# Juilliard **Student Health Insurance Plan**

The Juilliard School, in partnership with USI Affinity Collegiate Insurance Resources and Christie Student Health, is excited to announce the availability of the 2016-2017 Student Health Insurance Plan. This ACA-compliant, student-<mark>focused plan protects s</mark>tudents at school, at home, and while traveling or studying abroad. Staying healthy is important to your success at The Juilliard School.

## **Eligibility and Enrollment Details**

This plan provides coverage from 9/1/16-8/31/17 and the cost of \$2,002 is automatically added to your tuition bill (\$1,001 in the Fall, \$1,001 in the Spring).

#### Domestic Students

- Domestic students enrolled in 6 or more credit hours are eligible and automatically enrolled.
- Domestic students can opt-out of the Student Health Insurance Plan with comparable health insurance by submitting a waiver form, which is available on WebAdvisor.

#### International Students

- Coverage is required for international students. The plan benefits meet the "J" visa requirements.
- International students who are enrolled in 6 or more credits are automatically enrolled and do not have the opportunity to opt-out of this coverage.

#### How much does it cost?

	Annual Coverage 09/1/16 – 08/31/17	Per Semester Charge
Student	\$2,002	\$1,001

Rates include an administrative service fee.

### **Referral Requirement**

This Plan has a referral requirement. If you obtain a written referral from Health Services, your Cost-Sharing may be lower. This means you will pay less money if you get a referral to a Participating Provider. You do not need a Referral from Health Services to a Participating Provider for the following Services: Primary and preventive obstetric and gynecological services including annual examinations, emergency services, maternal depression screening, pre-hospital emergency medical services and emergency ambulance transportation, when Health Services is closed or when outside of New York City.

### Ask for Help

Christie Student Health: (866) 639-3629 www.christiestudenthealth.com/juilliard

CVS Health (Presription Drug Information): (866) 760-4274

24 Hour Nurseline: (866) 201 - 7919

Europ Assistance: (866) 296-7069

Juilliard Health Services: (212) 799-5000 ext. 282



This plan is underwritten by Tufts Insurance Company (TIC), and administered by Christie Student Health Plans LLC (CSHP). Christie Student Health is the brand name for the student health products and services provided by TIC and CSHP. Policy Number: SP100112

Form Number: 100112-2-1617-1

## **Covered Services**

For a full description of covered benefits and exclusions, please view the The Juilliard School PPO Certificate by visiting <u>www.christiestudenthealth.com/juilliard</u>.

Annual Deductible	Weill Cornell Medicine Preferred Network Member Responsibility: Participating Provider Member Responsibility: Non-Participating Provider Member Responsibility:	\$0 per member \$0 per member \$100 per member
Annual Out of Pocket Maximum	Participating Provider (Including Weill Cornell Medicine): Non-Participating Provider:	\$5,000 per member \$10,000 per member
Plan Maximum	Unlimited	

Benefit type	Weill Cornell Medicine Preferred Network Member Responsibility	Participating Provider Member Responsibility	Non-Participating Provider Member Responsibility
Physician Office Visit Expense (including Consultant)	Covered in full	\$10 copay per visit; 10% of allowed amount	\$10 copay per visit; 25% of reasonable charges after deductible
Outpatient Mental Health Expense	Covered in full	\$10 copay per visit; 10% of allowed amount	\$10 copay per visit; 25% of reasonable charges after deductible
Emergency Room Expense	10% of allowed amount	10% of allowed amount	10% of reasonable charges*
Urgent Care Expense	10% of allowed amount	10% of allowed amount	25% of reasonable charges after deductible
Ambulance Service Expense	10% of allowed amount	10% of allowed amount	10% of reasonable charges
Diagnostic Labs & Radiology	10% of allowed amount	\$10 copay per visit; 10% of allowed amount	\$10 copay per visit; 25% of reasonable charges after deductible
High-Tech Imaging (including MRI, CT Scan) Expense	10% of allowed amount	\$10 copay per visit; 10% of allowed amount	\$10 copay per visit; 25% of reasonable charges after deductible
Routine Physical Exams Expense	Covered in full	Covered in full	\$10 copay per visit; 25% of reasonable charges after deductible
Routine Pap Smears Expense	Covered in full	Covered in full	\$10 copay per visit; 25% of reasonable charges after deductible
Prescription Drugs	N/A	Covered in full following: \$10 copay for Generic drugs \$25 copay for Brand Name drugs	Covered in full following:* \$10 copay for Generic drugs \$25 copay for Brand Name drugs

# Exclusions

\*The annual deductible for these services is waived.

Certain services are not covered under this plan including Aviation, Convalescent and Custodial Care, Cosmetic Services, Dental Services, Experimental or Investigational Treatment, Foot Care, Government Facility, Medicare or other Governmental Program, Military Service, No-Fault Automobile Insurance, Services Provided by a Family Member, Services With No Charge, Services not Listed, Vision Services and Workers' Compensation.

If there is a conflict between this overview and the PPO Certificate, the PPO Certificate is the governing document.

### Network Savings

- Your Plan provides you with a higher level of coverage when you receive covered medical expenses from physicians who are part of the Cigna network (outside of MA and RI) and Tufts Health Plan (within MA and RI).
- You can fill prescriptions at any pharmacy that participates in the CVS Health pharmacy network. There are over 64,000 participating pharmacies nationwide. Campus area participating pharmacies include:
  - CVS Pharmacy
- Health Source Pharmacy
- Duane Reade
- Ride Aid Pharmacy

### Your plan also includes

- Worldwide Assistance (including medical evacuation and repatriation coverage)
- Discounts at Jenny Craig
- Dietary & Nutritional Supplement Discounts
- Discount on Glasses & Eye Care
- 24 Hour Nurse Line
- Exercise Facility Reimbursement

#### **Student Portal**

- Enroll in the Discount Dental Program
- Download ID card
- View eligibility and claim details
- View and download plan description
- Search for a provider



