



Purchase College - State University of New York

FAQs 2015-2016

How do I know if I am eligible for the Student Health Insurance Plan?

All students enrolled in a full time course of study (at least 12 or more credit hours) leading to a degree will be automatically enrolled in and charged premium each semester for the Purchase College Student Health Insurance Plan unless they are currently insured under a comparable health insurance plan may waive coverage under the plan with proof of such existing coverage.

The premium for coverage added to the student's tuition bill will remain unless a successful waiver is completed by the applicable waiver deadline. To waive coverage under the plan, students must submit proof of comparable coverage to the Purchase College's Student Accounts Office by the applicable waiver deadline.

Matriculated students enrolled in at least 6, but not more than 11 credit hours, will be automatically enrolled in and charged premium each semester for the Purchase College Student Health Insurance Plan unless the student notifies the Purchase College's Student Accounts office, that they did not want to be covered. Eligible dependents of those enrolled in the plan may participate in the plan on a voluntary basis.

What is my Policy number?

Your Policy number is located on your plan brochure and ID card. The Purchase College Student Health Insurance Policy number is 2015-201205-1.

Does this plan meet the new Health Care Reform requirements?

This Student Health Insurance Plan meets the Final Rules related to Student Health Insurance coverage as defined by the U.S. Department of Health and Human Services and the Centers for Medicare and Medicaid Services which were published on March 16, 2012.

What is a Qualifying Event?

A qualifying event is when a student or Dependent has a change in status and loses coverage under another Health Care Plan. At that point, they will become eligible to enroll for coverage under the Student Health Insurance Plan provided, within 31 days of the qualifying event, students should send a copy of the Certificate of Creditable Coverage, the completed Qualifying Events Form and the letter of ineligibility to Academic HealthPlans. A change in status due to a qualifying event includes, but is not limited to, loss of a spouse, whether by death, divorce, annulment or legal separation.

What does the insurance cover?

The Student Health Insurance Plan covers Injury and Sickness. Some of the benefits include but are not limited to inpatient hospitalization, outpatient doctor's visits, X-rays, laboratory charges, surgery and emergency care. There are limitations and maximums that may apply. Please refer to the "Schedule of Benefits" section in the Student Health Insurance Plan brochure. This will provide specific details regarding your Policy.

FAQS?



How do I update my contact information?

It is very important to make sure that your address, phone number, and email address on file at the school are current and accurate. If not, ID cards, explanation of benefits and other notifications about your student health insurance plan may not get to you. If you have moved or your contact information has changed, please make sure you update your contact information with your school. Additionally, please notify us at support@ahpcare.com so we can update our records as well. Please include "Contact information update" in the subject line and your first and last name, and student ID number as well as your new contact information in the email message.

How do I get an ID card?

Once your coverage is active in UHCSR's system, you will receive an email letting you know that your electronic ID card is ready, with a link to download it right to your mobile device. You can also print a copy from your computer or request a permanent card be mailed to you by going to www.uhcsr.com.

Can I go to any Doctor?

Preferred Providers allow the Insured to maximize the benefits offered under this plan. You should seek treatment from the Preferred Provider Organization (PPO), which consists of Hospitals, Doctors, ancillary, and other health care providers organized into a network for the purpose of delivering quality health care at affordable rates. Your Preferred Provider Organization is UnitedHealthcare Options PPO Network. For a list of providers, please go to purchase.myahpcare.com or call 800-767-0700.

Where do I get a claim form?

Claim forms are not required.

How do I file a claim?

Submit all medical prescription drug receipts (for providers outside the UnitedHealthcare pharmacy network), and Hospital bills incurred to UnitedHealthcare **Student** Resources, P.O. Box 809025, Dallas, Texas 75380-9025 for processing within 90 days of treatment. The claim procedure is listed on the back of your ID card.

Does this Policy pay all medical bills in full?

Covered benefits for the Policy year are payable at 80% (Network Provider) or 60% (Out of Network), unless otherwise specified in the Policy, up to the Policy maximum. There are specific benefit limitations and exclusions on the Policy as well. Please go to purchase.myahpcare.com to review the brochure for more details.

If I have questions, who should I call?

If you have questions regarding enrollment, premium, or claims and benefits, please call Academic HealthPlans at (855) 824-9684.