



# NORTHEAST OHIO MEDICAL UNIVERSITY PLAN HIGHLIGHTS

## 2019-20 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 [www.haylor.com/northeast](http://www.haylor.com/northeast)

Online waivers must be processed prior to the deadline of Fall deadline: July 1, 2019

*Rates pending state of Ohio approval*

### 2nd-4th Year Students

Annual: July 1, 2019-June 30, 2020	\$2,557
Fall: July 1, 2019-December 31, 2019	\$1,286
Spring: January 1, 2020-June 30, 2020	\$1,271



## 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: [www.studentinsurance.com](http://www.studentinsurance.com)
- Plan runs July 1, 2019-June 30, 2020

**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:** [mydental.guardianlife.com](http://mydental.guardianlife.com)

**Vision:** [consolidatedhealthplan.com](http://consolidatedhealthplan.com)

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

[www.haylor.com/northeast](http://www.haylor.com/northeast)

866-535-0456

[student@haylor.com](mailto: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: [www.haylor.com/northeast](http://www.haylor.com/northeast)



	<b>In Network</b>	<b>Out of Network</b>
<b>Deductible- Individual</b>	\$500	\$1,000
<b>Out-of-Pocket Maximum- Individual</b>	\$5,000	\$8,000
<b>Office Visits- Primary Care, Physician's visits &amp; Specialists</b>	\$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
<b>Preventive Care Services</b> (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
<b>Hospital Room &amp; Board (Inpatient)</b>	80% of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
<b>Emergency Services</b>	\$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
<b>Urgent Care Center</b>	\$35 copayment and 80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
<b>Ambulance Services</b>	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
<b>Surgery</b>	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
<b>Anesthetist Services</b>	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
<b>Mental Illness Treatment &amp; Substance Use Disorder Treatment</b>	Same as any Sickness	Same as any Sickness
<b>Laboratory Procedures &amp; Diagnostic X-ray Services</b> (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
<b>Physiotherapy, Chemotherapy &amp; Radiation Therapy</b>	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
<b>Injections</b>	80% coinsurance of the negotiated charge for covered medical expenses	60% coinsurance of the negotiated charge for covered medical expenses
<b>Diabetic Services</b>	Based on setting where service is performed	Based on setting where service is performed
<b>Telemedicine or Telehealth Service</b>	\$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
<b>Prescription Drugs (30-day supply)</b>	Tier 1- \$15 copayment, Tier 2- \$30 copayment, Tier 3- \$45 copayment	Tier 1- \$15 copayment, Tier 2- \$30 copayment, Tier 3- \$90 copayment

*The 2019-20 benefits listed above are a brief summary of the Northeast Ohio Medical University Student Health Insurance Plan design. Additional Schedule of Medical Expense Benefits/Limitations are specified in the Master*