



Husson University
Insurance Plan
Academic Year 2023-2024

Frequently Asked Questions



2023-2024 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.

We have divided the FAQs in to three categories.

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

Disclosure:

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2023-2024 Student Health Insurance Plan (SHIP) Frequently Asked Questions

Section A

A. Deciding Whether to Enroll in the Husson University Student Health Insurance Plan or Waive Coverage

Each year, you must decide whether to enroll in the Husson University Student Health Insurance Plan or waive coverage. The following questions and answers may help you make that decision.

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

Yes, all registered full-time students are required to have health insurance coverage, either through the Husson SHIP or through another individual or family plan.

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

For full-time students attending Husson University this fall, the deadline for enrollment or waiver request is **September 5, 2023**. ***If you do not enroll or complete a waiver by the deadline, you will be automatically enrolled in the Plan and will be responsible for the \$3,536 premium for coverage effective August 1, 2023 through July 31, 2024.***

2. Am I considered a full-time student?

If you are a registered Undergraduate student taking nine (9) or more credits or a registered Graduate student taking 6 or more credit hours at Husson University, you are considered a full-time student who must either enroll in the Student Health Insurance Plan or waive coverage.

3. Why does Husson University require health insurance for all full-time students?

Husson requires that all full-time students have comprehensive health insurance coverage while enrolled to ensure that you have coverage for local care to meet your health care needs while at college.

4. If I am a full-time international student, do I need to enroll in or waive coverage under the Husson University Student Health Insurance Plan (Husson SHIP)?

Yes, if you are a full-time international student, you are required to complete the enrollment/waiver process. The vast majority of international students will need to enroll in the Husson SHIP. Only those international students who are covered by an embassy-sponsored health plan or other comparable coverage that is based in the United States are able to waive coverage under the Husson SHIP.

5. 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 Husson 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-14**.

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.

6. If I am waiving coverage under the Husson University Student Health Insurance Plan, do I have to provide any other information about my 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-14**. Any additional information requests, other correspondence, and confirmation will be sent to your email address Husson has on file, which is usually your college email address.

7. 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 Husson SHIP.

Comparable coverage should have participating (In-Network) health care providers who are located in the geographic area where you attend school and should 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 Maine 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.

8. 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 Maine);
- International plans (includes travel coverage from your home country policy);
- 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).

9. If I submit an online waiver request of the Husson University Student Health Insurance Plan because I have coverage, will the request be verified and how long will that take?

Yes, Aetna verifies coverage for all requests to waive coverage under the Husson SHIP. You will be asked to complete a brief set of questions and to submit your identification number for your medical plan. After you furnish this information, it takes a few days to verify coverage and you will be notified by email during each step of the process by Aetna. See **FAQ B-14**.

10. If I have coverage under another medical plan, what should I consider in deciding whether to enroll in the Husson University Student Health Insurance Plan?

We strongly suggest that you compare your current medical coverage to the coverage provided by the Husson SHIP. Information that will help you compare your current plan and the Husson 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 Husson SHIP. The Husson SHIP has only a \$250 annual deductible for in-network services and a \$500 deductible for out-of-network services, most employer-based health plans have much higher deductibles. The Out-of-Pocket Maximum for In-network services is \$6,500. Many employer-based plans will go as high as \$8,550 for their Out-of-Pocket Maximum.

You also may want to consider the premium cost of your current coverage and the cost of the Husson SHIP, which is **\$3,536** for coverage from **August 1, 2023 through July 31, 2024**. 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 Husson 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.

11. 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 Husson University Student Health Insurance Plan satisfies both federal and state requirements that you have health insurance.

12. My home state's Health Insurance Marketplace provides individual health plans. Can they be used as coverage to waive coverage under the Husson 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 coverage and waive the Husson 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) then it is likely only emergency care would be covered outside of your State, so you need to be aware of the limited coverage.

Your Marketplace insurance plan may have higher out-of-pocket cost shares and premium costs than those under the Husson 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 Husson University Student Health Insurance Plan (Husson SHIP)

Once you have decided to either enroll in or waive coverage under the Husson University 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.

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13. 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 Husson University student.

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

If you are a fall 2023 full-time student, your enrollment or waiver deadline is: September 5, 2023

For new spring or transfer students, your enrollment or waiver deadline is: January 23, 2024

You will be notified of your eligibility to enroll in or waive coverage under the Husson University Student Health Insurance Plan (Husson 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 Husson SHIP

To enroll in the Husson SHIP, the first step is to “Log In” at the below link:

<https://students.aetnastudenthealth.com/welcome.aspx?groupid=686157>

Once you have Logged In, you can proceed to the “Enroll” function and follow the prompts. Once complete, you will receive an immediate confirmation of your enrollment.

To Waive Coverage under the Husson University Student Health Insurance Plan

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

- 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 is provided by a company licensed to do business in the United States with a U.S. claims payment office and a U.S. phone number.: **yes or no**
- My plan is currently active and I agree to maintain health insurance coverage throughout the academic year.: **yes or no**
- My insurance plan provides coverage for medical expenses I may incur while in the State of Maine.: **yes or no**

Please upload an electronic copy of the front and back of your ID card, so we can verify your coverage more quickly.

To Waive the Husson SHIP

To waive coverage under the Husson SHIP, the first step is to “Log In” at the below link:

<https://students.aetnastudenthealth.com/welcome.aspx?groupid=686157>

Once you have Logged In, you can proceed to the “Waive with other insurance” function. You will be asked to enter your current insurance information and answer questions about your insurance plan. Once complete, you will receive an immediate response that your waiver is “Pending”. When the information is verified, you will receive an email letting you know if your waiver request was approved or declined. If your waiver request is approved, the email will tell you that and give you a confirmation number. If your waiver request was declined, the email will tell you the reason it was declined. Sometimes a waiver is declined because the information

could not be verified - in this case, the email will give you instructions on what to do. If you think you answered a question incorrectly and you are entitled to waive the Husson SHIP or you have other questions about your waiver request, please contact **Aetna Student Health at (877)626-2308**.

15. If I enroll in the Husson 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 Husson SHIP until the last day of the coverage period - **August 31, 2024**. 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.

16. 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 Student Accounts at Husson University and let them know you want to change your decision on the Husson SHIP. Student Accounts will be able to reset your data and can guide you through the next steps.

If it is after the enrollment/waiver deadline, you cannot waive after enrolling in the Husson SHIP, unless you enter the armed forces. You may be able to enroll if you have had a qualifying event – please see **FAQ B-17**.

17. Can I enroll in the Husson SHIP if I waived previously, but then lost 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 coverage due to a **qualifying event**. Qualifying events include involuntary loss of coverage from a 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 60 days of the loss of coverage. When enrolling in the Husson SHIP, you must submit to Husson Student Accounts a letter from the carrier showing your dates of coverage (including the end date).

18. If I have dependents, is coverage under the Husson Student Health Insurance Plan available for my family?

No, at this time, coverage is not available for your dependents, such as your spouse, domestic partner or your children.

Section C

C. Husson University Student Health Insurance Plan (Husson SHIP) Benefits

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

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19. What benefits does my Husson University Student Health Insurance Plan (Husson 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 health 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 at 75% of the Negotiated Charge for eligible medical expenses, after the \$250 deductible is satisfied, when you receive care from In-Network providers - this is the advantage to using In-Network providers. Each plan year, your out-of-pocket costs are limited to **\$6,500 for In-Network** care. When you use Out-of-Network providers, your Plan pays at 55% of the Usual and Customary Charge for eligible medical expenses after the \$500 deductible is satisfied. There is

no Maximum Out-of-Pocket limit for Out-of-Network care which means you will always be responsible for the remaining 45% as well as any charges over the Reasonable and Customary Charges.

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

- \$0 for preventive care medications at In-Network Pharmacies;
- \$20 copay for a 30-day supply of Tier-1 (Generic) drugs;
- \$30 copay for a 30-day supply of a Tier-2 (Preferred Brand) drugs,
- \$60 copay for a 30-day supply of a Tier-3 (Non-Preferred & Specialty) 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.aetnastudenthealth.com/en/school/686157/members/prescriptions.html>

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

Please visit this link to search for your providers or call toll free **877-626-2308**.

<https://www.aetnastudenthealth.com/en/school/686157/members/find-doctor.html>

21. How do I see if my pharmacy is in the network?

Click on this link: <https://www.aetnastudenthealth.com/en/school/686157/members/find-doctor.html> or call toll free **877-626-2308**.

22. Am I still covered under the Plan during breaks and vacations?

Yes, your plan is effective from **August 1, 2023 through July 31, 2024**.

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

Your Plan provides access to a worldwide coverage and a comprehensive program that will arrange emergency medical and travel assistance services, repatriation services and other services when you are traveling.

For general inquiries regarding the travel access assistance services coverage, please visit this link:

<https://www.aetnastudenthealth.com/en/school/686157/members/travel-assistance.html>

ON CALL must coordinate and provide all transportation arrangements. Transportation arrangements rendered without ON CALL's coordination are not covered. Expenses submitted to ON CALL for reimbursement that were not coordinated and arranged by ON CALL will not be accepted.

If you are traveling and need assistance in North America, call On Call International toll-free at: **866-525-1956** or if you are in a foreign country, call collect at: **1-603-328-1956**.

To print your On Call travel assistance ID card, visit this link:

<https://www.aetnastudenthealth.com/en/school/686157/members/travel-assistance.html>

24. Do I need a referral from Husson University's Student Health or Counseling 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 Husson's Student Health Services or Counseling Services. Staff can connect you with valuable on-campus services or to providers in local care delivery system off campus. For more information, visit Husson's Health Services webpage at: <https://www.husson.edu/student-life/campus-life/student-health-services/services/> or the Counseling Services web page at: <https://www.husson.edu/student-life/campus-life/student-health-services/counseling-center/> .

25. 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 1, 2023** and paid for annual coverage and you graduate in the spring, you will be covered until the end of the policy year, which is **July 31, 2024**.

26. How do I get an ID card for my Student Health Insurance Plan? Go to this link and enter your Student ID number and your date of birth. **Student ID Number is found on your student portal, left hand side top corner under your name or on your monthly billing statement (it is not on your Husson ID Card)**: <https://www.aetnastudenthealth.com/en/school/686157/members/get-id-card.html>

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

You can go to <https://www.aetnastudenthealth.com/en/school/686157/index.html> or <https://www.crossagency.com/health/husson/2022-2023>

28. Are there any changes to the Plan for the 2023-2024 Policy Year?

No, there are no benefit changes to the plan for the 23-24 plan year

29. How much does the Plan cost?

Cost and Period of Coverage		
	Annual 8/1/23-7/31/24	Spring 1/1/24-7/31/24
Student Only	\$3,536	\$2,050