How Our Medical Plan Works



What the Health Plan Covers

The Plan helps you pay for covered medical care, prescription drugs, and mental health care services you receive from the **Student Health Center** and **Student Counseling Center**, at home, and while traveling or studying abroad. This includes services for routine, urgent and emergency care.

When You Need Medical Care

1. Use UHC Preferred (PPO) Providers

You can receive care from any licensed health provider, but you'll save money when you receive care from doctors, pharmacies, mental health counselors, and other health providers in the UnitedHealthcare (UHC) Preferred Provider Organization (PPO).

 Search for Preferred (PPO) providers at uhcsr.com/Caltech.

OR

 Ask the Student Health Center or Student Counseling Center for suggestions.

2. Show Your ID Card

When you visit your doctor, pharmacy, mental health counselor, or other health provider, show your UHC ID card.

Soon after enrolling in the Plan, you'll receive an email from UHC with instructions on how to get your ID card.

You can also download, print, or request your ID card at uhcsr.com/MyAccount.

3. Pay Your Health Provider

When you're responsible for some of the cost, you'll either pay your health provider at the time you receive care, or the provider will send you a bill.

You pay nothing for certain preventive services allowed under the Affordable Care Act and your first 25 mental health visits when you use UHC Preferred (PPO) health providers.

For other types of covered care, you and the Plan share the cost.

See the following pages for details.

Connect with a U.S. Board-certified doctor 24/7, 365 days a year. With HealthiestYou, you can access a doctor using your phone, tablet, or computer usually within an hour. HealthiestYou is available at no cost to you if you are enrolled in the Caltech Student Medical Plan (otherwise, you can use the service and pay \$40 a visit). Visit www.telehealth4students.com to learn more, register and download the HealthiestYou app. Register today so you'll be all set to use HealthiestYou when you need it.

Special Services While Away from Home

Anytime you're more than 100 miles away from home – even out of the country – you're eligible for special services through UHC's Global Program. Services include emergency medical, travel, and personal security assistance. *To ensure coverage, you (or a family member or Caltech representative) must call the number on your UHC Health ID card* before *you receive these services*. Review the **UHC Global Program Guide** for details.

Get the UHC MyAccount App

Access information about your coverage at any time.

- Check out the **MyAccount Guide** for details.
- Set up your account at **uhcsr.com/MyAccount**.

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2017-18 Caltech Student Medical		
Contacting UHC	www.uhcsr.com/Caltech 1-888-251-5640	
Coverage Dates	Coverage begins September 1, 2017 and ends August 31, 2018, as long as you're a registered student.	
	When You Use UHC PPO Providers (Preferred/In-Network)	When You Use Other Providers (Non-Preferred/Out-of-Network)
Deductible – the amount you pay before the Plan provides coverage (excludes copays and prescription drugs)	\$150 per person per policy year (Sept 1 – Aug 31)	\$500 per person per policy year (Sept 1 – Aug 31)
Out of Pocket Maximum – once you reach this amount, the Plan pays 100% for the rest of the policy year (includes deductible, coinsurance, copays and prescription drugs)	\$1,500 per person per policy year (\$3,000 max for all insured family members)	\$5,000 per person per policy year (\$10,000 max for all insured family members)
After the applicable deductible has been met, elig	gible expenses are payable as follows:	
PREVENTIVE CARE BENEFITS		
Annual Physicals, GYN Exams, Routine Screenings and Immunizations	100%	Not covered
PRESCRIPTION DRUGS		
Retail Pharmacy (31-day supply)	Lesser of the drug cost or flat copays \$10 tier 1 drugs \$30 tier 2 drugs \$50 tier 3 drugs	\$10 copay tier 1 drugs \$30 copay tier 2 drugs
Mail-Order Pharmacy (90-day supply)	Lesser of the drug cost or flat copays \$20 tier 1 drugs \$60 tier 2 drugs \$100 tier 3 drugs	Not covered
MENTAL HEALTH AND SUBSTANCE ABUSE BEN	IEFITS	
Outpatient Mental Health/ Substance Abuse Expenses (treatment by licensed or accredited health service organization or hospital or licensed practitioner)	No copay for first 25 visits** You pay \$15 copay per visit for additional visits** (no deductible)** (no copay or deductible for serious mental illness)	60%* of reasonable charge
Inpatient Mental Health	80%* of negotiated charge	60%* of reasonable charge
Inpatient Substance Abuse Expenses	80%* of negotiated charge	60%* of reasonable charge

^{*} Once you reach the annual out-of-pocket maximum, the plan pays 100% for these expenses.

Continued on the next page.

2017-18 Caltech Student Medical (continued) When You Use UHC PPO Providers **When You Use Other Providers** (Preferred/In-Network) (Non-Preferred/Out-of-Network) **SURGICAL (INPATIENT AND OUTPATIENT) BENEFITS** 80%* of negotiated charge 60%* of reasonable charge **Surgical Expenses Anesthetist Expense** 80%* of negotiated charge 60%* of reasonable charge & Assistant Surgeon Expenses **INPATIENT BENEFITS Hospital Room and Board Expenses** 80%* of negotiated charge 60%* of reasonable charge **Intensive Care/Hospital Expenses** 80%* of negotiated charge 60%* of reasonable charge **Miscellaneous Hospital Expenses** (lab tests, x-rays, anesthesia, special equipment, 80%* of negotiated charge 60%* of reasonable charge medicines, operating room) **Physician's Hospital Visit Expenses** 60%* of reasonable charge 80%* of negotiated charge (for non-surgical services) **OUTPATIENT BENEFITS** 80%* of negotiated charge after 60%* of reasonable charge **Physician's Office Visit Expenses** \$15 copay per visit (no deductible)** **Urgent Care Expenses** 80%* of negotiated charge 60%* of reasonable charge 80%* of negotiated charge after \$150 copay 80%* of negotiated charge after \$150 copay **Emergency Care Expenses** (copay waived if admitted) (copay waived if admitted) **Durable Medical Equipment** 80%* of negotiated charge 60%* of reasonable charge **ADDITIONAL BENEFITS** Covered medical expenses are payable at 80% of the actual charge. **Ambulance Expenses** Covered at no cost to you. Visit www.telehealth4students.com to learn Telehealth through HealthiestYou more and register. Save 10-25% on many "extra" health and welfare products and services **UnitedHealth Allies Discount Program**

This material is for information only. The Caltech Student Medical Plan excludes coverage for certain services and contains limitations on the amounts it will pay, and may not cover all your health care expenses. See the UHC Student Health Plan Brochure for details.

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that are not covered under the medical plan benefits.

^{*} Once you reach the annual out-of-pocket maximum, the plan pays 100% for these expenses.

^{**} Any extra care, such as lab work or x-rays, is subject to the deductible and coinsurance.