frequently Asked Questions

*The following set of Frequently Asked Questions is presented in a format to facilitate the transfer of information about the student health insurance policy to students and parents.*

***Disclosure:*** This is only a brief description of coverage available under Certificate form HPHC COL-17-MA (PY21) CERT. The Certificate will contain full details of coverage, limitations, exclusions, and termination provisions. If there are any conflicts between this document and the Certificate, the Certificate governs in all cases.

*We have divided the FAQs in to three categories*

- A. Deciding Whether to Enroll in the WPI Student Health Insurance Plan or Waive Coverage**
- B. When and How to Enroll in or Waive Coverage under the WPI Student Health Insurance Plan**
- C. WPI Student Health Insurance Plan (SHIP) Benefits**

## SECTION A

### A. Deciding Whether to Enroll in the WPI Student Health Insurance Plan or Waive Coverage

*Each year, you must decide whether to enroll in the WPI Student Health Insurance Plan or waive coverage under that Plan if you already have comparable coverage. The following questions and answers may help you make that decision.*

#### 1. Do I have to enroll in or waive coverage under the WPI Student Health Insurance Plan (WPI SHIP) and what are the deadlines?

**Yes**, all registered full-time and part-time students are required to have health insurance coverage, either through the WPI SHIP or through another individual or family plan that is considered ***“comparable coverage”***.

All registered full-time and part-time students are required to complete the enrollment/waiver process for WPI’s SHIP annually. During this process, you may enroll in the WPI SHIP or waive the Plan, provided you have your own comparable coverage.

For full-time and part-time students attending WPI this fall, the deadline for enrollment or waiver request is ***September 1, 2021***. ***If you do not enroll or request a waiver by the deadline, you will be automatically enrolled in the Plan and will be responsible for the \$1,829 premium for coverage effective August 12, 2021 through August 11, 2022.*** For full-time and part-time students attending WPI as a new spring student, the deadline for enrollment or waiver request is ***January 30, 2022***. ***If you do not enroll or request a waiver by the deadline, you will be automatically enrolled in the Plan and will be responsible for the \$1,117 premium for coverage effective January 1, 2022 through August 11, 2022.***

## **2. Why does WPI require health insurance for all full-time and part-time students?**

As of January 1, 2009, the Massachusetts Health Care Reform Law requires that Massachusetts residents, eighteen (18) years of age and older, must have health coverage that meets the Minimum Creditable Coverage standards set by the Commonwealth Health Insurance Connector, unless waived from the health insurance requirement based on affordability or individual hardship. For more information call the Connector at 1-877=MA-ENROLL or visit the Connector website [www.mahealthconnector.org](http://www.mahealthconnector.org).

## **3. If I am a full-time or part-time international student, do I need to enroll in or waive coverage under the WPI Student Health Insurance Plan (SHIP)?**

**Yes**, if you are a full-time or part-time international student, you are required to complete the enrollment/waiver process. The vast majority of international students will need to enroll in the WPI SHIP. Only those international students who are covered by an embassy-sponsored health plan or other comparable coverage that meets the Minimum Creditable Coverage standards set by the Commonwealth Health Insurance Connector are able to waive coverage under the WPI SHIP. Travel coverage from your home country is not considered comparable coverage.

## **4. Can my parent complete the waiver or enrollment process for me?**

**No**, while It is a great idea to have your parent involved in helping you decide whether to enroll in the WPI SHIP, privacy laws require that you complete the waiver or enrollment process. There are instructions on how to complete the enrollment or waiver process in **FAQ B-12**.

If you are covered as a dependent on your parent's employer group medical insurance plan, you might have limited information about the medical insurance. With parental involvement, this can be a great learning opportunity and can be an important financial decision for the household, especially if you are the last dependent covered under your parent's employer group plan.

## **5. If I am waiving coverage under the WPI Student Health Insurance Plan, do I have to provide any other information about my comparable coverage?**

**Yes**, if you are waiving coverage, you will be required to provide additional information that is important to successfully complete the process. See **FAQ B-12**. Any additional information requests, other correspondence, and confirmation will be sent to your email address WPI has on file, which is usually your college email address.

## **6. What is comparable coverage?**

Comparable coverage is a medical plan from a company based in the United States that provides benefits without lifetime maximums or pre-existing condition limitations. Generally, comparable coverage complies with the Affordable Care Act (the ACA, also called Obamacare) and provides equivalent or richer benefits than those provided under the WPI SHIP.

Your comparable coverage must have participating (In-Network) health care providers who are located in the geographic area where you attend school and must cover a range of services.

An HMO plan from your home state may not have providers that provide non-emergency health care services while you are in Massachusetts and would not be considered comparable coverage. Other than a closed HMO Plan, most medical plans offered by employers based in the United States to employees and their dependents are considered comparable coverage. However, there are exceptions.

To be considered comparable coverage, the medical plan must cover:

- Ambulatory care (visits to doctors and other healthcare professionals, outpatient hospital care you get without being admitted);
- Emergency care;
- Hospitalization (such as surgery and overnight stays);
- Pregnancy, maternity, and newborn care (both before and after birth);
- Mental health and substance use disorder services, including behavioral health treatment (including counseling and psychotherapy);
- Prescription drugs (including brand-name drugs and specialty drugs);
- Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills);
- Laboratory services; and
- Preventive and wellness services and chronic disease management.

Additionally, the annual out-of-pocket limit cannot be more than \$8,550 for an individual or \$17,100 for a family.

## **7. What plans are not considered comparable coverage?**

There are many types of plans and coverages that are not considered comparable coverage. While many of these plans provide emergency coverage worldwide, they do not cover non-emergency care while you are outside of their service area. Below are examples of plan that are not considered comparable coverage:

- Travel insurance plans;
- Those health plans that only cover specific occurrences, such as accidents or certain sicknesses;
- Those that only provide emergency services (such as your home state's HMO's without providers in Massachusetts);
- Out-of-state Medicaid plans (an exception applies if you are studying remotely in your home state);
- International plans (includes travel coverage from your home country);
- Health care sharing plans (Examples: Zion Health, One Share Health, Christian Healthcare Ministries);
- Plans from insurance companies not located within the United States; and
- Prescription discount plans (this is not insurance).

**8. If I have comparable coverage under another medical plan, what should I consider in deciding whether to enroll in the WPI Student Health Insurance Plan?**

We strongly suggest that you compare your current medical coverage to the coverage provided by the WPI SHIP. Information that will help you compare your current plan and the WPI SHIP includes the Summary of Benefits and Coverage and/or the Schedule of Benefits for both plans. These documents list services covered and out-of-pocket-costs, such as any deductibles, copays, coinsurance, and your maximum out of pocket costs. You may find your current plan's out-of-pocket costs are higher than what you would pay if you were insured by the WPI SHIP. The WPI SHIP does not require you to meet an annual deductible before paying benefits – most employer-based health plans do have a deductible.

You also may want to consider the premium cost of your current coverage and the cost of the WPI SHIP, which is **\$1,829** for coverage from **August 12, 2021 through August 11, 2022**. Student Health Insurance Plans tend to be some of the lowest cost health plans available. It may be financially beneficial for you and your family if you enroll in the WPI SHIP.

You can also think about your expected health care needs. Considerations may include whether you regularly visit physicians or counselors, regularly fill prescriptions, or need other health care.

**9. What impact has the Affordable Care Act (otherwise known as the ACA or Obamacare) had on Student Health Insurance Plans?**

The ACA significantly changed Student Health Insurance Plans. While coverage for a comprehensive set of services was always available through SHIPs, there were usually dollar limits placed on the coverage. ***Since the ACA applies to your Student Health Insurance Plan, there are no lifetime or annual dollar maximums that apply and coverage is comprehensive with benefits for at least ten essential health services, with no exclusions for pre-existing conditions.*** Enrolling in the WPI Student Health Insurance Plan satisfies both federal and state requirements that you have health insurance.

**10. My home state's Health Insurance Marketplace provides individual health plans. Can they be used as comparable coverage to waive coverage under the WPI SHIP?**

**Yes**, if they cover you while you are at college. Each state's Health Insurance Marketplace provides access to ACA-compliant health insurance, so you may be able to use this insurance as comparable coverage and waive the WPI SHIP. **However**, if your Marketplace insurance plan is designed to be used in the state in which it was purchased (e.g., the healthcare network of providers does not extend to your location while you are at school and only emergency care would be covered), it **cannot** be used as comparable coverage entitling you to waive coverage under the WPI SHIP.

Even if your Marketplace insurance plan would entitle you to waive, the plan's out-of-pocket cost shares and premium costs may be higher than the those under the WPI SHIP. ***Please closely review all plan characteristics before you make your medical insurance decision.***

## SECTION B

### B. When and How to Enroll in or Waive Coverage under the WPI Student Health Insurance Plan

*Once you have decided to either enroll in or waive coverage under the WPI Student Health Insurance Plan, the following Questions and Answers describe when and how you enroll in or waive coverage and may help you complete that process.*

**Disclosure:** This is only a brief description of coverage available under Certificate form HPHC COL-17-MA (PY21) CERT . The Certificate will contain full details of coverage, limitations, exclusions, and termination provisions. If there are any conflicts between this document and the Certificate, the Certificate governs in all cases.

**11. If I enrolled in or waived coverage last year, do I have to do it again this year?**

**Yes**, you need to enroll in or waive coverage each year that you are eligible as a full-time or part-time WPI student.

**12. When and how do I enroll in or waive coverage this year?**

***If you are a fall 2021 full-time or part-time student, your enrollment or waiver deadline is: September 1, 2021***

***For new spring or transfer students, your enrollment or waiver deadline is: January 30, 2022***

You will be notified of your eligibility to enroll in or waive coverage under the WPI Student Health Insurance Plan (WPI SHIP) each year during the late spring or summer (or in December if you are a new spring or transfer student).

#### **To Enroll in the WPI SHIP**

***To enroll in the WPI SHIP***, the first step is to go to the below link:

<https://studentcenter.uhcsr.com/school-page>

You will need your Student ID and Date of birth to log-in. Then follow the prompts for enrollment.

If you have any issues with enrolling, please contact Customer Service at **1-800-767-0700**

Once complete, you will receive an immediate confirmation of your enrollment.

## To Waive Coverage under the WPI Student Health Insurance Plan

If you do not want to enroll in the WPI SHIP and you want to waive coverage, you need:

- Your student ID and Date of Birth and
- A copy of the front and back of your current health insurance identification (ID) card, and
- A copy of your Summary of Benefits and Coverage or Schedule of benefits.

You will need to complete:

- Your insurance member ID number,
- Subscriber name,
- Insurance company name, address, and phone number, and
- The coverage period dates of your plan.

You will need to answer:

- My Plan has comprehensive major medical coverage with an unlimited Maximum Benefit. **Yes or No**
- My plan is compliant with the Affordable Care Act. **Yes or No**
- My insurance carrier and plan is based in the United States? **Yes or No**
- My plan provides benefits for medical services provided in the Worcester, MA area. **Yes or No**
- My plan covers me for the entire academic year or through the completion of my academic program. **Yes or No**
- My plan provides coverage within 50 miles of campus. **Yes or No**
- My Plan includes benefits for Preventive Care, Primary Care, Emergency Services, Hospitalization, Ambulatory Services, Surgical Services, Mental Health Services and Prescriptions. **Yes or No**

## To Waive the WPI SHIP

**To waive coverage under the WPI SHIP**, the first step is to go to the below link:

<https://studentcenter.uhcsr.com/school-page>

You will need your student ID and date of birth to access the waiver form. Then follow the prompts for waiver.

If you have any issues with logging in, please contact Customer Service at **1-800-767-0700**

Once you have Logged In, you can proceed to the “Waive” function. You will be asked to enter your current insurance information and answer seven questions about your insurance plan. Once complete, you will receive an immediate response letting you know if your waiver request was approved or declined. If your waiver request is approved, the response will tell you that



and give you a confirmation number. If your waiver request was declined, the response will tell you the reason it was declined. If you think you answered a question incorrectly and you are entitled to waive the WPI SHIP or you have other questions about your waiver request, please contact Customer Service at **1-800-767-0700**

**13. If I enroll in the WPI SHIP, can I cancel my coverage later and get a refund?**

Once you are enrolled for the year, if it is after the enrollment/waiver deadline, you remain enrolled in the WPI SHIP until the last day of the coverage period - **August 11, 2022**. You have no option to terminate coverage, unless you enter the armed forces. In that case, we will refund a pro-rated share of the paid premium.

**14. If I change my mind and want to enroll instead of waive, or waive instead of enroll what do I do?**

If it is before the enrollment/waiver deadline, you can contact the WPI Bursar's office and let them know you want to change your decision on the WPI SHIP. The Bursar's office can reset your data and guide you through the steps.

If it is after the enrollment/waiver deadline, you cannot waive after enrolling in the WPI SHIP, unless you enter the armed forces. You may be able to enroll if you have had a qualifying event – please see **FAQ B-15**.

**15. Can I enroll in the WPI SHIP if I waived previously, but then lost comparable coverage after the enrollment/waiver period closed?**

**Yes**, you may be able to enroll. This is called a **special enrollment period** and it is only allowed in certain circumstances. You must have lost your comparable coverage due to a **qualifying event**. Qualifying events include involuntary loss of coverage from a comparable health insurance plan for reasons such as:

- Reaching the age limit of another health insurance plan,
- Loss of health insurance through due to a job loss/change.

**You can enroll within 30 days of the loss of coverage.** When enrolling in the WPI SHIP, you must submit to the WPI Bursar's office a letter from the carrier showing your dates of coverage (including the end date).

**16. If I have dependents, is coverage under the WPI Student Health Insurance Plan available for my family?**

**Yes**, coverage is available for your dependents, such as your spouse, domestic partner or your children. Once you are enrolled in the plan, you can log in to your MyAccount and enroll your dependents. You will need to be prepared to pay the premium for the entire coverage period at the time of enrollment.

## SECTION C

### C. Worcester Polytechnic Institute Student Health Insurance Plan (SHIP) Benefits

*If you have decided to enroll in the WPI Student Health Insurance Plan, the following Questions and Answers may provide helpful information about your coverage and how you can use it.*

**For the most accurate and easiest to access information about your WPI SHIP create and log-in to your online insurance “MyAccount” at this link:**  
**[www.uhcsr.com/myaccount](http://www.uhcsr.com/myaccount)**

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#### **17. What benefits does my WPI Student Health Insurance Plan (WPI SHIP) provide?**

Your Plan coverage is fully compliant with the Affordable Care Act (ACA) and all other federal and state requirements. It pays for a variety of medical services, including:

- Preventive care services **at no cost** when you use In-Network providers including routine physicals and examinations, screenings, GYN examinations, prescription drugs and most immunizations;
- Hospital room and board and care;
- Inpatient and outpatient procedures and surgeries;
- Doctor and other health care professional office visits;
- Labs services, x-rays and imaging tests;
- Inpatient and outpatient mental and substance use disorder services;
- Ambulance transportation;
- Emergency care and urgent care;
- Prescription drugs;
- Home healthcare;
- Rehabilitation and habilitation services;
- Maternity and childbirth services; and
- Chemotherapy and radiation treatments,

For services that are not preventive, your Plan pays for 80% of your eligible medical expenses when you receive care from In-Network providers - this is the advantage to using In-Network providers. When you use Out-of-Network providers, your Plan pays for 60% of your eligible medical expenses which means your out-of-pocket costs are more. Each plan year, your out-of-pocket costs are limited to **\$5,000 per**

***insured person per policy year for In-Network care and \$5,000 per person per policy year for Out-of-Network care.***

For prescription drugs from **In-Network pharmacies**, you pay:

- \$0 for preventive care medications;
- \$20 copay for a 30-day supply of Tier-1 (Generic) drugs;
- \$55 copay for a 30-day supply of a Tier-2 (Preferred Brand) drugs,
- \$75 copay for a 30-day supply of a Tier-3 (Non-Preferred Brand) drugs

**Note:** in some cases, your doctor must get prior authorization from the insurance company before a drug will be covered under your Plan. You can see which drugs require preapproval by visiting:

<https://www.uhcsr.com/media/b2db3f66-b627-4249-890b-1f66dab27550>

#### **18. How do I see if my doctor, hospital, therapist, or other medical provider is In-Network?**

Log in to your online “MyAccount”. Please visit the appropriate link below to search for your providers or call Customer Service:

**Medical Providers:** <https://connect.werally.com/medicalProvider/root> , or call Customer Service 1-800-767-0700

**Behavioral Health:**

<https://provider.liveandworkwell.com/content/laww/providersearch/en/home.html?siteId=3077&lang=1>

**Pediatric Vision:** <https://wf.myuhcvision.com/MWP/Landing>, or call 1-800-839-3242

**Pediatric Dental:** Call Customer Service as 877-816-3596

#### **19. How do I see if my pharmacy is in the network?**

Go to this link to search the national network: [https://www.optumrx.com/oe\\_rxexternal/pharmacy-locator?type=ClientPharmacy&var=UXZA6737&inoid=%2520UXZA6737&page=&par=](https://www.optumrx.com/oe_rxexternal/pharmacy-locator?type=ClientPharmacy&var=UXZA6737&inoid=%2520UXZA6737&page=&par=) or call 1-855-828-7716

#### **20. Am I still covered under the Plan during breaks and vacations?**

**Yes**, your plan is effective from **August 12, 2021 through August 11, 2022**.

#### **21. What if I am living off-campus, traveling, or studying outside the United States?**

Your Plan provides a comprehensive program that provides 24/7 assistance and evacuation benefits called UnitedHealthcare Global.

-Domestic insureds are eligible for services when traveling 100 or more miles away from your primary residence, campus location or while participating in as Study Abroad program.

-International insureds are eligible to receive services worldwide, except in your home country.

Key assistance benefits include:

- Emergency Medical Evacuation
- Dispatch of Doctors/Specialists
- Medical Repatriation
- Repatriation of Remains
- May also include additional assistance services to support your medical needs, including worldwide medical referrals and medication/vaccine transfers.

Contact info: Call 1-800-527-0218 (inside US), Call 1-410-453-6330 (Outside US), or email [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com) . Use Reference ID#355751. All assistance services must be arranged and provided by UnitedHealthcare Global.

**22. Do I need a referral from WPI’s Student Health Services to see an off-campus healthcare provider?**

**No**, you don’t need a referral. Still, if it is not an emergency, you may decide to seek care or advice first from WPI’s Health Services. Staff at the Health Services can connect you with valuable on-campus services or to providers in local care delivery system off campus. For more information, visit WPI’s Health Services website at: <https://www.wpi.edu/offices/health-services>

**23. I expect to graduate this year. Does my Student Health Insurance Plan cover me after I graduate?**

**Yes**, you will be covered under your Plan until the end of the policy period for which you are enrolled and have paid your premium. If you enrolled effective **August 12, 2021** and paid for annual coverage and you graduate in the spring, you will be covered until the end of the policy year, which is **August 11, 2022**.

**24. How do I get an ID card for my Student Health Insurance Plan?**

You can log into your online account at [www.uhcsr.com/myaccount](http://www.uhcsr.com/myaccount) or call customer service at 1-800-767-0700

**25. What if I need more information about my Student Health Insurance Plan?**

You can go to [uhcsr.com](http://uhcsr.com) and enter Worcester Polytechnic Institute or call customer service at 1-800-767-0700 or contact Cross Benefit Solutions at 1-800-537-6444.

**26. Are there any changes to the Plan for the 2021-2022 Policy Year?**

**No**, there have been no benefit plan changes for 2021-2022.

**27. How much does the Plan cost?**

	Annual Cost for August 12, 2021 – August 11, 2022	Cost for January 1, 2021 – August 11, 2022
Student	\$1,829	\$1,117

