Good Day! We will begin the webinar in a few minutes, about 11:05am. You are muted and the chat box has been disabled. Please use the Q&A box to submit any inquiries. The webinar is being recorded and will be available on our website a little later this evening:
https://shwadmin.ucsd.edu/uc-ship/index.html
Agenda

- Student Health on campus
- What is the health insurance requirement and mandatory health fee?
- UCSHIP
- What if I have insurance?
- RAFT
- Online Resources
Need medical care on campus? Contact Student Health!

Full primary care physician services
MD’s, NP’s, RN’s, X-ray, Lab, Pharmacy, Urgent Care, Optometry, Immunizations, Dietician, Social Worker, CAPS, acupuncture, and more…

Payer Classification accepted:
• SHIP (Student Health Insurance Plan)
• Fee For Service (Credit Card Payment)
• RAFT (Reduced Access Fee for Tritons Membership)

SHS Hours:
Mondays: 8am-6pm (school year)
Tuesday, Wednesday, & Friday: 8am-4pm
Thursdays: 9am-4pm
Fall, Winter, Spring, and Summer

Appointments:
Call (858)534-3300 Or Log in to:
MyStudentHealthChart-> Click on Visits -> Schedule an appointment

After hours ADVICE NURSE LINE: (858)534-3300
University of California Requirement

The health insurance requirement is a UC Regents mandate, since 2011. The requirement is consistent for all UC campuses in California.

Every student must have comprehensive health insurance that covers them for primary care, outpatient diagnostic services, outpatient & inpatient hospital care, and mental & behavioral health.

REGISTRATION FEE:

The cost for Academic Year 23/24:

- $753 per quarter for undergraduates
- $1470 per quarter for graduates

Paid 3 times in an academic year.
Spring quarter includes Summer coverage.
University of California’s Student Health Insurance Plan
Already covered with a health plan? Consider a Waiver!

**WAIVER APPLICATION OPEN:**
May 3rd – September 20th, 2023

All alternative health plans must meet the UC Insurance Requirements:

**IMPORTANT REMINDERS:**

FA23 Registration Required

Only offered during specific waiver periods

Waiver requests must be submitted each year

Students classified as INTERNATIONAL must have Medical Repatriation & Evacuation
HMO, Kaiser, and Medi-Cal Recipients

Students covered by Medi-Cal or a private insurance HMO must have access to primary care in San Diego County in order to waive the health insurance requirement successfully.

Kaiser Northern CA is acceptable, but you will need to call and get your student a Southern CA medical record number, in case they need care while at UCSD.

Contact your insurance carrier to transfer to a San Diego PCP prior to filing a waiver.

Medi-cal recipients must contact their county office for a transfer, which can take up to 45 days.

Use the university address and update your case worker with your address change.

**Campus address:**
9500 Gilman Drive
La Jolla, CA 92092

San Diego Medi-Cal Office: 1-866-262-9881
## Required Waiver Information

### Summary of Benefits and Coverage: What This Plan Covers & What You Pay for Covered Services

Anthem Blue Cross: University of California Student Health Insurance Plan (UC SHIP)

UC San Diego Students and Covered Dependents

Coverage Period: Begins on or after 08/01/2022

Coverage for: Student/Family | Plan Type: PPO

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, visit www.mycship.org or by calling 1-866-940-8306. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms, see the Glossary. You can view the Glossary at www.healthcare.gov/plan-glossary or call 1-888-394-8309 to request a copy.

<table>
<thead>
<tr>
<th>Important Questions</th>
<th>Answers</th>
<th>Why This Matters:</th>
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<tbody>
<tr>
<td>What is the overall deductible?</td>
<td>There is no deductible for UC Family providers. For network providers: $500/person or $1000/family; Out-of-network provider: $1000/person or $2000/family.</td>
<td>Generally, you must pay all the costs from providers up to the deductible amount before this plan begins to pay. If you have other family members on the plan, each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible.</td>
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<tr>
<td>Are there services covered before you meet your deductible?</td>
<td>Yes, network preventive services, emergency room, urgent care, acupuncture, chiropractic, physician office visits, family planning, medical evacuation, repatriation and prescription drugs.</td>
<td>This plan covers some items and services even if you haven’t yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost-sharing and before you meet your deductible. See the list of covered preventive services at <a href="https://www.healthcare.gov/coverage/preventive-care-benefits">https://www.healthcare.gov/coverage/preventive-care-benefits</a>.</td>
</tr>
<tr>
<td>Are there other deductibles for specific services?</td>
<td>Yes, Pediatric dental: $20/person or $120/family. There are no other specific deductibles.</td>
<td>You must pay all of the costs for these services up to the specific deductible amount before this plan begins to pay for these services.</td>
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<td>What is the out-of-pocket limit for this plan?</td>
<td>For UC family providers: $2300/person or $3000/family; Network providers: $2300/person or $3000/family. For out-of-network providers: $500/person or $7000/family. For prescriptions: $1000/person or $2000/family. For pediatric dental: $1000/person or $2000/family.</td>
<td>The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan, they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.</td>
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RAFT (Reduced Access Fee for Tritons)

If you waive, please consider the RAFT offering. RAFT is prepaid access to Student Health Services. RAFT provides convenient and inexpensive medical care for students who waive SHIP.

• **What does RAFT cost?**
  ➢ $70 per quarter

• **What does it include?**
  • Scheduled office appointments
  • Lab services (CBC, basic blood panels)
  • X-rays

**RAFT is not INSURANCE,** it is a membership to come into our UCSD Student Health clinic for care, it doesn’t replace your insurance or pay for services outside of Student Health & Well-Being.

RAFT provides peace of mind for parents and students.

**RAFT does NOT include:**
- pharmacy, optometry, immunizations...
Students who waive may still use Student Health, **All UC Students are welcome at Student Health**

- SHWB services are provided on a Fee For Service basis, pay as you go method.
- SHWB does not accept or bill outside/private insurance.
- SHWB is not contracted with other insurance
- Itemized statements available.
- Student’s responsibility to file claim with their insurance company.
Contact and More…

Visit the Student Health Website:
http://studenthealth.ucsd.edu

We’re here to help...

▪ Call (858) 534-2124
▪ Email ship3@ucsd.edu

• Zoom Meetings

  Mondays, 11 am – 12 pm PST
  at https://uchealth.zoom.us/j/85143178680

  Wednesdays, 11 am – 12 pm PST
  at https://uchealth.zoom.us/j/87385801858

  Fridays, 11 am – 12 pm PST
  at https://uchealth.zoom.us/j/86367721797

For 411 on the MANDATORY INSURANCE REQUIREMENTS, Join us at one of our upcoming Webinars: