CSU STUDENT HEALTH INSURANCE PLAN (SHIP)
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SO MUCH TO TALK ABOUT!

- Insurance terms
- Overview of SHIP
- Services available at the CSU Health Network
- Accessing care outside of the CSU Health Network
- Answering your questions
CSU SHIP Website Resources

https://health.colostate.edu/student-health-insurance/
INSURANCE TERMS

- **Carrier** – the insurance company you are insured by
- **Premium** – the amount you pay to have insurance (at CSU – premium is charged per semester)
- **Deductible** – the amount that is your responsibility to pay per plan year before your insurance shares in the cost of your medical care
- **Co-pay** – a set dollar amount for a particular service
- **Co-insurance** – a percent you pay for a particular service
- **Out of Pocket Maximum** – the maximum you will pay in a plan year. Once Reached, the insurance company will pick up 100% of additional care.
- **In-Network providers** – providers who have agreed to a contract with your health insurance plan.

https://www.kff.org/health-reform/video/health-insurance-explained-youtoons/ (Kaiser Family Foundation – not to be confused with Kaiser Permanente)
STUDENT HEALTH INSURANCE PLAN (SHIP)

INSURANCE CARRIER

EXTERNAL CLAIMS AND CUSTOMER SERVICE SUPPORT
855-258-2656

INTERNAL CLAIMS AND CUSTOMER SERVICE SUPPORT
970-491-2457

HTTPS://HEALTH.COLOSTATE.EDU/STUDENT-HEALTH-INSURANCE/
STUDENT HEALTH INSURANCE PLAN (SHIP)

- Care at the CSU Health Network – No deductible, minimal or no cost for most medical services and prescription medications
- Flex Dollars ($250) – for use at the Health Network toward vision, dental and massage services.
- Affordable Care Act compliant plan
- Medical evacuation/repatriation services
- Year-round Worldwide Coverage:
  - Spring/Summer coverage: January 1st through July 31st
  - Fall coverage: August 1st through December 31st
Health Network Services – covered 100% by SHIP

Primary Care
Immunizations
Travel Medicine
Allergy and Asthma
Psychiatry and Behavioral Health
Transgender Care
Women’s Care
Men’s Care
Nutrition Consultation for Disordered Eating
Laboratory and X-ray
Pharmacy
Physical Therapy
Sports Medicine/Orthopedics

Health Network Services – partially covered by SHIP
(*use Flex dollars; ** student fee funded)
Dental *
Optometry *
Counseling Services **
Health Education and Prevention Services **
BEST WAYS TO UTILIZE SHIP

START YOUR CARE AT THE CSU HEALTH NETWORK

FILL YOUR PRESCRIPTIONS AT THE CSU HEALTH NETWORK

USE URGENT CARE AND EMERGENCY SERVICES ONLY WHEN NECESSARY

USE IN-NETWORK PROVIDERS WHENEVER POSSIBLE

REFERRAL SERVICES AVAILABLE AT THE HEALTH NETWORK

OR

GO TO HTTPS://WWW.ANTHEM.COM/FIND-CARE/
### What is covered

<table>
<thead>
<tr>
<th>Covered services</th>
<th>Your cost if you use an in-network provider</th>
<th>Your cost if you use an out-of-network provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$500 INT / $1,000 DOM</td>
<td>$1,000 INT / $2,000 DOM</td>
</tr>
<tr>
<td>Coinsurance</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>Out-of-pocket maximum</td>
<td>$6,850 student</td>
<td>$13,700</td>
</tr>
<tr>
<td>Primary care doctor visits</td>
<td>20% coinsurance after deductible</td>
<td>40% coinsurance after deductible</td>
</tr>
<tr>
<td>Preventive care screenings and immunizations</td>
<td>0% coinsurance</td>
<td>40% coinsurance after deductible</td>
</tr>
<tr>
<td>Specialist care visits</td>
<td>20% coinsurance after deductible</td>
<td>40% coinsurance after deductible</td>
</tr>
<tr>
<td>LiveHealth Online telemedicine consultations</td>
<td>$25 copay</td>
<td>$25 copay</td>
</tr>
<tr>
<td>Urgent care</td>
<td>$50 copayment per visit plus 20% coinsurance after deductible</td>
<td>40% coinsurance after deductible</td>
</tr>
<tr>
<td>Emergency services: facility services</td>
<td>$100 copayment per visit plus 20% coinsurance after deductible Copayment waived if admitted</td>
<td>40% coinsurance after deductible</td>
</tr>
<tr>
<td>Emergency services: doctor and other services</td>
<td>$100 copayment per visit plus 20% coinsurance after deductible Copayment waived if admitted</td>
<td>Covered as in network</td>
</tr>
<tr>
<td>Prescription drugs</td>
<td>Tier 1: generic - $10 copay</td>
<td>Tier 2: preferred brand - $35 copay</td>
</tr>
<tr>
<td></td>
<td>Tier 3: non-preferred brand - $60 copay</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

**SHIP COVID RESOURCES**

[https://health.colostate.edu/student-health-insurance/](https://health.colostate.edu/student-health-insurance/)
Cold symptoms: Decide to go to the Health Network

Visit

Labs- additional testing started but not processed at the Health Network

Sent outside of Health Network

Applied to deductible/subject to co-insurance (patient responsibility)

Typically receive a paper bill in the mail

Throat Culture/Strep Test/blood work

At the Health Network

100% Covered under your in-house benefit
Cold symptoms: Health Network is Closed, you go to UC Health, Urgent Care, AFM, etc.

- Labs
- Outside of Health Network
- Applied to deductible and subject to a copay (patient responsibility)
- Urgent Care Visits have a $50 copay and 20% co-insurance after deductible
- Bill sent to patient, will not show up on student account
Who is SHIP designed for?

What are the benefits/detriments of having a separate program for graduate students?

How are our deductibles, max out of pocket, etc. determined?

Why don’t we have dental and vision coverage?

What percent of graduate and undergraduate students are on CSU health insurance? What are the absolute numbers? UG 2105; GR 1450; INTL 1073 (combination of graduate and undergraduate)

How does SHIP compare to other universities and the state?

Why don’t we have spousal coverage or family plans?

Why don’t we have adequate coverage for pregnant women? What if pregnancy spans the next plan year – do I face paying the deductible again?

If you are a student who knew you would need extensive care/coverage, is there another insurance option that would be more cost effective?

Why is there sometimes a delay in our health insurance activation? Students have reportedly come up as uninsured when seeking health coverage outside of the center a month and a half into the term even though they had signed up for the insurance and received email confirmation.
MENTAL HEALTH ACCESS

- Student statement: The counseling services operate semester by semester so there isn't enough continuity, especially over the summer. It doesn't feel like a true counseling service if we can only access it 8-9 months out of the year.
  - CSU Health Network counseling services are open year-round. Some counselors work 9-month schedules so they may not be available during the summer months. Most of the Health Network counselors work year-round.
- Can we get referrals to other counselors or psychiatrists when our in-house psychological and psychiatric services are overwhelmed?
  - Yes! Options are:
    - EAP
    - Anthem Live Health Online - $25 co-pay per visit
    - Community providers, subject to your deductible/co-insurance
• Your question: How do we better inform grad students what resources are available to them? Many of them don’t know how to seek out these resources or they are uneducated with insurance.
  • Our question: What ways would be helpful for grads to learn about the plan/insurance?
• Your question: A general concern is graduate students feel like SHIP is designed for undergrads, but it seems like it is really our only/best insurance option. But we are older and have different needs than undergrads that are not met by the only plan we are presented with/that the graduate school will help cover.
  • Our question: Help us understand the needs you perceive the plan is not meeting?
• Why have flex dollars if that’s the cost to access the services over the summer? We are year-round students/employees. This access fee does not make sense.
• How can graduate students get a primary care physician at the health center (versus getting a different doctor for each appointment)?
EXAMPLE 1: YOU ARE NOT FEELING WELL ON A WEEKEND AND GO TO AN URGENT CARE FOR SERVICES. THIS IS YOUR FIRST VISIT OUTSIDE OF THE HEALTH NETWORK DURING THE PLAN YEAR.

Urgent Care charges: Visit, labs, IV fluids, etc.
- $2500 billed to Insurance Anthem contract re-prices the bill to $1700
- You have $1000 deductible to meet, then 20% cost share (because you went to an in-network provider)
- You also went to an urgent care which is $50 co-pay

You will pay:
- $1000 deductible
- $50 co-pay
- 20% of the remaining $700, or $140
- Total out of pocket cost $1190.
EXAMPLE 2: YOU NEED SURGERY FOR A KNEE INJURY. YOU ALREADY MET YOUR DEDUCTIBLE THIS YEAR WHEN SEEN AT URGENT CARE (EXAMPLE 1).

- You start this claim with having met $1190 out of pocket expenses for the plan year from your urgent care visit.
- At the Health Network, you saw an orthopedic surgeon and received an x-ray. The visit and x-ray was covered at 100% (no cost to you).
- The surgery including the surgeon and facility cost was $36,000.
- Anthem’s contract repriced that to $25,000.
- You pay: 20% of the cost of surgery, up to a max out of pocket of $6850
  - 20% of $25,000 is $5000
- You have now met $6190 of your $6850 out of pocket max for the year.
THANK YOU