

# Student Injury and Sickness Insurance Plan for The College of William and Mary

2011-2012



The College of William and Mary is pleased to offer an Injury and Sickness Insurance Plan underwritten by UnitedHealthcare Insurance Company. Eligibility Statement: All international students are eligible and are required to participate in the plan on a mandatory basis. All full-time domestic undergraduate and graduate students admitted fall 2006 or after will be enrolled in this insurance plan and premium added to their tuition billing unless proof of comparable coverage is provided. All Visiting Faculty Scholars and Graduate Research and Graduate Teaching Assistants who are approved by the College to pursue academic work are eligible and are required to have the insurance plan unless proof of other insurance has been furnished. All other domestic full-time undergraduate or graduate students are eligible to enroll in this insurance plan. Eligible Dependents of those enrolled in the plan may participate in the plan on a voluntary basis.

## Highlights of the Coverage and Services offered by UnitedHealthcare StudentResources are:

- Up to \$75,000 per each Injury or Sickness Lifetime Maximum Benefit for Covered Medical Expenses.
- \$200 deductible per Insured Person per Policy year. \$250 Inpatient Deductible per Insured Person per Policy Year. Deductible waived for Outpatient Physician's Visits.
- Covered Medical Expenses for Preferred Providers are payable at 80% of Preferred Allowance and Out of Network benefits are payable at 50% of Usual and Customary charges (all benefits are subject to satisfaction of the deductible, specific benefit limitations, maximums and copays as described in the policy).
- Prescription Drug Benefits: \$15 copay for Tier 1 / \$30 copay for Tier 2 / \$50 copay for Tier 3 up to a 31-day supply per prescription. (\$1,200 maximum per policy year.) (Includes contraceptives.) Prescriptions must be filled at a UnitedHealthcare Network Pharmacy.
- Coverage available for eligible dependents.
- Scholastic Emergency Services – Domestic Students are covered when 100 miles or more away from their campus or home address. International Students are covered worldwide except in their home country.
- MyAccount, available through [www.UHCSR.com](http://www.UHCSR.com), allows insured students access 24/7 to check their claim status, search for network providers, print ID cards, enter accident details, view EOBs and enter additional insurance information online.
- Included with every policy, the UnitedHealth Allies® discount program provides 5% to 50% savings on dental and vision services, fitness clothing and equipment, and textbooks from McGraw-Hill Professional. The UnitedHealth Allies program is not insurance and is offered by UnitedHealth Allies, a UnitedHealth Group company.
- Also available for The College of William and Mary students is a United HealthCare Insurance Company fully insured Dental plan, to enroll go to [www.uhcsr.com](http://www.uhcsr.com).

This plan is underwritten by UnitedHealthcare Insurance Company and is based on policy 2011-1404-2.

Please read the plan brochure to determine whether this plan is right for you before you enroll. The plan brochure provides details of the coverage including costs, benefits, exclusions, any reductions or limitations and the terms under which the policy may be continued in force. Copies of the brochure are available from the College, or may be viewed and downloaded at [www.UHCSR.com](http://www.UHCSR.com).

If you have any questions, please contact Customer Service at 800-767-0700 or [customerservice@uhcsr.com](mailto:customerservice@uhcsr.com).

The Policy is a Non-Renewable One-Year Term Policy.

For online enrollment visit our website at [www.UHCSR.com](http://www.UHCSR.com), click on "Find My School's Plan" link and follow the online instructions or call 800-767-0700

Rates	Annual	Fall	Spring/Summer	Summer
	8/1/11 - 7/31/12	8/1/11 - 1/15/12	1/16/12 - 7/31/12	5/28/12 - 7/31/12
<b>Student</b>	\$1,574	\$724	\$850	\$280
<b>Spouse</b>	\$5,940	\$2,734	\$3,206	\$1,058
<b>Each Child</b>	\$3,583	\$1,694	\$1,934	\$638
<b>All Children</b>	\$4,776	\$2,198	\$2,578	\$851

Pre-Existing Condition means any condition for which medical advice, diagnosis, care or treatment was recommended or received within the 6 months immediately prior to the Insured's Effective date under the policy.

### Exclusions and Limitations

No benefits will be paid for: a) loss or expense caused by, contributed to, or resulting from; or b) treatment, services or supplies for, at, or related to:

1. Acupuncture;
2. Assistant Surgeon Fees;
3. Hyperkinetic syndromes, milieu therapy, learning disabilities, behavioral problems, parent-child problems, conceptual handicap, developmental delay or disorder or intellectual disability, except as specifically provided in the policy;
4. Circumcision;
5. Congenital conditions, except as specifically provided for Newborn or adopted Infants;
6. Cosmetic procedures, except cosmetic surgery required to correct an Injury for which benefits are otherwise payable under this policy or for newborn or adopted children; removal of warts, non-malignant moles and lesions;
7. Dental treatment; except for accidental Injury to Sound, Natural Teeth;
8. Elective Surgery or Elective Treatment;
9. Elective abortion;
10. Eye examinations, eye refractions, eyeglasses, contact lenses, prescriptions or fitting of eyeglasses or contact lenses, vision correction surgery, or other treatment for visual defects and problems; except when apart from the disease process;
11. Foot care including flat foot conditions, supportive devices for the foot, subluxations of the foot, care of corns, bunions (except capsular or bone surgery), calluses, toenails, fallen arches, weak feet, chronic foot strain and symptomatic complaints of the feet;
12. Hearing examinations or hearing aids; or other treatment for hearing defects and problems; except as provided in Benefits for Newborn Infant Hearing Screening. "Hearing defects" means any physical defect of the ear which does or can impair normal hearing, apart from the disease process;
13. Hirsutism; alopecia;
14. Immunizations, except as specifically provided in the policy; preventive medicines or vaccines, except where required for treatment of a covered Injury;
15. Injury caused by, contributed to, or resulting from the use of alcohol, illegal drugs, or any drugs or medicines that are not taken in the recommended dosage or for the purpose prescribed by the Insured Person's Physician;
16. Injury or Sickness for which benefits are paid or payable under any Workers' Compensation or Occupational Disease Law or Act, or similar legislation;
17. Injury sustained while (a) participating in any interscholastic, intercollegiate, or professional sport, contest or competition; (b) traveling to or from such sport, contest or competition as a participant; or (c) while participating in any practice or conditioning program for such sport, contest or competition;
18. Lipectomy;
19. Organ Transplants;
20. Participation in a riot or civil disorder; commission of or attempt to commit a felony; or fighting;
21. Outpatient Physiotherapy; except for a condition that required surgery or Hospital Confinement: 1) within the 30 days immediately preceding such Physiotherapy; or 2) within the 30 days immediately following the attending Physician's release for rehabilitation;
22. Pre-existing Conditions for a period of 6 months; except for individuals who have been continuously insured under the school's student insurance policy for at least 6 months. If an individual: (1)

had coverage under Creditable Coverage as defined and (2) that coverage was continuous to a date not more than 63 days prior to the Insured's Effective Date under this policy, the time under the previous plan will be credited toward the 6 consecutive months needed to provide benefits for a Pre-existing Condition.

Pre-existing Condition limitations will not apply:

- a) for individuals who, as of the last day of the thirty-day period beginning under the date of birth, are covered under Creditable Coverage;
  - b) any child who is adopted or placed for adoption before attaining eighteen years of age and who, as of the last day of the thirty-day period beginning on the date of the adoption or placement for adoption, is covered under Creditable Coverage; or
  - c) to pregnancy;
23. Prescription Drugs, services or supplies as follows:
    - a. Therapeutic devices or appliances, including: hypodermic needles, syringes, support garments and other non-medical substances, regardless of intended use, except as specifically provided in the Benefits for Diabetes;
    - b. Immunization agents, biological sera, blood or blood products administered on an outpatient basis; except as specifically provided in the Benefits for Home Treatment of Hemophilia and Congenital Bleeding Disorders;
    - c. Drugs labeled, "Caution - limited by federal law to investigational use" or experimental drugs;
    - d. Products used for cosmetic purposes;
    - e. Drugs used to treat or cure baldness; anabolic steroids used for body building;
    - f. Anorectics - drugs used for the purpose of weight control;
    - g. Fertility agents, such as Parlodel, Pergonal, Clomid, Profasi, Metrodin, or Serophene;
    - h. Growth hormones; or
    - i. Refills in excess of the number specified or dispensed after one (1) year of date of the prescription.
  24. Reproductive/Infertility services including but not limited to: family planning; fertility tests; infertility (male or female), including any services or supplies rendered for the purpose or with the intent of inducing conception; premarital examinations; impotence, organic or otherwise; tubal ligation; vasectomy; sexual reassignment surgery; reversal of sterilization procedures;
  25. Routine Newborn Infant Care, well-baby nursery and related Physician charges in excess of 48 hours for vaginal delivery or 96 hours for cesarean delivery;
  26. Routine physical examinations and routine testing; preventive testing or treatment; screening exams or testing in the absence of Injury or Sickness, except as specifically provided in the policy;
  27. Services provided normally without charge by the Health Service of the Policyholder; or services covered or provided by the student health fee;
  28. Skydiving, parachuting, hang gliding, glider flying, parasailing, sail planing, bungee jumping, or flight in any kind of aircraft, except while riding as a passenger on a regularly scheduled flight of a commercial airline;
  29. Sleep disorders;
  30. Supplies, except as specifically provided in the policy;
  31. Surgical breast reduction, breast augmentation, breast implants, breast prosthetic devices; or gynecomastia, except as specifically provided in the policy;
  32. Treatment in a Government hospital, unless there is a legal obligation for the Insured Person to pay for such treatment;
  33. War or any act of war, declared or undeclared; or while in the armed forces of any country (a pro-rata premium will be refunded upon request for such period not covered); and
  34. Weight management, weight reduction, nutrition programs, treatment for obesity, (except morbid obesity) surgery for removal of excess skin or fat.