

SUNY INTERNATIONAL STUDENT MEDICAL INSURANCE PROGRAM

Frequently Asked Questions

1. Who is eligible for International Student Medical Insurance?

Any student who is not a U.S. Citizen or Permanent Resident is automatically enrolled on the International Insurance Program when they register for one credit hour or more. Visiting Scholars and Practical Training Participants working through UB programs are also eligible. International students on an official Leave of Absence from the UB who were insured by this program at the time of their Leave may purchase no more than two (2) semesters of insurance while on Leave. Spouses and/or children of enrolled students are also eligible for the program.

2. What do I do if I get sick?

If it is a life-threatening emergency, you should go to the emergency room at a hospital or call 9-1-1 for an ambulance. If it is not an emergency, you should go to the Student Health Center. If they cannot treat you there, they will give you a referral to an outside doctor. The phone number for the Student Health Center is (716) 829-3316—this number will connect you with a nurse for consultations even if the Student Health Center is closed on nights and weekends.

3. What happens if I do not go to the Student Health Center and it is not an emergency?

You will have to pay a \$50.00 deductible from your own money for each injury or illness you had treated without a referral from the Student Health Center.

4. Where can I go for prescriptions if the Sub-Board Pharmacy in Michael Hall is closed?

The prescription drug program provided to all inbound SUNY international students provides a universal RX card for prescription. This prescription drug card will allow students to fill a covered prescription drug for up to a one month supply at any participating pharmacy and pay a \$10 co-pay for generic drugs and a \$20 co-pay for brand-name drugs. To locate a participating pharmacy, students should sign into the www.hthstudents.com web site, click on “Doctors, Hospitals and Pharmacies” and then click on “United States Pharmacy Search.” Universal RX contracts with almost all national pharmacy chains and a large number of local pharmacies as well. Dependents are not eligible for the prescription card and must purchase the drug in full at any pharmacy then submit for reimbursement with the Prescription Reimbursement form available at www.healthinsurance.buffalo.edu. During the academic year, both students and dependents should fill only at UB’s Pharmacy as there is no co-payment required for prescriptions purchased at UB.

5. Where can I go for medical treatment if I am unable to visit the Student Health Center?

You can go to any doctor, anywhere outside of your country of origin. You should try to use providers that participate with HTH Worldwide—to find these providers use the search function available at www.HTHstudents.com. (There is a *small* lifetime allowance for EMERGENCY ONLY medical care in your home country.) Emergency medical attention does not require a referral; however, if you opt for non-emergency medical treatment without a referral, you will pay the \$50.00 deductible (see question 3). If the Student Health Center is closed, and it is not an emergency, you can wait until the Student Health Center opens. If it is a medical emergency, you can visit any medical facility.

6. Where is the Student Health Center?

The Student Health Center is located in Michael Hall on the South Campus. The Health Center services are available seven days a week during the academic year. You can contact the Student Health Center for an appointment at (716) 829-3316. There is a physician on-call by phone even when the Student Health Center is closed.

7. What should I do if I do not have an insurance card but need medical treatment?

Visit www.HTHstudents.com and print off a temporary insurance card (our insurance certificate number is required to create the online account) or come to the SBI Student Medical Insurance Office at Suite 223 Student Union for the same service. If you are all ready at the provider's office, have them call HTH Worldwide Insurance Services at (888) 350-2002 or the SBI Student Medical Insurance Office at (716) 645-3036 to verify coverage.

8. What should I do if I already have private medical insurance?

If you already have insurance, you can request a waiver form from the SBI Student Medical Insurance Office at Suite 223 of the Student Union. Waivers are only accepted up to the first tuition bill due date on which the insurance charge appears. Only insurance policies that meet or exceed the SUNY plan benefits are eligible for a waiver. (Please Note: ICICI Lombard and the Oriental Insurance Company LTD are not considered comparable coverage with which to waive the SUNY International Health Insurance plan.)

9. What do I do if I get a bill from my doctor?

If you receive a bill from a healthcare provider that you do not understand, you may visit the SBI Student Medical Insurance Office (Suite 223 Student Union) to acquire a Student Claim Assistance Packet. This packet contains detailed instructions and all the required forms you must complete for the office to help follow-up on your claim. If you went to the Student Health Center before visiting your doctor but were still charged the \$50.00 deductible, you must have an HTH Claim form stamped by the Student Health Center confirming your referral. Once your claim form has been stamped (if applicable) and you have filled out all required forms, bring all materials to the SBI Student Medical Insurance Office along with the bill from your doctor. The bill will then be sent in to the insurance company for processing. It usually takes four to six weeks for claims to be reprocessed.

10. How do I know if a claim has been paid?

When a claim is processed, the insurance company will send you an Explanation of Benefits form. This form will show you how much the insurance company paid on your claim, and whether or not you have any further financial responsibility for the claim. You can also look up your claim at the insurance company's website: www.HTHstudents.com. It is important that each client-student create a user profile on this site. An Explanation of Benefits sheet for each claim is required by the SBI Student Medical Insurance Office in order to assist the student in processing and follow-up.

11. I submitted a claim, so why am I still getting bills from my doctor?

Many doctors will continue to send out bills for services until payment is received from the insurance company. You only need to submit the bill once for the insurance company to process it. Bear in mind it can take four to six weeks for medical bills to be received processed and settled between the insurance company and the healthcare providers.

12. How do I enroll my spouse and/or my children on the International Student Medical Insurance Plan?

You may print dependent enrollment forms with instructions off the SMI webpage at www.healthinsurance.buffalo.edu. You must complete the form and mail it directly to the insurance company with your payment by check or money order enclosed.

13. How much does the insurance cost?

The insurance costs \$91.00 per month for students, \$195.00 per month for spouses and \$105.00 per month for children living in the household with the parent. The rate for children remains unchanged regardless of the number of dependent children insured.

14. What does the insurance cover?

The insurance covers a wide variety of medical treatments from hospital visits, to prescriptions, to surgery, to mental health. For a policy brochure explaining your coverage, please visit www.healthinsurance.buffalo.edu. For specific benefit questions or information, you should contact HTH Worldwide directly at (888) 350-2002.

15. How do I contact the insurance company?

The insurance company is named HTH Worldwide Insurance Services. You can contact them by phone Toll Free at (888) 350-2002. They have a website designed for students to monitor the status of submitted claims, search for in-network doctors around the world, print off temporary insurance cards, and e-mail insurance company representatives. This extremely useful website is www.HTHstudents.com.

16. To whom should I speak regarding problems or concerns with my insurance?

You can contact the insurance company (see question 15) or you may speak to anyone in the SBI Student Medical Insurance Office at Suite 223 Student Union or e-mail asksmi@buffalo.edu.

17. I do not understand my Explanation of Benefits form.

The Explanation of Benefits form has all claim information broken into sections and columns. The row beneath the column headings includes your name, the name of the healthcare provider, the claim number in question, and the patient's certificate number (insurance ID number). The next section, divided into eleven columns, contains information about your specific claims. The first section, Dates of Service, lists what date(s) you received the medical attention. The Amount Charged column lists the total amount the healthcare provider billed to the insurance company. The Deductible column lists your deductible for the medical service; if you are a student with a Student Health Center referral this should be zero (Dependents of students and students on OPT have a \$50.00 deductible per condition that cannot be waived). Co-insurance is a column not applicable for those carrying the SUNY sponsored program. Co-payment lists any out-of-pocket payment due for a particular type of service. The Provider Responsibility column lists the amount of the claim that is written-off from your bill by a contracted PPO discount due to the healthcare provider's "in-network" status. The Code column explains how the insurance company has dealt with your claim up to this point. Any codes listed will be explained in the section below the chart labeled "Explanation of Responsibility Codes and Comments". Patient Responsibility is the total dollar amount not covered by the insurance policy that the patient must pay out-of-pocket. This is the sum of Deductible and Co-Payment columns. The final column, Benefit Amount, showcases the total dollar amount the insurance company covered on your behalf.

If the patient responsibility reads zero (0), the insurance company has settled the claim and paid the healthcare provider. If you continue to receive bills from the healthcare provider 30 days after the insurance company completed your claim, or your claim is denied and you desire assistance, bring your complete documentation to the SBI Student Medical Insurance Office at Suite 223 Student Union and complete an *International Student Insurance Claims Assistance Packet*.