Understanding the Wayne State University International Student Health Insurance Requirement

Why am I required to have health insurance?
Due to the high cost of health care in the United States, Wayne State University (WSU) and federal regulations require that all Exchange Visitors, International Students and their dependents have insurance coverage for sickness and illness during their entire program period. Health insurance allows you to focus on your academic success, and not unexpected health care expenses.

What insurance plan can I purchase?
All international students and their dependents, residing in the United States, must enroll in the WSU-sponsored Student Accident and Sickness Plan administered by AIG Educational Markets. Coverage may be purchased either annually or each semester. A registration hold will be placed on your account each semester until coverage is verified. Please DO NOT purchase alternative health insurance; in most instances it will not meet the WSU Health Insurance Standards which are compliant with the U.S. Federal Health Care Reform Law known as the Patient Protection and Affordable Care Act (PPACA).

Students with health insurance provided through a Wayne State University fellowship or Graduate Assistantship (GRA/GSA/GTA) must purchase repatriation each academic year. This coverage is also mandatory for F-2 and J-2 dependents.

What does the plan cover?
AIG provides:
- A local and nationwide network of doctors, hospitals and specialists
- Routine health services covered at 100% when you visit the University’s Campus Health Center
- Coverage for a wealth of services including doctor’s office visits, emergency care, dental services and prescription drugs
- Travel Assistance and Worldwide Unlimited Medical Evacuation and Repatriation

How much does it cost?

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Annual 8/1/15 – 7/31/16</th>
<th>Fall 8/1/15 – 12/31/15</th>
<th>Winter 1/1/16 – 5/6/16</th>
<th>Winter/Summer 1/1/16 – 7/31/16</th>
<th>Summer 5/7/16 – 7/31/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students</td>
<td>$1,183</td>
<td>$512</td>
<td>$408</td>
<td>$701</td>
<td>$315</td>
</tr>
<tr>
<td>Spouse</td>
<td>$1,560</td>
<td>$670</td>
<td>$532</td>
<td>$920</td>
<td>$409</td>
</tr>
<tr>
<td>Each Child</td>
<td>$1,299</td>
<td>$561</td>
<td>$446</td>
<td>$768</td>
<td>$344</td>
</tr>
</tbody>
</table>

Annual Stand-alone Medical Evacuation/Repatriation (Students with Fellowships or Graduate Assistantships)
Per Person (All Ages) $48

Though the price may seem expensive, it much more expensive not to have health insurance. For example, one visit to an emergency room can cost well over $1,500. Typical hospital charges, not including a surgery or tests, may cost $2,500 or more per day.

Where can I find more information?
Learn more about AIG at www.studentinsurance.com/schools/mi/wayne or call 1-866-622-6001. Enrollment questions can be answered by the University’s Health Insurance Advocate. They can be reached by email at oissinsurance@wayne.edu or by phone at 1-313-577-3422.
### Student Group Accident and Sickness

**Wayne State International Plan Policy**  
**Group Number:** CHH8036294  
**Effective Date:** 8/1/2015

#### SCHEDULE OF BENEFITS

**Annual Maximum Benefit:** Unlimited

**Deductible:** $150 per policy year per person

*Referral Requirement recommended (see Student Health Center Referral Section)*

**Out-of-Pocket Limit:** $5,000 per Covered Person/$10,000 per Family

This is a benefit that will apply in a Policy Year to a Covered Person who in that year reaches the Out-of-Pocket Limit shown above. The Out-of-Pocket Limit is reached when the amount of Eligible Expenses incurred by the Covered Person during the Policy Year for which no benefits are payable due to covered percentages less than 100%. The Out-of-Pocket Limit does not include charges in excess of Reasonable and Customary; expenses incurred for prescription drugs; charges in excess of any specified maximum or charges incurred for any services not covered under the Policy. When this benefit becomes applicable to a Covered Person during a Policy Year, covered percentages are increased to 100% for all Eligible Expenses incurred by the Covered Person in the remainder of that Policy Year up to any benefit maximum that may apply.

#### ELIGIBLE MEDICAL SERVICES

<table>
<thead>
<tr>
<th>IN-PATIENT BENEFITS</th>
<th>IN-NETWORK</th>
<th>NON-NETWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Room and Board and general nursing care (except ICU, limited to the average semi-private room rate)</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Hospitalization Expense Benefit (Miscellaneous Hospital Expense includes expenses incurred for anesthesia and operating room; laboratory tests and X-rays, (including professional fees); oxygen tent, drugs, medicines (excluding take-home drugs); dressings; and other Medically Necessary and prescribed Hospital expenses)</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Pre-Admission Testing (Hospital confinement must occur within (3)-(14) days of testing)</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Physiotherapy</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Surgical Expense</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Assistant Surgeon</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Anesthesia</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Doctor / Consultant Visits</strong></td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td><strong>Mental or Nervous Disorders &amp; Alcoholism and Substance Abuse Expense</strong></td>
<td>Same as any other Sickness</td>
<td>Same as any other Sickness</td>
</tr>
</tbody>
</table>

#### OUT-PATIENT BENEFITS

| **Day Surgery Facility/Miscellaneous when scheduled surgery is performed in a Hospital or outpatient facility or ambulatory surgical center, including: use of the operating room; laboratory tests and x-ray examinations (including professional fees); anesthesia; infusion therapy; drugs or medicines and supplies; therapeutic services (excluding physiotherapy or take home drugs and medicines)** | 80% of Allowable Charges | 60% of R&C Charges |
| **Surgical Expense** | 80% of Allowable Charges | 60% of R&C Charges |
| **Assistant Surgeon** | 80% of Allowable Charges | 60% of R&C Charges |
| **Anesthesia** | 80% of Allowable Charges | 60% of R&C Charges |
| **Doctor’s Fees Expense (Includes routine physical examination; and TB skin tests and T-Spot blood test when administered in the Doctor’s office.)** | 80% of Allowable Charges | 60% of R&C Charges |
Physiotherapy/Occupational Therapy - Benefits are payable for a condition that required surgery or Hospital confinement: (1) within 30 days immediately preceding such physiotherapy; or (2) within 30 days immediately following the attending Doctor’s release for rehabilitation

<table>
<thead>
<tr>
<th>Service Description</th>
<th>80% of Allowable Charges</th>
<th>60% of R&amp;C Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Emergency Room and Non-Scheduled Surgery (use of emergency room and supplies)</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Laboratory and X-Ray Examinations, CAT Scan/MRI/PET Scan</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Radiation Therapy and Chemotherapy</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Out of Hospital Doctor’s Fees* (Includes TB skin tests and T-Spot blood test when administered in the Doctor’s office)</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Mental or Nervous Disorders</td>
<td>Same as any other Sickness</td>
<td>Same as any other Sickness</td>
</tr>
<tr>
<td>Urgent Care Expenses</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Hospice Care Expenses (limited to 45 days per year)</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Home Health Care Expenses (limited to 45 days per year)</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Skilled Nursing Facility Expense (limited to 45 days per year)</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Preventive Services Benefit includes preventive services such as screenings, exams, and immunizations as specified by the Patient Protection and Affordable Care Act. To view a list of covered preventive services, log onto: <a href="http://www.hhs.gov/healthcare/prevention/index.html">www.hhs.gov/healthcare/prevention/index.html</a></td>
<td>100% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Consultant’s Fees Expense</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Alcoholism and Substance Abuse Expense -Outpatient and Intermediate Care Facility</td>
<td>Same as any other Sickness</td>
<td>Same as any other Sickness</td>
</tr>
<tr>
<td>Prescribed Medicine Expense. The Preferred Providers for prescriptions are through Informed Rx Of The Catamaran Corporation. For the complete listing of providers, Go to <a href="http://www.studentinsurance.com/Schools/Mi/Wayne/">http://www.studentinsurance.com/Schools/Mi/Wayne/</a> Benefits include prescribed FDA approved birth control methods.</td>
<td>100% of Eligible Expenses subject to the following co-payment amount per 30 day supply Generic: $25.00 Co-Pay and Brand Name: $50.00 Co-Pay The co-pay amount will be waived for prescribed FDA approved birth control methods.</td>
<td></td>
</tr>
<tr>
<td>Maternity Care</td>
<td>Same as any other Sickness</td>
<td>Same as any other Sickness</td>
</tr>
<tr>
<td>Injections and/or Immunizations</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
</tbody>
</table>

OTHER SERVICES/BENEFITS

<table>
<thead>
<tr>
<th>Service Description</th>
<th>80% of Allowable Charges</th>
<th>60% of R&amp;C Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance Expense</td>
<td>80% of Allowable Charges</td>
<td>80% of Allowable Charges</td>
</tr>
<tr>
<td>Durable Medical Equipment/Braces and Appliances (only upon a Doctor’s written prescription)</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
<tr>
<td>Dental Treatment Expense (Injury only)</td>
<td>80% of Allowable Charges</td>
<td>60% of R&amp;C Charges</td>
</tr>
</tbody>
</table>

Dental Treatment up to $500 maximum per policy year, subject to a $25 deductible per policy year:

<table>
<thead>
<tr>
<th>Service Description</th>
<th>80% of R&amp;C Charges</th>
<th>80% of R&amp;C Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic Services</td>
<td>50% of R&amp;C Charges</td>
<td>50% of R&amp;C Charges</td>
</tr>
<tr>
<td>Pediatric Dental Treatment Expense: (Covered Persons under age 19 only) limited to 2 oral exams per Policy Year Preventive Services</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

Pediatric Vision Care Expense:(Covered Persons under age 19 only) limited to 1 set of lenses and frames per Policy Year

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examinations</td>
<td>$ 25 Co-pay per visit</td>
</tr>
<tr>
<td>Materials</td>
<td>$ 75 Co-pay per visit</td>
</tr>
<tr>
<td>Maximum amount Per Policy Year</td>
<td>Unlimited</td>
</tr>
<tr>
<td>Standard Plastic Lenses: Single Vision, Bifocal, Trifocal, Lenticular, Progressive</td>
<td>$ 50 Co-pay per visit</td>
</tr>
</tbody>
</table>
Wayne State University International Student Health Insurance Plan

Benefit Highlights for 2015:

- Unlimited medical coverage per policy year (applicable co-pays will apply)
- Unlimited prescription drug coverage per policy year (applicable co-pays will apply)
- Preventive services as specified by the Patient Protection and Affordable Care Act (PPACA) covered at 100% with no co-pay at In Network Providers
- Preferred Provider Organization Network included
- Pharmacy Benefit Manager included

Service Highlights for 2015:

- Global Travel, Medical & Security assistance services. Includes assistance with physician referrals, prescription replacement, emergency travel arrangements and a host of other services *
- Student Health 101 - Health & Wellness Newsletter – access to monthly on-line interactive newsletter containing current health and wellness information related to college students

For additional information:
www.studentinsurance.com/schools/nc/wwc/

For more information or questions regarding the Plan contact us:
Toll-free phone: 1-888-722-1668
Web: www.studentinsurance.com

Awesome tips on fitness, nutrition, health care and more. Check us out at www.studentinsurance.com

This document provides only a brief description of the coverage available under policy series S30494NUFIC-NC (Rev. 6-12). The Policy contains reductions, limitations, exclusions and termination provisions. Full details of the coverage are contained in each Policy. If there are any conflicts between this document and the Policy, the Policy shall govern. Not all coverages are available in every state. Insurance is underwritten by National Union Fire Insurance Company of Pittsburgh, Pa., with its principal place of business in New York, NY. NAIC No. 19445

* Travel assistance services provided through Travel Guard
How to use your AIG Health Insurance Plan

Where should I go when I am sick or injured?

Make the Campus Health Center your first stop

- The Campus Health Center is located on the first floor of the Helen DeRoy Apartments. They can treat a variety of illnesses and minor injuries.
- Wellness services are covered at 100% with no co-pay
- The clinic can also provide you with a referral to receive specialized care from a doctor or hospital.
- They are open Monday – Friday 9:00 am - 6:00 pm. Call 313-577-5041 for walk-in hours or to schedule an appointment.
- Be sure to contact the Campus Health Center regarding services provided available to your dependents at their office. You may be responsible for some of the charges.

If you need to see a doctor and the Campus Health Center is closed, visit an Urgent Care Center

- Urgent Care Centers are extended hour providers that treat minor injuries and acute, non-life threatening illnesses.
- Patients are seen on a walk-in basis, so no appointment is necessary. The Urgent Care Centers closest to Wayne State’s campus are:

  **Riverview Urgent Care**
  7733 E. Jefferson  
  Detroit, MI 48214  
  (5 miles)  
  (313) 499-4900  
  Hours: 12:00 pm - 8:00 pm daily

  **Conner Creek Urgent Care**
  4777 E. Outer Drive  
  Detroit, MI 48234  
  (9 miles)  
  (313) 369-5690  
  Hours: 8:00 am - 10:00 pm daily

  **Samaritan Urgent Care**
  5575 Conner  
  Detroit, MI 48213  
  (6 miles)  
  (313) 924-0000  
  Hours: 8:00 am - 10:00 pm daily

  **Woodland Urgent Care**
  22341 W. Eight Mile Rd.  
  Detroit, MI 48219  
  (15 miles)  
  (313) 387-8700  
  Hours: 8:00 am - 10:00 pm daily

  **A.M. Medical Center**
  13031 Conant  
  Detroit, MI 48212  
  (6 miles)  
  (313) 893-5490  
  Hours: Mon - Fri 9:00 am-8:00 pm  
  Sat 10:00 am - 3:00 pm

  **Concentra Urgent Care**
  2151 E. Jefferson Ave  
  Detroit, MI 48207  
  (30 miles)  
  (313) 259-7990  
  Hours: Mon-Fri 8:00 am - 11:00 pm  
  Sat 8:00 am - 6:00 pm
For major and life-threatening illnesses or injuries, go to the Emergency Room (ER)

- Call 911 for life-threatening emergencies and an ambulance will transport you to the nearest hospital.
- The three hospitals closest to Wayne State’s campus are:
  - Detroit Receiving Hospital
    4201 Saint Antoine
    Detroit, MI 48201
  - Henry Ford Hospital
    2799 West Grand Boulevard
    Detroit, MI 48202
  - Harper Hospital
    3990 John R Street
    Detroit, MI 48201
  - Children’s Hospital of Michigan
    3901 Beaubien
    Detroit, MI 48201

- Only visit the ER in the event of an emergency! No charges will be covered for non-emergency medical services received in the emergency room.

Who accepts my insurance plan?

Use the Preferred Provider Lookup tool to locate specialists, Urgent Care Centers and Hospitals in the Cofinity Provider Network

1. Visit www.studentinsurance.com/schools/mi/wayne
2. Click on “Preferred Provider Lookup”
3. Select “Search Now”
4. Agree to the terms and conditions
5. Enter your location details
6. Choose the “Provider Type”
7. Click “Search”

Always present your insurance card when visiting a medical provider.

- You can login to your AIG account and print a copy of your insurance card within 24 to 48 hours of your online purchase.
- If you do not receive your permanent card in the mail within 2 to 3 weeks after purchasing your insurance, please contact the OISS Health Insurance Advocate, at oissinsurance@wayne.edu or 313-577-3422.
- If you lose your card, you can request a new card from AIG by calling 1-888-722-1668 or by going online to www.studentinsurance.com/schools/mi/wayne.
Office of International Students and Scholars

Campus Health Center
The Campus Health Center is an on-campus site managed and staffed by nurse practitioners who are nationally certified in their specialty areas. The center provides our students quality, cost effective health care.

**Health Care Services**
- x Acute Illness Care
  - o (sore throats, infections, rashes, etc.)
- x Allergy Injections
- x Chronic Illness Management
- x Immunizations
- x Travel health vaccinations
- x TB testing
- x Physical exams
- x Pre-participation Physicals
- x Medical Clearance for Health Profession Program
- x Annual Exams for Women (PAP Testing)
- x Women’s health and Diagnostic Testing

**Location**
Helen DeRoy Apartment Building
5200 Anthony Wayne Dr., Suite 115
Detroit, MI 48202
Phone: 313-577-5041
Fax: 313-577-9581
E-mail: campushealth@wayne.edu
Web: www.health.wayne.edu

*Note: You must dial 1-313 and the number, even if you are calling from the 313 area code.

**Hours**
Monday-Friday 9:00 AM - 6:00 PM
Remember: Make the Campus Health Center your first stop

- Wellness services are covered at 100% when you visit the Campus Health Center
- If you need to see a specialist, they can provide you with a referral.
- When you receive a referral, your annual $150 deductible is waived.

### Provider Cost Comparison – AIG International Plan

<table>
<thead>
<tr>
<th>Provider</th>
<th>Campus Health Center</th>
<th>Specialist (In-Network)</th>
<th>Urgent Care Center (In-Network)</th>
<th>Emergency Room (In-Network and Out-of-Network)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do I have to pay the deductible?</td>
<td>No</td>
<td>Waived with CHC referral</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Copay</td>
<td>$0</td>
<td>20% of the charges</td>
<td>$50 + 20% of the charges</td>
<td>20% of the charges (Non-emergency services are not covered)</td>
</tr>
</tbody>
</table>

Only go to the emergency room in the event of true emergency.

If you have a minor illness or injury, try going to the Campus Health Center or an Urgent Care Facility.

### Definitions

**Copay**

- This is a fee charged to a person for covered medical expenses.

**Deductible**

- The amount you have to pay for your medical services each year before the insurance company begins to pay their portion of the charges.

**PPO**

- A Preferred Provider Organization is a health plan that has contracts with group of preferred doctors and hospitals.

**Network**

- A group of doctors and hospitals who agree to a negotiated price for services they provide.

**In-Network**

- Health care provided by a doctor or hospital that is contracted with the provider network.

**Non-Network**

- Health care provided by a doctor or hospital that is **not** contracted with the Provider Network.
  (Please note you will have to pay more for these services.)

**Referral**

- A recommendation to receive specialized care from a doctor or hospital.