

MIT Student Health Insurance Plan FAQ

For additional questions, please visit help.ahpcare.com.

About MIT SHIP

What benefits does MIT SHIP provide?

- Prescriptions
- Routine and Specialty care outside of MIT Health
- Telehealth visits (within the US only)
- Up to 52 off-campus mental health visits per year with no out-of-pocket cost
- Diagnostic tests, physical therapy, and surgery
- Hospitalizations, medically necessary ER visits and more.

How much does MIT SHIP cost?

Cost sheets are on the [Eligibility/Cost page](#).

Does MIT SHIP still cover me after I graduate?

Your coverage ends on the last day of the coverage period associated with your graduation date. For example, if you graduate in the spring, you will be covered until August 31 of that year, which is the end of that coverage period. If you graduate earlier in the year, your coverage will end at the end of the term which you graduate.

Once I'm enrolled

How do I get an ID card?

You have two options for obtaining an ID card. We strongly recommend the first option.

1. Put your card on your phone
 - Download the MyBlue app available from the [App Store](#) or [Google Play](#).
 - Open the app and use your BCBS ID number to create your account.
2. Ask us to mail you a physical ID card: You can request a card by logging onto bluecrossma.com/myblue or calling 1 (800) 782-3675

I received an enrollment confirmation from AHP. Why do my MIT SHIP coverage dates only show one term?

Coverage dates are displayed by term because MIT SHIP is billed on a term-by-term basis.

How do I view my account information?

Visit the account dashboard on the [AHP/MIT website](#).

How do I print an insurance verification letter?

You may need a letter to verify your insurance coverage for a visa or another reason. Verification letters are usually available 5–7 business days after your insurance eligibility is confirmed. To print a letter, [log into your account](#).

How do I change my address?

Update your address with the [MIT Registrar's Office](#).

How do I find a provider?

- **To select a primary care provider (PCP) at MIT Health**, go to health.mit.edu/choose to view available clinicians. Then follow the instructions on the website to choose your PCP.
- **To find in-network providers outside of MIT Health**, go to the [Blue Cross Blue Shield website](#) or call 1 (800) 810-BLUE (2583). On the website:
 - Enter the medical specialty you are looking for, along with a location or enter the name of a specific clinician or facility. Choose "PPO or EPO" from the drop-down "Select a Network" menu.

How do I fill prescriptions?

With MIT SHIP, you may fill prescriptions at any retail pharmacy in the [CVS Caremark](#) network. To find participating pharmacies, go to the [CVS Caremark Pharmacy Finder](#).

Do I need a referral from MIT Health to see an off-campus health provider?

No. You do not need a referral to see a provider outside of MIT Health, but your out-of-pocket cost will be less if you see a provider that participates in the "Blue Cross Blue Shield PPO/EPO" network.

Once I'm enrolled in the MIT SHIP can I cancel it?

Once you are enrolled in MIT SHIP, you will almost always remain enrolled for that coverage period. However, if you have annual coverage, there are a few situations that

allow you to cancel the spring portion of your MIT SHIP coverage and receive a credit to your account for the unused portion:

- You will be leaving school prior to the spring semester. In this case, your insurance will be canceled automatically.
- You become eligible for, and enroll in, a Health Connector plan with financial assistance (a “ConnectorCare Plan”) through the Massachusetts Health Connector, with coverage beginning on or before the start of the spring health insurance coverage period (which begins before the start of the academic spring semester). In this case, you must file your request to terminate coverage no later than the last day of the fall health insurance coverage period.
- You become eligible for, and enroll in, MassHealth with coverage beginning on or before the start of the spring health insurance coverage period (which begins *before* the start of the academic spring semester). In this case, you must file your request to terminate coverage no later than the last day of the fall health insurance coverage period.
- [To request cancellation, visit the enrollment page, click on Qualifying Events, then click "submit a request to drop coverage."](#)

Family Members

Are my family members eligible to enroll in MIT SHIP?

Yes. Your eligible family members (or “dependents”) may include your spouse or “spousal equivalent” (a same-sex or opposite-sex partner you have lived with for at least four months) and your children up to 26 years of age.

There are several rules about enrolling family members:

- You must provide documentation to prove that your family members are eligible.
- You must purchase your family members’ insurance for the same time period as your own coverage.
- If you waive MIT SHIP coverage for yourself, you cannot buy MIT SHIP coverage for your family members.

How do I enroll my family members (or “dependents”)?

You may enroll dependents online [here](#).

When should I enroll my family members?

- **During the open enrollment period**, you can enroll your family members as soon as your own enrollment is complete.
- **Outside of the open enrollment period**, you can enroll your family members **ONLY** in the case of a “qualifying event.”

If I’m not enrolled in MIT SHIP, can I still buy MIT SHIP coverage for my family members?

No, you only can buy MIT SHIP coverage for your dependents if you are also enrolled.

Qualifying events

Can I enroll in MIT SHIP later in the school year — outside of the open enrollment period?

Yes, but ONLY if you have lost your previous insurance coverage within the past 30 days. This could happen, for example, because you turned 26 and are no longer eligible to be covered under your parent's plan or because your spouse or parent lost their job and insurance coverage.

Can I enroll my family members (“dependents”) later in the school year, outside of the open enrollment period?

Yes, but ONLY if one of these qualifying events occurs:

- You get married, and you want to add your new spouse.
- You have a child, and you want to add that new child.
- Your family member enters the country for the first time, and you want to add that family member.
- Your family member loses coverage under another insurance plan, and you want to add that family member.
- [Read more about Qualifying Life Events on the enrollment page](#)

How can I enroll myself or family members in MIT SHIP due to a qualifying event? You will need to complete the [online enrollment](#) along with supporting documentation.

Note: You must meet a deadline for submitting your request. In most cases, you must submit the Petition to Add with supporting documentation within 30 days of the qualifying event. If your family member lost their insurance coverage, you have 60 days. If you miss the deadline, your request will not be processed.

What happens after I submit an enrollment request due to a qualifying event?

We'll review your request to make sure you or your family members are eligible to enroll in MIT SHIP. If your request is approved, you will get an email with more information about your coverage.

Will the premium be prorated?

Yes, the premium you pay will be prorated on a monthly basis determined by the date your coverage begins.

Waivers

Will I be allowed to waive MIT Student Health Insurance Plan (MIT SHIP) coverage? You will be allowed to waive MIT SHIP coverage if you are living on campus or in the Cambridge area and have another comprehensive insurance plan that provides “comparable coverage” in the area.

Do I have to waive MIT SHIP every year?

Yes. Each year, MIT will automatically enroll you in, and bill you for MIT SHIP. At that point, you can waive coverage for the whole academic year. You must submit the online waiver by each year’s deadline to have the charge removed from your bursar’s account.

What does “comparable coverage” mean?

To waive MIT SHIP, you must be insured by a plan that meets Massachusetts state requirements for “comparable coverage of health services from a reasonable network of hospitals and providers.” This means that your plan must include preventive and primary care, emergency services, surgical services, hospitalization benefits, outpatient services, mental health services, and prescription drugs in the Cambridge area.

How do I submit a waiver request?

Use the “Waive MIT SHIP” button on the [waiver page](#) to access the online waiver.

Why does MIT use Academic HealthPlans (AHP) to review waiver requests?

We do this to make sure students have the coverage they need while they are on campus. AHP reviews each waiver request to make sure the student has health insurance that will cover their care if they become sick or injured while in Cambridge. In the past, some students who waived MIT SHIP found that their coverage was not sufficient to cover the care they needed. Some students had to leave school and go home to get the care they needed. Others stayed at school and used expensive out-of-network providers, which left them with expensive bills to pay.

I waived in the fall. Can I enroll in the spring?

No. The annual Open Enrollment/Waiver period for MIT SHIP occurs in the summer, usually from mid-July to mid-August.

Outside of the Open Enrollment/Waiver period, you may enroll yourself or family members in MIT SHIP only under certain circumstances known as “qualifying events”

If I enroll in an insurance plan through the Massachusetts Health Connector, may I waive MIT SHIP?

If you buy health insurance through the Massachusetts Health Connector, you will be allowed to waive MIT SHIP. You may also be eligible for financial assistance to help you pay for plans available through the Health Connector. Be sure to review these plans carefully before purchasing. Many of them have high deductibles — that’s the amount of your own money you need to pay before the insurance will pay for any care — and this will increase

your out-of-pocket costs. In fact, depending on the healthcare services **outside of MIT Health**, you use during the year, you could end up spending more with a high-deductible Health Connector plan than you would with MIT SHIP.

MIT SHIP and student medical leave

I chose not to remain enrolled in the MIT Student Health Insurance Plan (MIT SHIP) while I am on leave. When does my coverage end?

Enrollment in the MIT Student Health Insurance Plan will terminate as of the last day of the month in which eligibility ends.

When does my family coverage end?

If you have family members who are covered by the MIT Student Health Insurance Plan (MIT SHIP), they will continue to be covered until either January 31 or August 31—whichever date comes first. You cannot extend insurance coverage for family members.

I chose to remain enrolled in the MIT Student Health Insurance Plan (MIT SHIP) while on leave. When does my additional year of coverage begin?

Your additional year of coverage begins February 1 or September 1—whichever date comes first.

If I want to remain enrolled in the MIT Student Health Insurance Plan (MIT SHIP) while on leave, do I have to pay for this continued coverage?

Yes. If you choose to extend your MIT SHIP coverage for one year, you will be responsible for paying all health insurance premiums for that period. You must pay your health insurance premiums even if you do not use your insurance benefits. These charges are added to your student account, and you are responsible for reviewing your statement on MITPAY and submitting payment to Student Financial Services on time.

When will I receive my first bill?

You will receive an email from the Student Financial Services office to notify you when a new bill is available. Bills are sent out around the 10th of each month.

When will payment be due?

Payment will be due the first day of the month after you receive a bill. For example, a bill received July 12 will be due August 1.

What should I do if I cannot pay the bill by the due date?

If you are unable to pay for any reason, contact Student Financial Services at sfs@mit.edu or 1 (617) 258-8600 as soon as you receive your bill to set up a payment plan.

Can I end my insurance coverage while on medical leave?

Yes, but only at the end of a coverage period unless you have experienced a qualifying event. You must submit your request in writing to stuplan@med.mit.edu.

Dental Plan FAQ

What does the plan cover?

Covered in full: Routine diagnostic and preventative services once every six months, including emergency exams and periodic X-rays.

Covered at 80 percent after \$50 deductible per member per year: Other dental services, such as fillings (tooth-color or silver) and root canal therapy. Download the Summary of Benefits [link] for more information.

Who is eligible to enroll?

If you are a student enrolled in a degree-granting program at MIT, you can enroll in the dental plan. If you enroll in the plan, you may also add your family members – spouse/partner and dependent child(ren).

Can I enroll my spouse or children?

Yes. If you enroll in the Plan, you can also enroll your spouse/partner and child(ren)/dependent(s).

What other dental insurance coverage options do I have if I am under 19?

As part of Affordable Care Act requirements, the MIT Student Health Insurance Plan (MIT SHIP) provides some basic dental coverage for covered individuals younger than 19. See the Summary of Benefits for more information.

How much does it cost?

Check the dates and rates page for up-to-date information on rates.

When can I enroll?

You can enroll during the annual open enrollment period from July 15 to August 15.

What if I miss the sign-up window? Can I sign up after August 15 or in the middle of the school year?

You cannot sign up outside of the July 15–August 15 enrollment period unless you lose your existing dental insurance or experience a “qualifying event” — like getting married or having a baby. If you join in the middle of the year after a qualifying event, you will be charged a prorated premium for the portion of the plan year for which you are enrolled. Other dental plans with different enrollment periods may be available through the [Massachusetts Health Connector](#).

How long will I have coverage?

The plan’s coverage year runs from September 1 to August 31 of the next year

Where can I use the plan?

You can use the Plan anywhere that accepts the Blue Cross Blue Shield of Massachusetts Dental Blue Program 1. This includes [MIT Health's Dental Service](#), located on the fifth floor of building E23. You can make an appointment by dialing 1 (617) 253-1501.

Is there a maximum plan benefit?

Yes. You may receive up to \$1,500 in services per year. For more information, download the Summary of Benefits.

Are braces or other orthodontic services covered?

No. This plan does not include coverage for braces or orthodontics. Additionally, MIT Health's Dental Service does not offer orthodontic services, but they can direct you to orthodontists in the Cambridge area.

Do benefits roll over from year to year?

Yes, some benefits roll over to the next year if they are not used. If you have at least one dental appointment but use less than \$700 in services in one year, you can roll over \$500 of benefit to use the following year—or beyond, to a maximum of \$1,250. Download the Summary of Benefits to learn more.